

Date: 11/11/2025 3:18:58 PM

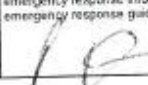
# Master Bill Of Lading

Page 1 of 1

<b>SHIP FROM</b> Name: E & E COMPANY LTD Address: 550 Northport Parkway City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>		Master Bill of Lading Number: 06757166001126750	
<b>SHIP TO</b> Name: Kohls Dist. Center - #00810 Address: 7855 County Road 140 Findlay D.C., 00810 City/State/Zip: Findlay, OH 45840 SID#: _____ FOB: <input type="checkbox"/>		CARRIER NAME: ABF Trailer number: 553288 Seal number(s): SCAC: ABF Pro Number:	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> Name: Address: City/State/Zip:		Freight Charge Terms: Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/> <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS: ME# 916723743		Appointment Time AM PM    Actual Driver Arrival Time AM PM    Driver Departure Time AM PM	

CUSTOMER ORDER INFORMATION						ADDITIONAL SHIPPER INFO		
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	DC#	Supplier#	
15816450	Dept#: 115	5	99.10	Y	N	06757166001125401	00810	
15819913	Dept#: 115	10	131.00	Y	N	06757166001125388	00810	
15812574	Dept#: 115	8	68.72	Y	N	06757168001125395	00810	
<b>Grand Total</b>		23	298.82					

HANDLING UNIT				PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 366.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #	CLASS					
18	ctns			199.72		Bath Towel, Beach Towel	49260-4	175		
5	ctns			99.10		Shower curtain	49385	77.5		
23				298.82		<b>Grand Total</b>				

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____		COD Amount \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).			
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.		The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Shipper Signature _____	
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations. <i>Darney Cooper</i>		Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	
CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. 			

NOV 11 2025

**SHIPPED**

Order No.: 75094353 Order Date: 10/30/2025 Customer: KOHLS DIST. CENTER - Customer PO No.: 15812574  
#00810

<b>SHIP FROM:</b> E & E COMPANY LTD 550 NORTHPORT PARKWAY PORT WENTWORTH, GA 31407	<b>BILL TO:</b> KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	<b>SHIP TO:</b> KOHLS DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	<b>Shipping Date:</b> 11/11/2025  <b>Shipment No.:</b> 600112539
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
53SNMKIHT03	KL73-3739	022164588101	Coral Ogee Hand Towel	EA	24	192	8	192	8

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<b>Total Weight:</b>	<b>68.72</b>
<b>Total Quantity Ordered:</b>	<b>192</b>
<b>Total Cartons Ordered:</b>	<b>8</b>
<b>Total Quantity Shipped:</b>	<b>192</b>
<b>Total Cartons Shipped:</b>	<b>8</b>