

Date: 12/10/2025 12:10:06 PM

Master Bill Of Lading

Page 1 of 4

| | | | |
|---|--------------------------|---|-------------------------------------|
| SHIP FROM | | Master Bill of Lading Number: 06757163001110222 | |
| Name: | E & E COMPANY LTD | | |
| Address: | 221 Hanson Way | | |
| City/State/Zip: | Woodland, CA 95776 | | |
| SID#: | | FOB: <input type="checkbox"/> | |
| SHIP TO | | CARRIER NAME: GILBERT WEST | |
| Name: | KOHL X-Dock Gilbert West | DC#: | |
| | | Div. | |
| Address: | 701 Malaga St | Trailer number: | 531480 |
| | | Seal number(s): | 69894634 |
| City/State/Zip: | Ontario, CA 91761 | SCAC: | GBWS |
| SID#: | | Pro Number: | |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | Freight Charge Terms: | |
| Name: | | Prepaid: | <input type="checkbox"/> |
| Address: | | Collect: | <input checked="" type="checkbox"/> |
| | | 3rd Party: | <input type="checkbox"/> |
| City/State/Zip: | | <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box) | |
| SPECIAL INSTRUCTIONS: | | Appointment Time | Actual Driver Arrival Time |
| ME# 918426266 | | 10:00 AM | 11:00 AM |
| | | | Driver Departure Time |
| | | | 12:30 AM |

| CUSTOMER ORDER INFORMATION | | | | | | | |
|----------------------------|------------|------------|-------------------------|-----|-------------------|-----------------------------|-----------|
| CUSTOMER ORDER NUMBER | # PKGS CTN | WEIGHT LBS | PALLET/SLIP (CIRCLEONE) | | BOL# | ADDITIONAL SHIPPER INFO DC# | Supplier# |
| 15812573 | Dept#: 115 | 6 | 47.52 | Y N | 06757163001110093 | 00865 | |
| 15784602 | Dept#: 211 | 37 | 497.57 | Y N | 06757163001110024 | 00860 | |
| 15784602 | Dept#: 211 | 73 | 983.03 | Y N | 06757163001109943 | 00830 | |
| 15812573 | Dept#: 115 | 6 | 47.52 | Y N | 06757163001109974 | 00830 | |
| 15812572 | Dept#: 115 | 10 | 79.20 | Y N | 06757163001110086 | 00865 | |
| 15812572 | Dept#: 115 | 1 | 7.92 | Y N | 06757163001110161 | 00885 | |
| 15812573 | Dept#: 115 | 2 | 15.84 | Y N | 06757163001110215 | 00890 | |
| 15812573 | Dept#: 115 | 2 | 15.84 | Y N | 06757163001110055 | 00860 | |
| 15784602 | Dept#: 211 | 91 | 1227.41 | Y N | 06757163001110062 | 00865 | |
| 15784602 | Dept#: 211 | 110 | 1481.70 | Y N | 06757163001110185 | 00890 | |
| 15816448 | Dept#: 115 | 18 | 412.20 | Y N | 06757163001110079 | 00865 | |
| 15812572 | Dept#: 115 | 4 | 31.68 | Y N | 06757163001110208 | 00890 | |
| 15816448 | Dept#: 115 | 16 | 366.40 | Y N | 06757163001109950 | 00830 | |

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of this property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount \$ _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

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 classofed, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT. <i>For 12/10/25</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. <i>X R Day 383 SLG 12-10-25</i> |
|--|--|--|--|

| | | | |
|------------------|--------------------|---|--------------------------|
| SHIP FROM | | Master Bill of Lading Number: 06757163001110222 | |
| Name: | E & E COMPANY LTD | | |
| Address: | 221 Hanson Way | | |
| City/State/Zip: | Woodland, CA 95776 | | |
| SID#: | | FOB: | <input type="checkbox"/> |

| | | | |
|-----------------|--------------------------|-----------------------------------|--------------------------|
| SHIP TO | | CARRIER NAME: GILBERT WEST | |
| Name: | KOHL X-Dock Gilbert West | DC#: | |
| | | Div. | |
| Address: | 701 Malaga St | Trailer number: | 531480 |
| | | Seal number(s): | 69894634 |
| City/State/Zip: | Ontario, CA 91761 | SCAC: | GBWS |
| SID#: | | Pro Number: | |
| | | FOB: | <input type="checkbox"/> |

| | | | |
|---|--|---|-------------------------------------|
| THIRD PARTY FREIGHT CHARGES BILL TO: | | Freight Charge Terms: | |
| Name: | | Prepaid: | <input type="checkbox"/> |
| Address: | | Collect: | <input checked="" type="checkbox"/> |
| | | 3rd Party: | <input type="checkbox"/> |
| City/State/Zip: | | <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box) | |
| SPECIAL INSTRUCTIONS: | | Appointment Time | Actual Driver Arrival Time |
| ME# 918426266 | | AM PM | AM PM |
| | | Driver Departure Time | AM PM |

| CUSTOMER ORDER INFORMATION | | | | | | | | |
|----------------------------|------------|------------|--------------------------|---|------|-------------------------|-------|-----------|
| CUSTOMER ORDER NUMBER | # PKGS CTN | WEIGHT LBS | PALLET/SLIP (CIRCLE ONE) | | BOL# | ADDITIONAL SHIPPER INFO | | Supplier# |
| | | | | | | DC# | | |
| 15816448 | Dept#: 115 | 17 | 389.30 | Y | N | 06757163001110116 | 00875 | |
| 15812572 | Dept#: 115 | 10 | 79.20 | Y | N | 06757163001109967 | 00830 | |
| 15812572 | Dept#: 115 | 7 | 55.44 | Y | N | 06757163001109929 | 00810 | |
| 15812572 | Dept#: 115 | 2 | 15.84 | Y | N | 06757163001110048 | 00860 | |
| 15812573 | Dept#: 115 | 1 | 7.92 | Y | N | 06757163001110178 | 00885 | |
| 15816448 | Dept#: 115 | 9 | 206.10 | Y | N | 06757163001109981 | 00840 | |
| 15784602 | Dept#: 211 | 77 | 1051.27 | Y | N | 06757163001109905 | 00810 | |
| 15812572 | Dept#: 115 | 3 | 23.76 | Y | N | 06757163001110123 | 00875 | |
| 15784602 | Dept#: 211 | 44 | 597.74 | Y | N | 06757163001110017 | 00840 | |
| 15784602 | Dept#: 211 | 42 | 569.12 | Y | N | 06757163001110109 | 00875 | |
| 15812573 | Dept#: 115 | 1 | 7.92 | Y | N | 06757163001110000 | 00840 | |
| 15816448 | Dept#: 115 | 4 | 91.60 | Y | N | 06757163001110154 | 00885 | |
| 15812573 | Dept#: 115 | 2 | 15.84 | Y | N | 06757163001110130 | 00875 | |

Where the rate is dependent on value, shippers are required to advise 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 of the DOT.

| | |
|--|--|
| Trailer Loaded: | Freight Counted: |
| <input checked="" type="checkbox"/> By Shipper | <input checked="" type="checkbox"/> By Shipper |
| <input type="checkbox"/> By Driver | <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.

Date: 12/10/2025 12:10:06 PM

Master Bill Of Lading

Page 3 of 4

| | | | |
|---|--------------------------|--|-------------------------------------|
| SHIP FROM | | Master Bill of Lading Number: 06757163001110222 | |
| Name: | E & E COMPANY LTD | | |
| Address: | 221 Hanson Way | | |
| City/State/Zip: | Woodland, CA 95776 | | |
| SID#: | | FOB: <input type="checkbox"/> | |
| SHIP TO | | CARRIER NAME: GILBERT WEST | |
| Name: | KOHL X-Dock Gilbert West | DC#: | |
| | | Div.: | |
| Address: | 701 Malaga St | Trailer number: | 531480 |
| | | Seal number(s): | 69894634 |
| City/State/Zip: | Ontario, CA 91761 | SCAC: | GBWS |
| SID#: | | Pro Number: | |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | Freight Charge Terms: | |
| Name: | | Prepaid: | <input type="checkbox"/> |
| Address: | | Collect: | <input checked="" type="checkbox"/> |
| | | 3rd Party: | <input type="checkbox"/> |
| City/State/Zip: | | <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING | |
| SPECIAL INSTRUCTIONS: | | Appointment Time | Actual Driver Arrival Time |
| ME# 918426266 | | AM | AM |
| | | PM | PM |
| | | Driver Departure Time | AM |
| | | | PM |

| CUSTOMER ORDER INFORMATION | | | | | | | |
|----------------------------|------------|------------|-------------------------|------|-----------------------------|-------------------|-------|
| CUSTOMER ORDER NUMBER | # PKGS CTN | WEIGHT LBS | PALLET/SLIP (CIRCLEONE) | BOL# | ADDITIONAL SHIPPER INFO DC# | Supplier# | |
| 15816448 | Dept#: 115 | 17 | 389.30 | Y | N | 06757163001109912 | 00810 |
| 15816448 | Dept#: 115 | 17 | 389.30 | Y | N | 06757163001110192 | 00890 |
| 15812572 | Dept#: 115 | 3 | 23.76 | Y | N | 06757163001109998 | 00840 |
| 15816448 | Dept#: 115 | 6 | 137.40 | Y | N | 06757163001110031 | 00860 |
| 15784602 | Dept#: 211 | 57 | 777.17 | Y | N | 06757163001110147 | 00885 |
| 15812573 | Dept#: 115 | 2 | 15.84 | Y | N | 06757163001109936 | 00810 |
| Grand Total | | 697 | 10057.65 | | | | |

| CARRIER INFORMATION | | | | | | | | |
|---------------------|------|---------|------|------------|----------|---|----------|-------|
| 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 236 of NMFC Item 399</small> | LTL ONLY | |
| QTY | TYPE | QTY | TYPE | | | | NMFC # | CLASS |
| 62 | ctns | | | 491.04 | | Bath Towel, Beach Towel | 49260-4 | 175 |
| 531 | ctns | | | 7185.01 | | Comforters, Bedspreads Sub 3 - 2 but less than 4 | 49260-3 | 250 |
| 104 | ctns | | | 2381.60 | | Shower curtain | 49385 | 77.5 |

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: Prepaid: Customer check acceptable:

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 of the DOT.

Trailer Loaded:

- By Shipper
 By Driver

Freight Counted:

- By Shipper
 By Driver/pallets said to contain
 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.

Order No.: 75382742 Order Date: 11/23/2025 Customer: KOHLS DIST. CENTER - Customer PO No.: 15816448
#00875

| | | | |
|--|---|---|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US | Shipping Date: 12/10/2025 Shipment No.: 300111011 |
|--|---|---|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|---------------|-----------------|--------------|--------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWSC1 | 11SNMEDWSC 1 | 086569491756 | Spa Shower Curtain | EA | 12 | 108 | 9 | 108 | 9 |
| 11SNMEDWSC2 | 11SNMEDWSC 2 | 086569491763 | Spa Shower Curtain | EA | 12 | 96 | 8 | 96 | 8 |

| | |
|--------------------------------|--------------|
| Total Weight: | 389.3 |
| Total Quantity Ordered: | 204 |
| Total Cartons Ordered: | 17 |
| Total Quantity Shipped: | 204 |
| Total Cartons Shipped: | 17 |

Order No.: 75382737 Order Date: 11/23/2025 Customer: KOHLS DIST. CENTER - #00830 Customer PO No.: 15816448

| | | | |
|--|--|--|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US | Shipping Date: 12/10/2025 Shipment No.: 300110995 |
|--|--|--|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|---------------|-----------------|--------------|--------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWSC1 | 11SNMEDWSC 1 | 086569491756 | Spa Shower Curtain | EA | 12 | 96 | 8 | 96 | 8 |
| 11SNMEDWSC2 | 11SNMEDWSC 2 | 086569491763 | Spa Shower Curtain | EA | 12 | 96 | 8 | 96 | 8 |

| | |
|--------------------------------|--------------|
| Total Weight: | 366.4 |
| Total Quantity Ordered: | 192 |
| Total Cartons Ordered: | 16 |
| Total Quantity Shipped: | 192 |
| Total Cartons Shipped: | 16 |

Order No.: 75382736 **Order Date:** 11/23/2025 **Customer:** KOHLS DIST. CENTER - #00810 **Customer PO No.:** 15816448

| | | | |
|--|--|---|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US | Shipping Date: 12/10/2025 Shipment No.: 300110991 |
|--|--|---|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|---------------|-----------------|--------------|--------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWSC1 | 11SNMEDWSC 1 | 086569491756 | Spa Shower Curtain | EA | 12 | 84 | 7 | 84 | 7 |
| 11SNMEDWSC2 | 11SNMEDWSC 2 | 086569491763 | Spa Shower Curtain | EA | 12 | 120 | 10 | 120 | 10 |

| | |
|--------------------------------|--------------|
| Total Weight: | 389.3 |
| Total Quantity Ordered: | 204 |
| Total Cartons Ordered: | 17 |
| Total Quantity Shipped: | 204 |
| Total Cartons Shipped: | 17 |

Order No.: 75382693 **Order Date:** 11/23/2025 **Customer:** KOHLS DIST. CENTER - **Customer PO No.:** 15812572
 #00810

| | | | |
|--|--|---|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US | Shipping Date: 12/10/2025 Shipment No.: 300110992 |
|--|--|---|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|----------------|----------------|--------------|-----------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWHT02GS | 11SNMEDWHT02GS | 086569492012 | Spa Border Hand Towel | EA | 24 | 96 | 4 | 96 | 4 |
| 11SNMEDWHT02T | 11SNMEDWHT02T | 086569491992 | Spa Border Hand Towel | EA | 24 | 72 | 3 | 72 | 3 |

| | |
|--------------------------------|--------------|
| Total Weight: | 55.44 |
| Total Quantity Ordered: | 168 |
| Total Cartons Ordered: | 7 |
| Total Quantity Shipped: | 168 |
| Total Cartons Shipped: | 7 |

Order No.: 75382698 Order Date: 11/23/2025 Customer: KOHLS DIST. CENTER - Customer PO No.: 15812572
#00860

| | | | |
|--|---|---|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US | Shipping Date: 12/10/2025 Shipment No.: 300111004 |
|--|---|---|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|--------------------|--------------------|--------------|-----------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWHT02G S | 11SNMEDWHT 02GS | 086569492012 | Spa Border Hand Towel | EA | 24 | 24 | 1 | 24 | 1 |
| 11SNMEDWHT02T | 11SNMEDWHT 02T | 086569491992 | Spa Border Hand Towel | EA | 24 | 24 | 1 | 24 | 1 |

| | |
|--------------------------------|--------------|
| Total Weight: | 15.84 |
| Total Quantity Ordered: | 48 |
| Total Cartons Ordered: | 2 |
| Total Quantity Shipped: | 48 |
| Total Cartons Shipped: | 2 |

Order No.: 75382754 **Order Date:** 11/23/2025 **Customer:** KOHLS DIST. CENTER - #00840 **Customer PO No.:** 15812573

| | | | |
|--|--|--|--|
| SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776 | BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US | SHIP TO: KOHLS DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US | Shipping Date: 12/10/2025 Shipment No.: 300111000 |
|--|--|--|--|

| Cust. SKU No. | Item No. | UPC | Description | UOM | Case Pack Qty | Qty Ordered | Ctns Ordered | Qty Shipped | Ctns Shipped |
|---------------|---------------|--------------|-----------------------|-----|---------------|-------------|--------------|-------------|--------------|
| 11SNMEDWHT02T | 11SNMEDWHT02T | 086569491992 | Spa Border Hand Towel | EA | 24 | 24 | 1 | 24 | 1 |

| | |
|--------------------------------|-------------|
| Total Weight: | 7.92 |
| Total Quantity Ordered: | 24 |
| Total Cartons Ordered: | 1 |
| Total Quantity Shipped: | 24 |
| Total Cartons Shipped: | 1 |