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

Master Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
Address: 221 Hanson Way
City/State/Zip: Woodland, CA 95776
SID#:
FOB: ☐

Master Bill of Lading Number: 06757163001110222

SHIP TO

Name: KOHL X-Dock Gilbert West
DC#:
Div.
Address: 701 Malaga St
City/State/Zip: Ontario, CA 91761
SID#:
FOB: ☐

CARRIER NAME: GILBERT WEST
Trailer number: 531480
Seal number(s): 69894634
SCAC: GBWS
Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

Freight Charge Terms:
Prepaid: ☐ Collect: ☒ 3rd Party: ☐

☒ (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:
ME# 918426266

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
10:00 AM PM	11:00 AM PM	12:30 AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER		# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO BOL#	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 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.
FOOK 12/10/25

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.
X R Ley 3183 SLC 12-10-25

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

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FOB: ☐

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SHIP TO

Name: KOHL X-Dock Gilbert West
DC#:
Div.
Address: 701 Malaga St
City/State/Zip: Ontario, CA 91761
SID#:
FOB: ☐

CARRIER NAME: GILBERT WEST
Trailer number: 531480
Seal number(s): 69894634
SCAC: GBWS
Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

Freight Charge Terms:
Prepaid: ☐ Collect: ☒ 3rd Party: ☐

☒ (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:
ME# 918426266

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER		# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO BOL#	DC#	Supplier#
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 stated specifically in writing the agreed or declared value of the property as follows:
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_____ per _____

COD Amount $ _____
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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Shipper Signature

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Trailer Loaded:
☒ By Shipper
☐ By Driver

Freight Counted:
☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Piecas

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Name:
Address:
City/State/Zip:

Freight Charge Terms:
Prepaid: ☐ Collect: [X] 3rd Party: ☐

[X] (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

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CUSTOMER ORDER NUMBER		# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO BOL#	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 QTY	HANDLING UNIT TYPE	PACKAGE QTY	PACKAGE TYPE	WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION (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(e) of NMFC Item 360)	LTL ONLY NMFC #	LTL ONLY 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

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COD Amount $ _____
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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[X] By Shipper
☐ By Driver

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[X] By Shipper
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