

Date: 3/26/2026 8:11:14 AM

Bill Of Lading

Page 1 of 2

SHIP FROM		Bill of Lading Number: 06757163001147730										
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 PHONE: 530-669-5991 VENDOR: 10316700		FOB: <input type="checkbox"/>  (402)06757163001147730										
SHIP TO		CARRIER NAME: XPO LOGISTICS										
Name: Fred Meyer Stores Location #: 00790880944 61 Address: Chehalis RSC DC - Home HCC 224 Maurin Rd., 0079088094461 City/State/Zip: Chehalis, WA 98532 CID#: _____ Dept: 0083		Responsible Acct.No: Trailer number: 3159493 Seal number(s): SCAC: CNWY Pro Number: 59496674  594-986674 XPO										
THIRD PARTY FREIGHT CHARGES BILL TO:		Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a bill from contract. If any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Freight, Inc., rates tariff. (see www.xpo.com)										
Name: Address: City/State/Zip:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____										
SPECIAL INSTRUCTIONS: Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading										
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Appointment Time</td> <td>Actual Driver Arrival Time</td> <td>Driver Departure Time</td> </tr> <tr> <td>AM</td> <td>AM</td> <td>AM</td> </tr> <tr> <td>PM</td> <td>PM</td> <td>PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time										
AM	AM	AM										
PM	PM	PM										

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
0044148579	22	128.81	Y N	
0044148583	328	2179.74	Y N	
0044148584	158	914.84	Y N	
0044148586	8	42.52	Y N	
Grand Total		516	3265.91	

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and protected as to insure safe transportation with ordinary care. See Section 2(a) of NMFC Item 329.</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet		
		158	ctns	914.84		Mattress Pads	149265	100
		22	ctns	128.81		Panels, Valances	49260-4	175
		2	ctns	11.00		Pillow Sub 3 - 2 but less than 4	49260-3	250
		334	ctns	2211.26		Sheet Set & Pillowcase	49260-3	250

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"/>
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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. <p style="text-align: right;">Shipper Signature</p>	
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.  3/26/26	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. mm xpo 3-26-26		

Order No.: 76400044 Order Date: 03/17/2026 Customer: FRED MEYER STORES Customer PO No.: 0044148584

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: FRED MEYER STORES (CO.111) P.O. BOX 305248 NASHVILLE, TN 37230 US	SHIP TO: FRED MEYER STORES CHEHALIS RSC DC - HOME HCC 224 MAURIN RD. CHEHALIS, WA 98532 US	Shipping Date: 03/26/2026 Shipment No.: 300114773
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
46039118	FR16-2499	888777169492	Ultra Soft Mattress Pad	EA	2	36	18	36	18
47539112	FR16-2500	888777169461	Ultra Soft Mattress Pad	EA	2	34	17	34	17
16039117	FR16-2501	888777169485	Ultra Soft Mattress Pad	EA	2	64	32	64	32
36039111	FR16-2502	888777169478	Ultra Soft Mattress Pad	EA	2	16	8	16	8
24129114	FR16-2503	888777169546	Waterproof Mattress Pad	EA	2	48	24	48	24
14129117	FR16-2505	888777169508	Waterproof Mattress Pad	EA	2	42	21	42	21
04129110	FR16-2506	888777169522	Waterproof Mattress Pad	EA	2	60	30	60	30
93129114	FR16-2507	888777169515	Waterproof Mattress Pad	EA	2	16	8	16	8

Total Weight:	914.84
Total Quantity Ordered:	316
Total Cartons Ordered:	158
Total Quantity Shipped:	316
Total Cartons Shipped:	158