


KOHL'S EXPORT SHEET

12/03/18-12/08/18

PO NOS.	ORDER#	Ship To	UNITS	WEIGHT	Routing Cube	CTNS	Pallet Count
11926322	4839086	00810	94	334	26.43	47	1.00
11926557	4839073	00810	162	590	46.15	81	1.00
11941371	4833108	00810	18	221	88.41	18	1.00
11963916	4833115	00810	107	1,204	524.98	107	6.00
11979634	4833123	00810	8	95	41.49	8	1.00
12054139	4834232	00810	148	2,044	664.03	148	8.00
12054144	4834241	00810	19	262	85.57	19	1.00
12054148	4834250	00810	50	690	251.94	50	3.00
		00810 Total	606	5,439	1,729.00	478	22.00
11926322	4839087	00830	148	519	41.14	74	1.00
11926557	4839074	00830	48	172	13.58	24	1.00
11941371	4833109	00830	30	367	147.02	30	2.00
11963916	4833116	00830	34	383	167.23	34	2.00
11979634	4833124	00830	4	48	20.75	4	1.00
12054139	4834233	00830	143	1,976	642.24	143	8.00
12054144	4834242	00830	22	303	98.65	22	2.00
12054148	4834251	00830	49	665	243.31	49	3.00
		00830 Total	478	4,434	1,373.92	380	20.00
11926322	4839088	00840	6	23	1.75	3	1.00
11926557	4839075	00840	100	351	27.88	50	1.00
11963916	4833117	00840	70	797	347.50	70	4.00
11979634	4833125	00840	4	48	20.75	4	1.00
12054139	4834234	00840	106	1,476	481.36	106	6.00
12054144	4834243	00840	31	425	138.33	31	2.00
12054148	4834252	00840	40	548	200.11	40	3.00
		00840 Total	357	3,667	1,217.68	304	18.00
11926322	4839089	00855	110	392	30.89	55	1.00
11926557	4839076	00855	14	50	3.92	7	1.00
11941371	4833110	00855	33	402	161.16	33	2.00
11963916	4833118	00855	10	112	48.83	10	1.00
12054139	4834235	00855	153	2,117	688.48	153	8.00
12054144	4834244	00855	23	319	104.39	23	2.00
12054148	4834253	00855	30	410	149.80	30	2.00
		00855 Total	373	3,801	1,187.47	311	17.00
11926322	4839090	00860	22	86	6.56	11	1.00
11926895	4839081	00860	228	807	63.83	114	1.00
11941371	4833111	00860	3	38	15.16	3	1.00
12054139	4834236	00860	67	927	301.51	67	4.00
12054144	4834245	00860	30	420	139.04	30	2.00
12054148	4834254	00860	46	630	230.30	46	3.00
		00860 Total	396	2,909	756.40	271	12.00
11926322	4839091	00865	138	474	37.96	69	1.00
11926557	4839077	00865	42	152	11.94	21	1.00
11941371	4833112	00865	10	122	48.67	10	1.00
11963916	4833119	00865	26	292	127.26	26	2.00
11979634	4833126	00865	1	12	5.19	1	1.00
12054139	4834237	00865	53	730	236.69	53	3.00
12054144	4834246	00865	5	69	22.25	5	1.00
12054148	4834255	00865	38	517	188.91	38	3.00
		00865 Total	313	2,367	678.87	223	13.00

Date: 12/6/2018 1:03:01 PM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757161136896066	
Name: E & E COMPANY LTD		 (402)06757161136896066	
Address: 400 Longfellow Ct			
City/State/Zip: Livermore, CA 94550		CARRIER NAME: Schneider National	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: SNLU992526	
VENDOR: 000074879		Seal number(s): 9146539	
SHIP TO		SCAC: SCNX	
Name: Kohl's Dist. Center - #00865		Pro Number:	
Address: Mamakating (Wurtsboro) D.C.			
City/State/Zip: Wurtsboro, NY 12790			
CID#: 781263571			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:		Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: ME#781263571 Packing List is Attached			

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO		
12054148	Dept#: 211	38	516.66	Y	N	
11941371	Dept#: 211	10	121.54	Y	N	
12054144	Dept#: 211	5	68.52	Y	N	
11926557	Dept#: 011	21	152.40	Y	N	
11926322	Dept#: 011	69	474.17	Y	N	← 860
11963916	Dept#: 211	26	291.80	Y	N	
12054139	Dept#: 211	53	729.70	Y	N	
11979634	Dept#: 211	1	11.90	Y	N	
Grand Total		223	2366.69			

<p>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 _____</p>	<p>COD Amount: _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).	
<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right; font-weight: bold;">Shipper Signature</p>
<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.</p> <p><i>[Signature]</i> 12-06-18</p>	<p>Trailer Loaded:</p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver</p> <p>Freight Counted:</p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver/pallets said to contain</p> <p><input type="checkbox"/> By Driver/Pieces</p>
<p>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. Property described above is received in good order, except as noted.</p> <p>Appt Time: 1:30 In: 12:45 Out: 1:15 PM Driver Signature: <i>X Grubbs 12/06/18</i></p>	

Date: 12/5/2018 4:48:42 PM

Master Bill Of Lading

SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **400 Longfellow Ct**
 City/State/Zip: **Livermore, CA 94550**
 SID#: _____ FOB:

Master Bill of Lading Number: 06757161136792627

SHORT SHIP Load, overflow

SHIP TO

Name: **Kohl's** DC#: **XDSFS**
 Div. _____
 Address: **X-DOCK PERFORMANCE TEAM BLDG 6**
12816 SHOEMAKER AVE, XDSFS
 City/State/Zip: **SANTA FE SPRINGS, CA 90670**
 SID#: _____ FOB:

CARRIER NAME: Performance Team

Trailer number: LH217009

Seal number(s): 9146538

SCAC: GLTN

Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:

ME# 781263813
 ME#781263813

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
1:30 AM	2:50 PM	5:00 AM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO		Supplier#
			Y	N		DC#		
12133652	Dept#: 104	1	10.36	Y	N	06757161136791224	00826	
12133652	Dept#: 104	2	19.61	Y	N	06757161136791248	00806	
12133652	Dept#: 104	3	28.86	Y	N	06757161136791231	00816	
11926322	Dept#: 011	11	86.45	Y	N	06757161136727285	00860	← 860
11941371	Dept#: 211	3	37.87	Y	N	06757161136727285	00860	
12133652	Dept#: 104	3	28.86	Y	N	06757161136791217	00836	
12054144	Dept#: 211	35	480.41	Y	N	06757161136727278	00890	
12054148	Dept#: 211	46	630.12	Y	N	06757161136727285	00860	
12133652	Dept#: 104	5	49.58	Y	N	06757161136791200	00870	
11926322	Dept#: 011	6	37.20	Y	N	06757161136727278	00890	
12054144	Dept#: 211	30	420.36	Y	N	06757161136727285	00860	
11979634	Dept#: 211	12	142.80	Y	N	06757161136727278	00890	
12054148	Dept#: 211	48	648.86	Y	N	06757161136727278	00890	

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.

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. Sanchez* 12-5-18

