

Chargebacks and RTVs

Macy's, Inc. (MacysNet)
 Valid as of: 3/7/2019 12:34:49 AM EST
 Division: Macy's Account #: 05390993890
 Vendor Name: E & E CO LTD
 Document Number: 4620889
 Department/Vendor: 510/938

Check Summary

Check Number: 1752663
 Check Date: 2/27/2019
 Purchase Order Number: 5397772

Transaction Summary

Transaction Type: 796 - RTV DAMAGE ALLOWANCE MDA
 Total Cost: (\$3.07)

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
 Total Cost: (\$16.2)

Style Summary

Receipt Number: 8059954-000
 Carrier:
 Freight Bill:
 Bill of Lading: 0675716300
 Cartons: 0
 Weight: 0
 Total Cost: \$0

Style Qty Rec Qty Diff Order Cost Cost Diff UOM Ext Cost Diff Ext Qty Diff

No further detail exists for this transaction.

Receipt Number: 8437738-000
 Carrier:
 Freight Bill:
 Bill of Lading: 0675716300
 Cartons: 0
 Weight: 0
 Total Cost: (\$16.2)

Style Qty Rec Qty Diff Order Cost Cost Diff UOM Ext Cost Diff Ext Qty Diff

LT 250	0	-1	\$16.20	\$0.00		\$0.00	-16.2
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Document Number: 4626534

Department/Vendor: 510/938

Check Summary

Check Number: 1752663
Check Date: 2/27/2019
Purchase Order Number: 1333460

Transaction Summary

Transaction Type: 796 - RTV DAMAGE ALLOWANCE MDA
Total Cost: (\$0)

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
Total Cost: (\$31.3)

Style Summary

Receipt Number: 8264343-000
Carrier:
Freight Bill:
Bill of Lading: 1Z1X780R03
Cartons: 0
Weight: 0
Total Cost: (\$31.3)

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost	Diff Ext	Qty Diff
LT 250	0	-1	\$31.30	\$0.00		\$0.00		-31.3

Document Number: 4626535
Department/Vendor: 510/938

Check Summary

Check Number: 1752663
Check Date: 2/27/2019
Purchase Order Number: 1333460

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
Total Cost: (\$31.3)

Transaction Type: 796 - RTV DAMAGE ALLOWANCE MDA
Total Cost: (\$0)

Style Summary

Receipt Number: 8264343-000
Carrier:

3/6/2019

MacysNet - A Service of Macy's, Inc.

Freight Bill:

Bill of Lading: 1Z1X780R03

Cartons: 0

Weight: 0

Total Cost: (\$31.3)

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost	Diff Ext	Qty Diff
LT 250	0	-1	\$31.30	\$0.00		\$0.00		-31.3

Date: 1/4/2019 3:25:04 PM

Master Bill Of Lading

Page 1 of 5

SHIP FROM		Master Bill of Lading Number: 06757163000285990	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name:	Macy's /Bloom Consolidation Center	Trailer number:	8315
	DC#: Div.	Seal number(s):	22413440
Address:	C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard,	SCAC:	LEGS
		Pro Number:	
City/State/Zip:	Santa Fe Spgs, CA 90670		
SID#:		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
Load #: 41211215		Appointment Time	Actual Driver Arrival Time
		1:00 AM	1:00 AM
			Driver Departure Time
			3:45 AM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
2947522	7	37.56	Y	N	06757163000285020	AZ	
3806556	3	17.07	Y	N	06757163000284948	GN	
5397739	23	99.04	Y	N	06757163000284979	AZ	
5397772	9	55.74	Y	N	06757163000285044	HA	
5397772	26	119.48	Y	N	06757163000285242	CL	
5400973	6	22.49	Y	N	06757163000285464	TU	
2947500	49	306.71	Y	N	06757163000285303	PD	
5397772	16	58.90	Y	N	06757163000285365	SW	
5400852	3	19.40	Y	N	06757163000285228	MB	
5400852	10	39.70	Y	N	06757163000285297	PD	
5400852	30	151.92	Y	N	06757163000285501	OK	
5400973	8	36.50	Y	N	06757163000285051	HA	
5400973	11	47.37	Y	N	06757163000285327	SC	

WT 14,857 TOTAL 1840

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

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 / 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. <i>Also mo 1.4.19</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>[Signature]</i> 1/9/2019
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Date: 1/4/2019 3:25:04 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000285990	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name: Macy's /Bloom Consolidation Center DC#: _____ Div. _____ Address: C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard, City/State/Zip: Santa Fe Spgs, CA 90670 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 8315 Seal number(s): 22413440 SCAC: LEGS Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 41211215		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
		Appointment Time AM PM	Actual Driver Arrival Time AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
5407903	61	428.07	Y	N	06757163000285150	JP	
2947500	52	324.59	Y	N	06757163000284993	AZ	
2947500	11	88.24	Y	N	06757163000285235	MB	
3806556	18	102.49	Y	N	06757163000285334	SC	
3806556	1	2.00	Y	N	06757163000285389	SW	
5397772	5	20.98	Y	N	06757163000285006	AZ	
5397772	64	308.43	Y	N	06757163000285310	SC	
5397772	14	56.58	Y	N	06757163000285457	TU	
5400973	2	7.94	Y	N	06757163000284894	DV	
5400973	20	89.14	Y	N	06757163000284931	GN	
5400973	13	63.80	Y	N	06757163000285136	JP	
2947522	12	89.44	Y	N	06757163000284863	BA	
2947522	34	186.43	Y	N	06757163000285198	CI	

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>
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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: <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 sold 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.
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Date: 1/4/2019 3:25:04 PM

Master Bill Of Lading

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SHIP FROM		Master Bill of Lading Number: 06757163000285990	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name:	Macy's /Bloom Consolldation Center	DC#:	
		Div.	
Address:	C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard,	Trailer number:	8315
		Seal number(s):	22413440
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC:	LEGS
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 (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 41211215		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
5397772	45	231.81	Y	N	06757163000285082	HU	
5400973	18	78.30	Y	N	06757163000285099	HU	
5400973	19	103.81	Y	N	06757163000285259	CL	
5400973	6	22.86	Y	N	06757163000285372	SW	
5400973	9	42.72	Y	N	06757163000285426	ST	
5397739	17	49.73	Y	N	06757163000285211	MB	
5397739	11	59.45	Y	N	06757163000285280	PD	
5397739	8	27.23	Y	N	06757163000285495	OK	
5397772	10	46.06	Y	N	06757163000284887	DV	
5397772	35	148.11	Y	N	06757163000285129	JP	
5400973	22	98.36	Y	N	06757163000284856	BA	
5400973	4	23.38	Y	N	06757163000285013	AZ	
5400973	37	169.10	Y	N	06757163000285174	CI	

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 / 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.

Shipper Signature

Date: 1/4/2019 3:25:04 PM

Master Bill Of Lading

Page 4 of 5

SHIP FROM		Master Bill of Lading Number: 06757163000286990	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name:	Macy's /Bloom Consolidation Center	DC#:	
		Div.:	
Address:	C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard,	Trailer number:	8315
City/State/Zip:	Santa Fe Spgs, CA 90670	Seal number(s):	22413440
SID#:		SCAC:	LEGS
		Pro Number:	
THIRD PARTY/FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
Load #: 41211215		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	
		AM	
		PM	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
5407903	13	95.39	Y	N	06757163000284917	DV	
5407903	50	351.18	Y	N	06757163000285402	SW	
5407903	31	226.03	Y	N	06757163000285440	ST	
2947522	15	52.37	Y	N	06757163000285341	SC	
2947522	16	117.28	Y	N	06757163000285396	SW	
3806556	6	21.34	Y	N	06757163000285181	CI	
5397772	29	189.96	Y	N	06757163000284924	GN	
5397772	59	300.16	Y	N	06757163000285167	CI	
5397772	36	193.26	Y	N	06757163000285419	ST	
5400852	15	62.40	Y	N	06757163000284986	AZ	
5407903	12	84.16	Y	N	06757163000285037	AZ	
Grand Total	1031	5574.26					

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.

Date: 1/4/2019 3:25:04 PM

Master Bill Of Lading

Page 5 of 5

SHIP FROM		Master Bill of Lading Number: 06757163000285990	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95778 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name: Macy's /Bloom Consolidation Center DC#: _____ Div. _____ Address: C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard, City/State/Zip: Santa Fe Spgs, CA 90670 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 8315 Seal number(s): 22413440 SCAC: LEGS Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 41211215		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED <input type="checkbox"/> UNDERLYING BILLS OF LANDING	
		Appointment Time	Actual Driver Arrival Time
	AM PM	AM PM	AM PM

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 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
52	Pallet			2600.00		Pallet		70
		59	ctns	257.37		Shower curtain	49385	77.5
		67	ctns	415.59		Comforters, Bedspreads	49017	200
		650	ctns	3500.21		Pillows, Valance, Towels	49390	100
		255	ctns	1401.09		Throws, Blankets	49040	150
52				8174.26		Grand Total		

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. <div style="text-align: right;">Shipper Signature</div>
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	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/Plates	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.
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Date: 1/4/2019 3:25:46 PM

Master Bill Of Lading

Page 1 of 3

SHIP FROM		Master Bill of Lading Number: 06757163000286003	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:	FOB: <input type="checkbox"/>		
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name:	Macy's /Bloom Consolidation Center DC#: Div.	Trailer number: 8315	
Address:	C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard,	Seal number(s): 22413440	
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC: LEGS	
SID#:	FOB: <input type="checkbox"/>	Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
City/State/Zip:		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM	
SPECIAL INSTRUCTIONS: Load #: 41211215			

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
5407903	42	302.92	Y	N	06757163000285075	HA	
2947522	16	90.90	Y	N	06757163000285143	JP	
2947522	26	132.29	Y	N	06757163000285266	CL	
2947522	3	19.73	Y	N	06757163000284900	DV	
2947522	2	7.56	Y	N	06757163000285471	TU	
5407903	68	479.18	Y	N	06757163000284962	GN	
2947522	10	61.44	Y	N	06757163000285068	HA	
5407903	69	484.25	Y	N	06757163000285273	CL	
2947500	69	500.09	Y	N	06757163000285518	OK	
2947522	22	110.89	Y	N	06757163000284955	GN	
5407903	108	763.82	Y	N	06757163000285358	SC	
5397772	28	133.86	Y	N	06757163000284849	BA	
5407903	90	642.64	Y	N	06757163000284870	BA	

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:	Freight Counted:	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.
	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	

Date: 1/4/2019 3:25:45 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000286003	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING	
Name:	Macy's /Bloom Consolidation Center	DC#:	
		Div.	
Address:	C/O Dynamic Santa Fe Springs 14141 Alondra Boulevard,	Trailer number:	8315
		Seal number(s):	22413440
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC:	LEGS
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	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
Load #: 41211215		Appointment Time	Actual Driver Arrival Time
		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 DC#	Supplier#
2947522	6	32.49	Y	N	06757163000285105	HU	
2947522	11	47.99	Y	N	06757163000285433	ST	
5407903	70	515.50	Y	N	06757163000285112	HU	
5407903	143	1020.69	Y	N	06757163000285204	CI	
5407903	26	186.82	Y	N	06757163000285488	TU	
Grand Total	809	5533.06					

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 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
21	Pallet			1050.00		Pallet		70
		2	ctns	12.34		Comforters, Bedspreads	49017	200
		157	ctns	1001.93		Pillows, Valance, Towels	49390	100
		22	ctns	92.61		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: <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.

SHIPPER SIGNATURE / DATE <small>This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>	Trailer Loaded:	Freight Counted:	CARRIER SIGNATURE / PICKUP DATE <small>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.</small>
	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	

Shipper Signature

Date: 1/4/2019 3:25:45 PM

Master Bill Of Lading

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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 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		628	ctns	4426.18		Throws, Blankets	49040	150
21				6583.06		Grand Total		

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 / DATE <small>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.</small>		SHIPPER SIGNATURE	
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 sold to contain <input type="checkbox"/> By Driver/Pieces	
		CARRIER SIGNATURE / PICKUP DATE <small>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.</small>	

Etc Show Cartons Scanned, loaded and billed correct.

ShipmentCartonDetail(300028531)

Customer PO No.	E&E SO No.	Routing No.	Item No.	Item Description	Palin ID	Carton No.	Carton ID	Ship To	Case Pack Qty	Status
5397772	4864694	R2018122707140910	MCH14-796	T Verona Quilt Mini Se	00106757163001222700	0632359294	00006757166323592943	0001	1	Loaded
5397772	4864694	R2018122707140910	MCH14-798	T Lilliana Quilt Mini Se	00106757163001222700	0632359295	00006757166323592950	0001	1	Loaded
5397772	4864695	R2018122707140910	MCH40-818	Minette Panel	00106757163001222700	0632359296	00006757166323592967	0002	2	Loaded
5397772	4864696	R2018122707140910	MCH14-798	T Lilliana Quilt Mini Se	00106757163001222588	0632359297	00006757166323592974	0003	1	Loaded
5397772	4864696	R2018122707140910	MCH50-763	Dusty The Dino Hooded Throw	00106757163001222700	0632359298	00006757166323592981	0003	2	Loaded
5397772	4864696	R2018122707140910	MCH73-745	Ocean Adventures Bath Towel	00106757163001222588	0632359299	00006757166323592998	0003	6	Loaded
5397772	4864698	R2018122707140910	MCH30-750	Ocean Adventures Back Rest	00106757163001222588	0632359301	00006757166323593018	0005	2	Loaded
5397772	4864699	R2018122707140910	MCH14-796	T Verona Quilt Mini Se	00106757163001222700	0632359302	00006757166323593025	0006	1	Loaded
5397772	4864699	R2018122707140910	MCH14-796	T Verona Quilt Mini Se	00106757163001222700	0632359303	00006757166323593032	0006	1	Loaded
5397772	4864700	R2018122707140910	MCH30-766	Verona Shaped Floor Pillow	00106757163001222588	0632359304	00006757166323593049	0008	2	Loaded
5397772	4864701	R2018122707140910	MCH30-750	Ocean Adventures Back Rest	00106757163001222588	0632359305	00006757166323593056	0013	2	Loaded
5397772	4864701	R2018122707140910	MCH50-753	Liliana Hand Warmer 3-in-1	00106757163001222588	0632359306	00006757166323593063	0013	2	Loaded
5397772	4864701	R2018122707140910	MCH50-763	Dusty The Dino Hooded Throw	00106757163001222700	0632359307	00006757166323593070	0013	2	Loaded
5397772	4864703	R2018122707140910	MCH30-748	Verona Back Rest	00106757163001222588	0632359311	00006757166323593117	0015	2	Loaded
5397772	4864704	R2018122707140910	MCH30-750	Ocean Adventures Back Rest	00106757163001222700	0632359312	00006757166323593124	0016	2	Loaded
5397772	4864705	R2018122707140910	MCH30-748	Verona Back Rest	00106757163001222588	0632359313	00006757166323593131	0019	2	Loaded
5397772	4864705	R2018122707140910	MCH50-755	Stellar Space Hand Warmer3-In-	00106757163001222588	0632359314	00006757166323593148	0019	2	Loaded
5397772	4864705	R2018122707140910	MCH50-760	Verona Hooded Throw	00106757163001222700	0632359315	00006757166323593155	0019	2	Loaded
5397772	4864707	R2018122707140910	MCH50-753	Liliana Hand Warmer 3-in-1	00106757163001222588	0632359317	00006757166323593179	0022	2	Loaded
5397772	4864719	R2018122707140910	MCH30-786	Verona Shaped Dec Pillow	00106757163001222588	0632359340	00006757166323593407	0053	2	Loaded
5397772	4864719	R2018122707140910	MCH50-760	Verona Hooded Throw	00106757163001222700	0632359341	00006757166323593414	0053	2	Loaded
5397772	4864720	R2018122707140910	MCH30-765	Liliana Shaped Floor Pillow	00106757163001222588	0632359342	00006757166323593421	0054	2	Loaded
5397772	4864720	R2018122707140910	MCH30-788	Minette Shaped Dec Pillow	00106757163001222700	0632359343	00006757166323593438	0054	2	Loaded
5397772	4864720	R2018122707140910	MCH40-823	Dusty The Dino Panel	00106757163001222700	0632359344	00006757166323593445	0054	2	Loaded
5397772	4864721	R2018122707140910	MCH14-796	T Verona Quilt Mini Se	00106757163001222588	0632359345	00006757166323593452	0056	1	Loaded
5397772	4864721	R2018122707140910	MCH30-766	Verona Shaped Floor Pillow	00106757163001222588	0632359346	00006757166323593469	0056	2	Loaded
5397772	4864721	R2018122707140910	MCH30-788	Minette Shaped Dec Pillow	00106757163001222700	0632359347	00006757166323593476	0056	2	Loaded
5397772	4864722	R2018122707140910	MCH30-765	Liliana Shaped Floor Pillow	00106757163001222588	0632359348	00006757166323593483	0059	2	Loaded
5397772	4864722	R2018122707140910	MCH30-789	Minette Shaped Dec Pillow	00106757163001222588	0632359349	00006757166323593490	0059	2	Loaded
5397772	4864722	R2018122707140910	MCH50-760	Verona Hooded Throw	00106757163001222700	0632359350	00006757166323593506	0059	2	Loaded
5397772	4864722	R2018122707140910	MCH50-763	Dusty The Dino Hooded Throw	00106757163001222700	0632359351	00006757166323593513	0059	2	Loaded
5397772	4864723	R2018122707140910	MCH30-749	Stellar Space Back Rest	00106757163001222588	0632359352	00006757166323593520	0065	2	Loaded
5397772	4864723	R2018122707140910	MCH30-788	Minette Shaped Dec Pillow	00106757163001222588	0632359353	00006757166323593537	0065	2	Loaded
5397772	4864724	R2018122707140910	MCH30-788	Minette Shaped Dec Pillow	00106757163001222700	0632359354	00006757166323593544	0066	2	Loaded
5397772	4864724	R2018122707140910	MCH50-758	Minette Hooded Throw	00106757163001222588	0632359355	00006757166323593551	0066	2	Loaded
5397772	4864726	R2018122707140910	MCH10-780	T Verona Comf Mini Set	00106757163001222700	0632359358	00006757166323593582	0070	1	Loaded
5397772	4864726	R2018122707140910	MCH30-749	Stellar Space Back Rest	00106757163001222588	0632359359	00006757166323593590	0070	2	Loaded
5397772	4864726	R2018122707140910	MCH30-769	Verona Shaped Floor Pillow	00106757163001222588	0632359360	00006757166323593605	0070	2	Loaded
5397772	4864726	R2018122707140910	MCH30-769	Stellar Space Floor Pillow	00106757163001222588	0632359361	00006757166323593612	0070	2	Loaded
5397772	4864726	R2018122707140910	MCH30-789	Minette Shaped Dec Pillow	00106757163001222588	0632359362	00006757166323593629	0070	2	Loaded
5397772	4864726	R2018122707140910	MCH50-753	Liliana Hand Warmer 3-in-1	00106757163001222700	0632359363	00006757166323593636	0070	2	Loaded
5397772	4864726	R2018122707140910	MCH50-763	Dusty The Dino Hooded Throw	00106757163001222700	0632359364	00006757166323593643	0070	2	Loaded
5397772	4864728	R2018122707140910	MCH30-749	Stellar Space Back Rest	00106757163001222700	0632359365	00006757166323593650	0075	2	Loaded
5397772	4864729	R2018122707140910	MCH50-758	Minette Hooded Throw	00106757163001222588	0632359366	00006757166323593667	0081	2	Loaded
5397772	4864729	R2018122707140910	MCH50-760	Verona Hooded Throw	00106757163001222700	0632359367	00006757166323593674	0081	2	Loaded
5397772	4864730	R2018122707140910	MCH14-794	T Dusty The Dino Quilt Mini Se	00106757163001222588	0632359368	00006757166323593681	0082	1	Loaded
5397772	4864730	R2018122707140910	MCH14-794	T Dusty The Dino Quilt Mini Se	00106757163001222700	0632359369	00006757166323593698	0082	1	Loaded
5397772	4864736	R2018122707140910	MCH30-749	Stellar Space Back Rest	00106757163001222588	0632359389	00006757166323593896	0102	2	Loaded
5397772	4864736	R2018122707140910	MCH30-769	Stellar Space Floor Pillow	00106757163001222588	0632359390	00006757166323593902	0102	2	Loaded
5397772	4864738	R2018122707140910	MCH10-781	F/Q Verona Comf Mini Set	00106757163001222700	0632359393	00006757166323593933	0155	1	Loaded
5397772	4864738	R2018122707140910	MCH10-781	F/Q Verona Comf Mini Set	00106757163001222700	0632359394	00006757166323593940	0155	1	Loaded
5397772	4864738	R2018122707140910	MCH14-798	T Lilliana Quilt Mini Se	00106757163001222700	0632359395	00006757166323593957	0155	1	Loaded
5397772	4864738	R2018122707140910	MCH20-814	T Verona Sheet Set	00106757163001222588	0632359396	00006757166323593964	0155	2	Loaded
5397772	4864738	R2018122707140910	MCH30-748	Verona Back Rest	00106757163001222588	0632359397	00006757166323593971	0155	2	Loaded
5397772	4864738	R2018122707140910	MCH30-765	Liliana Shaped Floor Pillow	00106757163001222588	0632359398	00006757166323593988	0155	2	Loaded
5397772	4864740	R2018122707140910	MCH40-821	Stellar Space Panel	00106757163001222700	0632359400	00006757166323594008	0178	2	Loaded
5397772	4864742	R2018122707140910	MCH14-794	T Dusty The Dino Quilt Mini Se	00106757163001222588	0632359401	00006757166323594015	0183	1	Loaded
5397772	4864742	R2018122707140910	MCH14-796	T Verona Quilt Mini Se	00106757163001222588	0632359402	00006757166323594022	0185	1	Loaded
5397772	4864742	R2018122707140910	MCH14-798	T Lilliana Quilt Mini Se	00106757163001222700	0632359403	00006757166323594039	0185	1	Loaded
5397772	4864742	R2018122707140910	MCH30-786	Verona Shaped Dec Pillow	00106757163001222588	0632359404	00006757166323594046	0185	2	Loaded
5397772	4864743	R2018122707140910	MCH14-798	T Lilliana Quilt Mini Se	00106757163001222700	0632359405	00006757166323594053	0206	1	Loaded
5397772	4864743	R2018122707140910	MCH20-814	T Verona Sheet Set	00106757163001222588	0632359406	00006757166323594066	0206	2	Loaded
5397772	4864743	R2018122707140910	MCH30-790	Ocean Adventures Dec Pillow	00106757163001222588	0632359407	00006757166323594077	0206	2	Loaded
5397772	4864743	R2018122707140910	MCH30-791	Ocean Adventures Dec Pillow	00106757163001222700	0632359408	00006757166323594084	0206	2	Loaded