

DATE	AMOUNT	DESCRIPTION	DEBIT	CREDIT	BALANCE	STATE
797 2019-01-21	4635136	019057	14,327.37	0.00	14,327.37	0
797 2019-01-21	4635138	019057	1,785.04	0.00	1,785.04	0
797 2019-01-21	4635137	019057	5,303.91	0.00	5,303.91	0
701 2019-02-27	701-NCF-0084166	AT-0103939	-500.00	0.00	-500.00	0
701 2019-02-27	701-NCF-0084160	AT-0103939	-500.00	0.00	-500.00	0
701 2019-02-27	701-NCF-0084159	AT-0103939	-500.00	0.00	-500.00	0
092 2019-02-04	701-5450149	AT-0118351	-4,090.56	0.00	-4,090.56	0
092 2019-02-04	701-5450237	CALL DIV 092 855-574-2228	-3,514.00	0.00	-3,514.00	0
092 2019-02-04	701-5450154	CALL DIV 092 855-574-2228	-7,000.00	0.00	-7,000.00	0

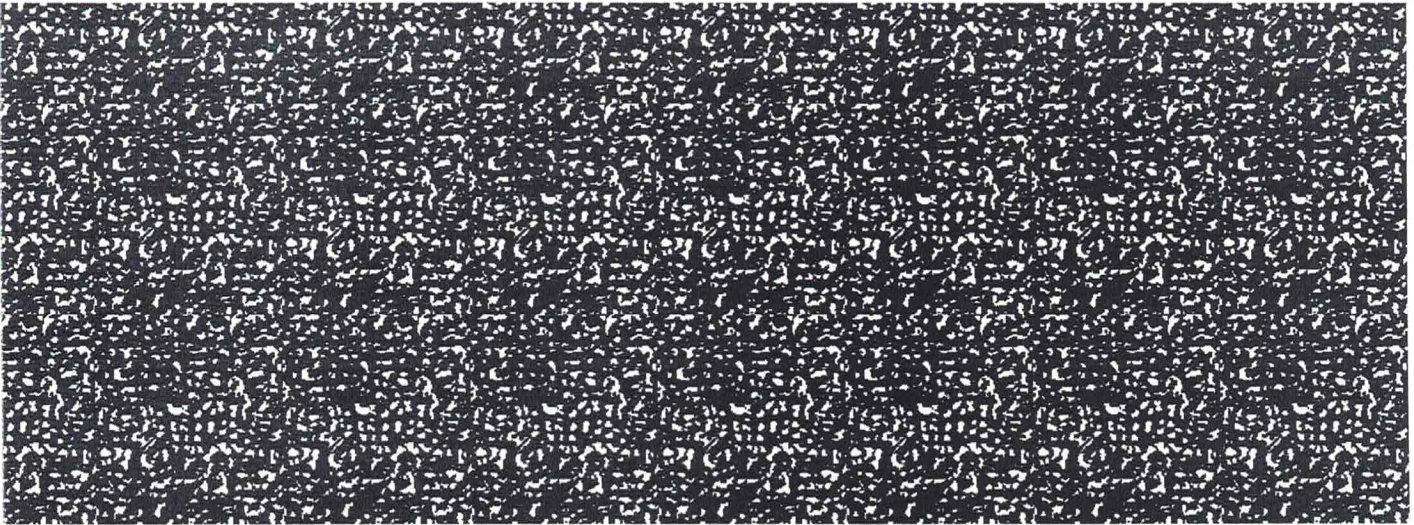
ENTERED

ENTERED MAR 11 2019

701	FRED MEYER								
TELEPHONE	PAYEE NO.	DATE	BANK	CHECK NO.	TOTALS				
855-574-2228	10316750	MARCH 01, 2019	22	7001442	5,311.76	0.00	0.00	5,311.76	

L615

HIGHLY SATISFIED CUSTOMERS MADE THIS CHECK POSSIBLE
 To Remove Document Fold and Tear Along This Perforation





REMIT: PO BOX 31001-1337
PASADENA, CA 91110-1337

Invoice# **701-NCF-0084160**
When remitting refer to this invoice
number

Terms: Net Cash
Period: 01
Date: 02/26/2019

E & E CO LTD
45875 NORTHPORT LOOP EAST
FREMONT , CA 945380000

PAY TO #: 10316750

ME#: 10316702

Amount: 500.00

Late Shipment.

DIRECT ALL INQUIRIES TO: fmnonfoodpayables@kroger.com

Please include your Vendor Name in the subject line of your email.

USERID: KM56589

For Office Use Only

437 40-6040 000 PO#:96126373 Dept:83 Class:809 Loc: (500.00)

437 02-2320 000 PO#: Dept:0 Class:0 Loc:0 500.00

PO21M01

FRED MEYER

Vendor	10316702	E & E CO DBA JLA- RMA BLANKETS	
Order number	96126373	PO type	ME MERCHANDISE
Order status	ON OPEN ORDER	Confirmation N EDI	Y
Order source	RM REPLENISHMENT	PO Disc/Chrg type..	
Import	N	PO Disc/Chrg pct ..	
		PO Disc/Chrg amt ..	
Payment terms	416 + NET 30	FOB point	FOB SHIP POINT
Freight PP COL ...	CO PP Qlfr		0
Effective terms ..	ROG RECEIPT OF GOODS	Cancel Vend Pre-ticket	N
Order date	02/11/19	Ship date	02/11/19
Order proc time	7 Days	Ship PO complete	Y
Rsc Instr			
Transit time	3 Days		
Earliest arrival date ..	02/21/19		
Cancel date	02/18/19	Created by	POB0025
Last arrival date	02/21/19		



Command	Action			
F1=Help	F5=Clear	F6=Mdse Spec	F10=Cmnt	F11=Summary
F12=Cancel	F15=Menu			

Date: 2/20/2019 11:26:47 AM

Bill Of Lading

Page 1 of 2

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 PHONE: (530)669-5991
 VENDOR: 10316700

Bill of Lading Number: 06757163000300419

 (402)06757163000300419


SHIP TO
 Name: Fred Meyer Stores Location #: 00790880944
 61
 Address: Chehalis RSC DC - Home/HCC
 224 Maurin Rd., 0079088094461
 City/State/Zip: Chehalis, WA 98532-8716
 CID#: _____
 Dept: 0083

CARRIER NAME: Market Transport
 Responsible Acct.No:
 Trailer number: 136134
 Seal number(s): 22413603
 SCAC: MKET
 Pro Number:
 Drop load/case ct. pending _____ Unit ct. pending _____
 Pre Paid Collect LTL
 Receiver: EVETT STENMORE 2/22/19
 Case count verify by: D. Johnson 2/25
 Case Count _____ Short _____ Over _____
 Pack list included with product Yes _____ No _____
 Charge back completed Yes _____ No _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name:
 Address:
 City/State/Zip:
 SPECIAL INSTRUCTIONS:
 Load #: MKET 2606608
 Packing List is Attached

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: _____ Collect: X 3rd Party: _____
 Master Bill of Lading: with attached (check box) underlying Bills of Lading
 Appointment Time: 1:00 AM
 Actual Driver Arrival Time: 11:10 AM
 Driver Departure Time: 11:35 PM

CUSTOMER ORDER INFORMATION						ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP				
0096126373	51775	124	810.35	Y	N	TRL #	136134
0096126374	48035	360	2155.38	Y	N	DSV #	2606608
0096126375	51774	309	1905.35	Y	N	FM #	1190222998005
0096126518	5773	143	573.56	Y	N	Seal #	22413603
Grand Total		936	5444.64				

CARRIER INFORMATION						PACKAGE			
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		NMFC #	CLASS
QTY	TYPE	QTY	TYPE			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			
9	Pallet			450.00		Pallet			
		1	ctns	44.88		Comforters, Bedspreads		49017	200
		309	ctns	1905.35		Mattress Pads		149265	100
		502	ctns	2684.06		Pillows, Valance, Towels		49390	100
		4	ctns	50.68		Runners, Placemats, Napkins		49505	77.5

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.
Wesley M. Johnson


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.
[Signature] 2-20-19

Date: 2/20/2019 11:26:47 AM

Bill Of Lading

Page 2 of 2

SHIP FROM				SHIP TO					
Name: E & E COMPANY LTD				Name: Fred Meyer Stores					
Address: 221 Hanson Way				Address: Chehalis RSC DC - Home/HCC					
City/State/Zip: Woodland, CA 95776				City/State/Zip: Chehalis, WA 98532-8716					
PHONE: (530)669-5991				CID#: 0083					
VENDOR: 10316700				Dept: 0083					
FOB: <input type="checkbox"/>				FOB: <input type="checkbox"/>					
Bill of Lading Number: 06757163000300419				CARRIER NAME: Market Transport					
				Responsible Acct.No:					
(402)06757163000300419				Trailer number: 136134					
				Seal number(s): 22413603					
				SCAC: MKET					
				Pro Number:					
THIRD PARTY FREIGHT CHARGES BILL TO:				Freight Charge Terms: (freight charges are prepaid unless marked otherwise)					
Name:				Prepaid: <input type="checkbox"/>					
Address:				Collect: X					
City/State/Zip:				3rd Party: <input type="checkbox"/>					
SPECIAL INSTRUCTIONS:				Master Bill of Lading: with attached					
Load #: MKET 2606608				(check box) underlying Bills of Lading					
Packing List is Attached				Appointment Time		Actual Driver Arrival Time		Driver Departure Time	
				AM		AM		AM	
				PM		PM		PM	
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 packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
		120	ctns	759.67		Throws,Blankets	49040	150	
9		936		5894.64		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: 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.