

Div	Date	Invoice	Ref/Batch No.	Gross	Inv. Adj.	Disc. Amt	Net Amount	Store
797	2019-03-20	4697267	019107	2,998.02	0.00	0.00	2,998.02	0
797	2019-03-20	4697266	019107	11,270.60	0.00	0.00	11,270.60	0
797	2019-03-20	4697265	019107	12,893.28	0.00	0.00	12,893.28	0
797	2019-03-20	4697264	019107	1,455.20	0.00	0.00	1,455.20	0
797	2019-03-19	4696556	019107	7,344.55	0.00	0.00	7,344.55	0
701	2019-03-23	003001902350	19084FMSBT	74.09	0.00	0.00	74.09	00300
701	2019-04-18	701-NCF-0085955	AT-0104200	-500.00	0.00	0.00	-500.00	0
701	2019-04-01	701-5456854	AT-0104179	-834.17	0.00	0.00	-834.17	0
701	2019-04-18	701-NCF-0085954	AT-0104200	-500.00	0.00	0.00	-500.00	0
701	2019-04-18	701-NCF-0085953	AT-0104200	-500.00	0.00	0.00	-500.00	0
092	2019-04-18	092-A1903-92079	AT-0118929	-458.83	0.00	0.00	-458.83	0

CALL DIV 092 855-574-2228

12144412

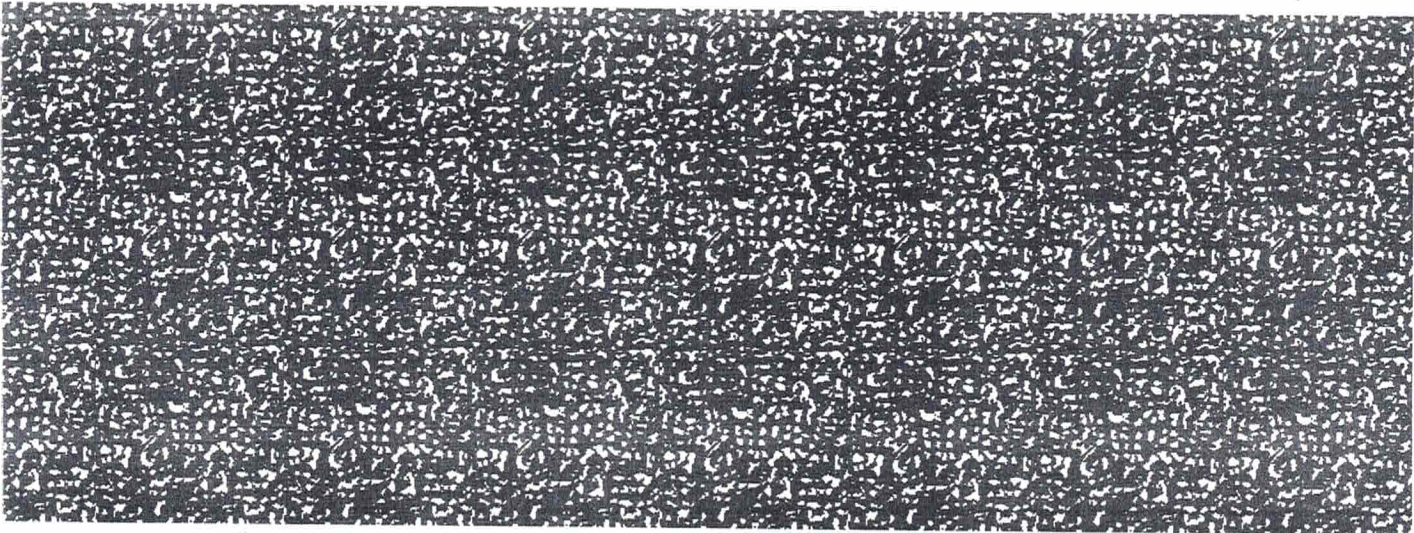
CB1901328

ENTERED MAY 03 2019

701	FRED MEYER								
TELEPHONE	PAYEE NO.	DATE	BANK	CHECK NO.	TOTALS				
855-574-2228	10316750	APRIL 22, 2019	22	7140197	33,242.74	0.00	0.00		33,242.74

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-0085954**
When remitting refer to this invoice
number

Terms: Net Cash
Period: 03
Date: 04/17/2019

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

PAY TO #: 10316750

ME#: 10316704

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: EM55790

For Office Use Only

437 40-6040 000 PO#:10316704 Dept:83 Class:940 Loc: (500.00)

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

PO21M01


FRED MEYER

Vendor	10316704	E & E CO LTD.DBA JLA MATTRESS PADS	
Order number	96970169		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		
Freight PP COL ...	CO PP Qlfr	0	FOB point FOB SHIP POINT
Effective terms ..	ROG RECEIPT OF GOODS		
Order date	03/18/19		Cancel Vend Pre-ticket N
Order proc time	9 Days		Ship date 03/18/19
Rsc Instr			
Transit time	3 Days		Ship PO complete Y
Earliest arrival date ..	03/30/19		
Cancel date	03/27/19		
Last arrival date	03/30/19		Created by POB0025

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

ORIGINAL

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: 06757163000311934

 (402)06757163000311934

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#: _____ FOB:
 Dept: 0083

CARRIER NAME: Market Transport
 Responsible Acct.No: _____
 Trailer number: mtlz3273
 Seal number(s): 22413794
 SCAC: MKET 2612758
 Pro Number: _____
 Drop load/case pt. pending _____ Unit ct. pending _____
 Pre-Paid Collect LTL _____
 Receiver: *Concepcion* Date: *4-4-19*
 Case count verify by: *[Signature]*
 Case Count *75* 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:
 Packing List is Attached
MKET 2612758

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: Collect: X 3rd Party: _____
 Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time: 10:00 AM
 Actual Driver Arrival Time: 9:30 AM
 Driver Departure Time: 10:10 AM

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
0096970168 <i>63096</i>	424	2889.36	Y	N	<i>18 PLS</i>
0096970169 <i>11557</i>	754	4593.08	Y	N	
0096970668 <i>63094</i>	416	2723.46	Y	N	
Grand Total	1594	10205.90			

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(a) of NMFC Item 366</small>	PACKAGE	
	QTY	TYPE				NMFC #	CLASS
19		ctns	457.54		Comforters, Bedspreads	49017	200
754		ctns	4593.08		Mattress Pads	149265	100
405		ctns	2431.82		Pillows, Valance, Towels	49390	100
10		ctns	116.80		Runners, Placemats, Napkins	49505	77.5
406		ctns	2606.66		Throws, Blankets	49040	150
1594			10205.90				

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.
[Signature] *MO3-28*

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]