
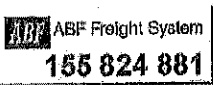




Date: 4/1/2019 2:47:52 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000311736
Name:	E & E COMPANY LTD	 (402)06757163000311736
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:		
PHONE:		CARRIER NAME: ABF Freight
VENDOR: 000074879	FOB: <input type="checkbox"/>	Responsible Accl.No:

SHIP TO		Trailer number: 10747	 155 824 881	Total Pages: 
Name:	Kohl's Dist Center #00886 Location #: 00865	Seal number(s):		
Address:	Mamakating (Wurtsboro) D.C. 3440 State Route 209, 00866	SCAC: ABFS		
City/State/Zip:	Wurtsboro, NY 12790	Pro Number: 155024601	Driver signature only acknowledges receipt of freight. Shipment is subject to applicable terms and conditions of Uniform Freight Bill of Lading and ABF's tariffs.	
CID#:	785565980 FOB: <input type="checkbox"/>			

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>
Address:		
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)
SPECIAL INSTRUCTIONS: Load #: 785565980 Packing List is Attached		

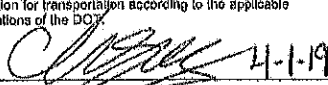
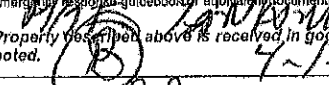
CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	160	2247.31	Y N	
Grand Total	160	2247.31		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
160	ctns			2247.31		Comforters, Bedspreads	49017	200
160				2247.31		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
--	---

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.  4-1-19	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 under carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.  Properly described above is received in good order, except as noted. Appt Time: 2-2 In: 2:25 Out: 2:55 Driver Signature: _____
--	--	--	--


Order No.: 4945896 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282316
 - #00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00885 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	Shipping Date: 04/01/2019
--	--	---	-------------------------------------

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	57	57	57	57
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	103	103	103	103

Total Weight:	2247.31
Total Quantity Ordered:	160
Total Cartons Ordered:	160
Total Quantity Shipped:	160
Total Cartons Shipped:	160

Bill Of Lading

SHIP FROM		Bill of Lading Number: 08757163000309405	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: 000074879 FOB: <input type="checkbox"/>		 (402)06757163000309405	
SHIP TO		CARRIER NAME: Schneider National	
Name: Kohl's Dist. Center #00865 Location #: 00865 Address: Mamakating (Wurtsboro) D.C. 3440 State Route 209, 00865 City/State/Zip: Wurtsboro, NY 12790 CID#: 784977142 FOB: <input type="checkbox"/>		Responsible Accl.No: _____ Trailer number: SNLU 157764 Seal number(s): 22413803 SCAC: SCNX Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: _____ Collect: X 3rd Party: _____	
SPECIAL INSTRUCTIONS: Load #: 784977142 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	34	476.10	Y N	
Grand Total	34	476.10		

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(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		34	ctns	476.10		Comforters, Bedspreads	49017	200
2		34		576.10		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
--	---

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 no 3-22-19</i>	Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <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. Property described above is received in good order, except as noted. Appt Time: 1:00 In: 12:30 Out: 1:25 Driver Signature: <i>[Signature]</i>
--	--	--

Order No.: 4945896 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
- #00865

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00865 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	Shipping Date: 03/22/2019
--	--	---	-------------------------------------

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cins Ordered	Qty Shipped	Cins Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	14	14	14	14
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	20	20	20	20

Total Weight:	476.1
Total Quantity Ordered:	34
Total Cartons Ordered:	34
Total Quantity Shipped:	34
Total Cartons Shipped:	34

Date: 3/20/2019 1:18:48 PM

Bill Of Lading

Page 1 of 1

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000309375



CARRIER NAME: Schnelder National
 Responsible Acct.No:

SHIP TO
 Name: Kohl's Dist. Center - #00875 Location #: 00875
 Address: 3030 Airport Road East
 Macon D.C., 00875
 City/State/Zip: Macon, GA 31216
 CID#: 784999735 FOB:

Trailer number: SNLU 163490
 Seal number(s): 22413821

SCAC: SCNX
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
 Address:
 City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS:
 Load #: 784999735
 Packing List Is Attached

Master Bill of Lading: with attached underlying Bills of Lading (check box)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	117	1640.79	Y N	
Grand Total	117	1640.79		

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 960</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallet			350.00		Pallet		
		117	ctns	1640.79		Comforters, Bedspreads	49017	200
7		117		1990.79		Grand Total		

When 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:
 By Shipper By Shipper
 By Driver By Driver/pallets sold 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.
 Property described above is received in good order, except as noted.

Alice M 03.20.19

Appt Time: 1:00
 In: 12:40
 Out: 1:25
 Driver Signature: *Balraj Singh*

Order No.: 4945897 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 - #00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 03/20/2019
--	--	--	-------------------------------------


Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Sa	EA	1	45	45	45	45
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Sa	EA	1	72	72	72	72

Total Weight:	1640.79
Total Quantity Ordered:	117
Total Cartons Ordered:	117
Total Quantity Shipped:	117
Total Cartons Shipped:	117

Date: 3/19/2019 1:18:05 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000309399	
Name: E & E COMPANY LTD		 (402)06757163000309399	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: KOHL BACKHAUL	
SID#: _____		Responsible Acct.No: _____	
PHONE: _____		Trailer number: X98153	
VENDOR: 000074879		Seal number(s): 22413823	
FOB: <input type="checkbox"/>		SCAC: 885G	
SHIP TO		Pro Number: _____	
Name: Kohl's Dist. Center - #00885		Location #: 00885	
Address: 2065 Keystone Pacific Parkway		Patterson D.C., 00885	
City/State/Zip: Patterson, CA 95363		CID#: 784958405	
FOB: <input type="checkbox"/>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: _____ Collect: X 3rd Party: _____	
Name: _____		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Address: _____			
City/State/Zip: _____		SPECIAL INSTRUCTIONS:	
Load #: 784958405		Packing List Is Attached	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	89	1252.15	Y N	
Grand Total	89	1252.15		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300.		NMFC #
5	Pallet			250.00		Pallet		
		89	ctns	1252.15		Comforters, Bedspreads	49017	200
5		89		1502.15		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	

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 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. Property described above is received in good order, except as noted.
Also mo 31949			Appt Time: 2:00 In: 12:40 Out: 1:25 Driver Signature: Ugarte

Order No.: 4945898 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 - #00885

SHIP FROM:
 E & E COMPANY LTD
 221 HANSON WAY
 WOODLAND, CA 95776

BILL TO:
 KOHL'S STORE
 N56 W17000 RIDGEWOOD DRIVE
 MENOMONEE FALLS, WI 53051
 US

SHIP TO:
 KOHL'S DIST. CENTER - #00885
 2065 KEYSTONE PACIFIC
 PARKWAY
 PATTERSON D.C.
 PATTERSON, CA 95363
 US

Shipping Date:
 03/19/2019

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086669131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	29	29	29	29
N/A	KL10-2647	086669131744	K Lyla Mauve 7pcs Comforter Se	EA	1	60	60	60	60


Total Weight: 1252.15
Total Quantity Ordered: 89
Total Cartons Ordered: 89
Total Quantity Shipped: 89
Total Cartons Shipped: 89

Date: 3/19/2019 10:02:21 AM

Bill Of Lading

Page 1 of 1

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____
 PHONE: _____
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000309368

 (402)06757163000309368

SHIP TO
 Name: Kohl's Dist. Center - #00830 Location #: 00830
 Address: 300 Admiral Byrd Drive
 Winchester D. C., 00830
 City/State/Zip: Winchester, VA 22602
 CID#: 784977149 FOB:

CARRIER NAME: Schneider National
 Responsible Acct.No: _____
 Trailer number: SNLU-139598
 Seal number(s): 22413911

SCAC: SCNX
Pro Number: N/A

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: _____ Collect: 3rd Party: _____

SPECIAL INSTRUCTIONS:
 Load #: 784977149
 Packing List is Attached

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	137	1922.57	Y N	
Grand Total	137	1922.57		

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(c) of NMFC Item 380</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
8	Pallet			400.00		Pallet		
		137	ctns	1922.57		Comforters, Bedspreads	49017	200
8		137		2322.57		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.

 3-19-19

Trailer Loaded: **Freight Counted:**
 By Shipper By Shipper
 By Driver By Driver/pallets said to contain
 By Driver/Places

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.
 Appt Time: 9:00
 In: 9:25
 Out: 10:10
 Driver Signature:  3-19-19

Order No.: 4945892 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
- #00830

SHIP FROM:
E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:
KOHL'S STORE
N56 W17000 RIDGEWOOD DRIVE
MENOMONEE FALLS, WI 53051
US

SHIP TO:
KOHL'S DIST. CENTER - #00830
300 ADMIRAL BYRD DRIVE
WINCHESTER D. C.
WINCHESTER, VA 22602
US

Shipping Date:
03/19/2019

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	51	51	51	51
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	86	86	86	86


Total Weight: 1922.57
Total Quantity Ordered: 137
Total Cartons Ordered: 137
Total Quantity Shipped: 137
Total Cartons Shipped: 137

Date: 3/19/2019 9:22:41 AM

Bill Of Lading

Page 1 of 1

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000309382

 (402)06757163000309382

SHIP TO
 Name: Kohl's Dist. Center - #00855 Location #: 00855
 Address: 890 East Mill Street
 San Bernardino D.C., 00855
 City/State/Zip: San Bernardino, CA 92408-1614
 CID#: 784981183 FOB:

CARRIER NAME: Performance Team
 Responsible Accl.No:
 Trailer number: LHP56695
 Seal number(s): 22413920

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name:
 Address:
 City/State/Zip:

SCAC: GLTN
 Pro Number:

SPECIAL INSTRUCTIONS:
 Load #: 784981183
 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

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	119	1669.43	Y	N	7 PLS
Grand Total	119	1669.43			

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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
119	ctns			1669.43		Comforters, Bedspreads	49017	200
119				1669.43		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).

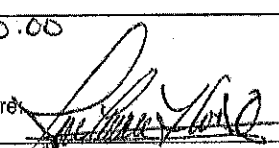
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable 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.
Also 3/19/19

Trailer Loaded: Freight Counted:
 By Shipper By Shipper
 By Driver 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.
 Property described above is received in good order, except as noted.
 Appt Time: 10:00
 In: 9:00
 Out: 9:35
 Driver Signature: 

Order No.: 4945894 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 -#00855

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408- 1614 US	Shipping Date: 03/19/2019
--	--	---	-------------------------------------

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086589131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	45	45	45	46
N/A	KL10-2647	086589131744	K Lyla Mauve 7pcs Comforter Se	EA	1	74	74	74	74


Total Weight:	1669.43
Total Quantity Ordered:	119
Total Cartons Ordered:	119
Total Quantity Shipped:	119
Total Cartons Shipped:	119

Date: 3/19/2019 7:38:30 AM

Bill Of Lading

Page 1 of 1

SHIP FROM
 Name: **E & E COMPANY LTD**
 Address: **221 Hanson Way**
 City/State/Zip: **Woodland, CA 95776**
 SID#: _____
 PHONE: _____
 VENDOR: **000074879** FOB:

Bill of Lading Number: **06757163000309351**

 (402)06757163000309351

SHIP TO
 Name: **Kohl's Dist. Center - #00840** Location #: **00840**
 Address: **2015 NE Jefferson Street**
Blue Spring (Grain Valley) D.C.,
00840
 City/State/Zip: **Grain Valley, MO 64029**
 CID#: **784977145** FOB:

CARRIER NAME: **Albanca Shippers**
 Responsible Acct.No: _____
 Trailer number: **EMHU-652288**
 Seal number(s): **22413617**

SCAC: **ANSH**
Pro Number: **N/A**

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: _____ Collect: **X** 3rd Party: _____

SPECIAL INSTRUCTIONS:
 Load #: **784977145**
 Packing List Is Attached

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	117	1642.33	Y N	7 PLS
Grand Total	117	1642.33		

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 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
117	ctns			1642.33		Comforters, Bedspreads	49017	200
117				1642.33		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: **Freight Counted:**
 By Shipper By Shipper
 By Driver 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.
 Property described above is received in good order, except as noted.

Alex M 03.19.19

Appt Time: **8:00**
 In: **7:00**
 Out: **7:50**
 Driver Signature: *[Signature]* 3/19

Order No.: 4945893 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 -#00840

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 03/19/2019
--	--	---	-------------------------------------

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	43	43	43	43
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	74	74	74	74

Total Weight:	1642.33
Total Quantity Ordered:	117
Total Cartons Ordered:	117
Total Quantity Shipped:	117
Total Cartons Shipped:	117

Date: 3/20/2019 12:19:47 PM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000310388	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Performance Team	
Name:	Kohl's	DC#:	XDSFS
		Div.:	
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	Trailer number:	LH219228
		Seal number(s):	22413759
City/State/Zip:	SANTA FE SPRINGS, CA 90670	SCAC:	GLTN
SID#:		Pro Number:	
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 UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
ME# 785070104		9:00 AM PM	11:25 AM PM
		Driver Departure Time	12:25 AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
12282315	Dept#: 211	90	1267.24	Y	N	06757163000309429	00860
12282315	Dept#: 211	194	2724.95	Y	N	06757163000309436	00890
12282315	Dept#: 211	193	2710.63	Y	N	06757163000309412	00810
Grand Total		477	6702.82				

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 300</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
25	Pallet			1250.00		Pallet		70
		477	ctns	6702.82		Comforters, Bedspreads	49017	200
25				7952.82		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.
Also Mo 3-20-19


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.
Over C 3-20-19

Date: 3/20/2019 12:16:22 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000309429	
Name:	E & E COMPANY LTD	 (402)06757163000309429	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: Performance Team	
VENDOR:	000074879	FOB:	<input type="checkbox"/>
SHIP TO		Responsible Acct.No:	
Name:	Kohl's Dist. Center - #00860	Location #:	00860
Address:	1600 North Business 45	Trailer number: LH219228	
	Corsicana D.C., 00860	Seal number(s): 22413759	
City/State/Zip:	Corsicana, TX 75110	SCAC: GLTN	
CID#:	785070104	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Pro Number:	
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:		Prepaid: Collect: X 3rd Party:	
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS:			
Load #: 785070104			
Packing List is Attached			

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
12282315	Dept#: 211	90	1267.24	Y	N	
Grand Total		90	1267.24			

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 366</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
5	Pallet			250.00		Pallet		
		90	ctns	1267.24		Comforters, Bedspreads	49017	200
5		90		1517.24		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.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature: _____

Order No.: 4946896 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 -#00860

SHIP FROM:
 E & E COMPANY LTD
 221 HANSON WAY
 WOODLAND, CA 95776

BILL TO:
 KOHL'S STORE
 N66 W17000 RIDGEWOOD DRIVE
 MENOMONEE FALLS, WI 53051
 US

SHIP TO:
 KOHL'S DIST. CENTER - #00860
 1600 NORTH BUSINESS 45
 CORSICANA D.C.
 CORSICANA, TX 75110
 US

Shipping Date:
 03/20/2019


Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL.10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	28	28	28	28
N/A	KL.10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	62	62	62	62

Total Weight: 1267.24
Total Quantity Ordered: 90
Total Cartons Ordered: 90
Total Quantity Shipped: 90
Total Cartons Shipped: 90

Date: 3/20/2019 12:08:17 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohl's Dist. Center - #00810 Location #: 00810
Address:	221 Hanson Way	Address:	7855 County Road 140
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Findlay D.C., 00810
SID#:		CID#:	785070104
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000309412		Trailer number: LH219228	
		Seal number(s): 22413759	
(402)06757163000309412		SCAC: GLTN	
CARRIER NAME: Performance Team		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Load #: 785070104		(check box)	
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	193	2710.63	Y	N	
Grand Total	193	2710.63			

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(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
10	Pallet			500.00		Pallet		
		193	ctns	2710.63		Comforters, Bedspreads	49017	200
10		193		3210.63		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.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature: _____

Order No.: 4945891 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 - #00810

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	Shipping Date: 03/20/2019
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Cust, SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	69	69	69	69
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	124	124	124	124

Total Weight:	2710.63
Total Quantity Ordered:	193
Total Cartons Ordered:	193
Total Quantity Shipped:	193
Total Cartons Shipped:	193

Date: 3/20/2019 11:54:51 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohl's Dist. Center - #00890 Location #: 00890
Address:	221 Hanson Way	Address:	4300 MBL Drive
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Ottawa D.C., 00890
SID#:		City/State/Zip:	Ottawa, IL 61350
PHONE:		CID#:	785070104
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 08757163000309436		Trailer number: LH219228	
		Seal number(s): 22413759	
(402)06757163000309436		SCAC: GLTN	
CARRIER NAME: Performance Team		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 785070104			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
12282315 Dept#: 211	194	2724.95	Y	N	
Grand Total	194	2724.95			

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(c) of NMPG Item 300.</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
10	Pallet			500.00		Pallet		
		194	ctns	2724.95		Comforters, Bedspreads	49017	200
10		194		3224.95		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 _____

GOD 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.

Property described above is received in good order, except as noted.

Appt Time:
In:
Out:
Driver Signature:

Order No.: 4945899 Order Date: 03/08/2019 Customer: KOHL'S DIST. CENTER Customer PO No.: 12282315
 - #00890

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S STORE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHL'S DIST. CENTER - #00890 4300 MBL DRIVE OTTAWA D.C. OTTAWA, IL 61350 US	Shipping Date: 03/20/2019
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2646	086569131737	Q Lyla Mauve 7pcs Comforter Se	EA	1	69	69	69	69
N/A	KL10-2647	086569131744	K Lyla Mauve 7pcs Comforter Se	EA	1	125	125	125	125

Total Weight:	2724.95
Total Quantity Ordered:	194
Total Cartons Ordered:	194
Total Quantity Shipped:	194
Total Cartons Shipped:	194

12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295407	0634429348	00006757166344293485	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295407	0634429349	00006757166344293492	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295407	0634429350	00006757166344293508	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295421	0634429352	00006757166344293522	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295421	0634429353	00006757166344293539	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295421	0634429355	00006757166344293553	Loaded
12282315	4945896	R201903120900346	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001295421	0634429356	00006757166344293560	Loaded

12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429166	00006757166344291665	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429167	00006757166344291672	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429168	00006757166344291689	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429169	00006757166344291696	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429170	00006757166344291702	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429171	00006757166344291719	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429172	00006757166344291726	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429173	00006757166344291733	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429174	00006757166344291740	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429175	00006757166344291757	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429176	00006757166344291764	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429177	00006757166344291771	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429178	00006757166344291788	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429179	00006757166344291795	Loaded
12282315	4945895	R201903120900345	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296138	0634429180	00006757166344291801	Loaded

12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296626	0634429567	00006757166344295670	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296602	0634429568	00006757166344295687	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429569	00006757166344295694	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429570	00006757166344295700	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429571	00006757166344295717	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429572	00006757166344295724	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429573	00006757166344295731	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429574	00006757166344295748	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429575	00006757166344295755	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429576	00006757166344295762	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429577	00006757166344295779	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429578	00006757166344295786	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429579	00006757166344295793	Loaded
12282315	4945898	R201903120900358	KL10-2647	K Lyla Mauve 7pcs Comforter Se	Standard	00106757163001296619	0634429580	00006757166344295809	Loaded

