

SHIP FROM		Master Bill of Lading Number: 06757161147149205
Name:	E & E COMPANY LTD	
Address:	400 Longfellow Ct	
City/State/Zip:	Livermore, CA 94550	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: GALE TRIANGLE	
Name:	Kohl's		DC#: XDSFS
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS		Div.
City/State/Zip:	SANTA FE SPRINGS, CA 90670		
SID#:	FOB: <input type="checkbox"/>		

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:		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
ME# 785238550		AM PM	AM PM
			12:30
			1:00

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	ADDITIONAL SHIPPER INFO			
				BOL#	DC#	Supplier#	
12298754 Dept#: 104	4	44.07	Y N	06757161147142534	00816		
12298754 Dept#: 104	4	44.07	Y N	06757161147142565	00870		
12298754 Dept#: 104	5	59.72	Y N	06757161147142527	00806		
12148306 Dept#: 036	10	74.90	Y N	06757161147142527	00806		
12148306 Dept#: 036	7	52.43	Y N	06757161147142558	00836		
12148306 Dept#: 036	10	74.90	Y N	06757161147142565	00870		
12298754 Dept#: 104	5	59.72	Y N	06757161147142541	00826		
12268198 Dept#: 036	30	140.04	Y N	06757161147142527	00806		
12268198 Dept#: 036	14	68.72	Y N	06757161147142534	00816		
12268198 Dept#: 036	24	115.40	Y N	06757161147142541	00826		
12268198 Dept#: 036	22	106.60	Y N	06757161147142565	00870		
12148306 Dept#: 036	9	67.41	Y N	06757161147142534	00816		
12298754 Dept#: 104	3	34.82	Y N	06757161147142558	00836		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount \$ _____

Fee Terms: Collect: Prepaid:
 Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

[Signature] 3-25-19

[Signature] 3/25/19

Date: 3/25/2019 12:40:32 PM

Master Bill Of Lading

Page 2 of 2

SHIP FROM		Master Bill of Lading Number: 06757161147149205	
Name:	E & E COMPANY LTD		
Address:	400 Longfellow Ct		
City/State/Zip:	Livermore, CA 94550		
SID#:		FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: GALE TRIANGLE	
Name:	Kohl's	DC#:	XDSFS
		Div.:	
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	Trailer number:	547
City/State/Zip:	SANTA FE SPRINGS, CA 90670	Seal number(s):	9668263
SID#:		SCAC:	GLTR
		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	
ME# 785238550		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 (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
12148306	Dept#: 036	9	67.41	Y	N	06757161147142541	00826
12268198	Dept#: 036	8	37.88	Y	N	06757161147142558	00836
Grand Total		164	1048.09				

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
15	Pallet			750.00		Pallet		70
		164	ctns	1048.09		Sleepwear,Underwear	49880	100
15				1798.09		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.

SHIP FROM		Bill of Lading Number: 06757161147142565	
Name: E & E COMPANY LTD		 (402)06757161147142565	
Address: 400 Longfellow Ct			
City/State/Zip: Livermore, CA 94550			
SID#:			
PHONE:		CARRIER NAME: GALE TRIANGLE	
VENDOR: 000074879		Responsible Acct.No:	
SHIP TO		Trailer number: 547	
Name: Kohl's Fulfillment Center - #00870 Location #: 00870		Seal number(s): 9668263	
Address: 3500 Salzman Road		SCAC: GLTR	
City/State/Zip: 00870		Pro Number:	
City/State/Zip: Middletown, OH 45044-9401			
CID#: 785238550			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 785238550			
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
12298754 Dept#: 104	4	44.07	Y N		
12268198 Dept#: 036	22	106.60	Y N		
12148306 Dept#: 036	10	74.90	Y N		
Grand Total	36	225.57			

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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
3	Pallet			150.00		Pallet		
		36	ctns	225.57		Sleepwear, Underwear	49880	100
3		36		375.57		Grand Total		

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

<p>SHIPPER SIGNATURE / DATE</p> <p><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></p>	<p>Trailer Loaded:</p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver</p> <p>Freight Counted:</p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver/pallets said to contain</p> <p><input type="checkbox"/> By Driver/Pieces</p>	<p>CARRIER SIGNATURE / PICKUP DATE</p> <p><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></p> <p><i>Property described above is received in good order, except as noted.</i></p> <p>Appt Time: In: Out: Driver Signature:</p>
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SHIP FROM	Bill of Lading Number: 06757161147142527
Name: E & E COMPANY LTD	 (402)06757161147142527
Address: 400 Longfellow Ct	
City/State/Zip: Livermore, CA 94550	
SID#:	
PHONE:	
VENDOR: 000074879	FOB: <input type="checkbox"/>

SHIP TO	CARRIER NAME: GALE TRIANGLE
Name: Kohl's Fulfillment Center - #00806 Location #: 00806	Responsible Acct.No:
Address: 825 East Central Avenue	Trailer number: 547
00806	Seal number(s): 9668263
City/State/Zip: San Bernardino, CA 92408-2413	SCAC: GLTR
CID#: 785238550	Pro Number:
FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:	
Name:	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Address:	
City/State/Zip:	Prepaid: Collect: X 3rd Party:
SPECIAL INSTRUCTIONS: Load #: 785238550	<input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading
Packing List is Attached	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
12298754 Dept#: 104	5	59.72	Y N		
12148306 Dept#: 036	10	74.90	Y N		
12268198 Dept#: 036	30	140.04	Y N		
Grand Total	45	274.66			

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
3	Pallet			150.00		Pallet		
		45	ctns	274.66		Sleepwear,Underwear	49880	100
3		45		424.66		Grand Total		

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: <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 type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input 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>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

SHIP FROM		Bill of Lading Number: 06757161147142534	
Name: E & E COMPANY LTD		 (402)06757161147142534	
Address: 400 Longfellow Ct			
City/State/Zip: Livermore, CA 94550			
SID#:			
PHONE:		CARRIER NAME: GALE TRIANGLE	
VENDOR: 000074879		Responsible Acct.No:	
SHIP TO		Trailer number: 547	
Name: Kohl's Fulfillment Center - #00816 Location #: 00816		Seal number(s): 9668263	
Address: 1701 Trimble Avenue		SCAC: GLTR	
00816		Pro Number:	
City/State/Zip: Edgewood, MD 21040			
CID#: 785238550			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 785238550			
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
12298754 Dept#: 104	4	44.07	Y N		
12148306 Dept#: 036	9	67.41	Y N		
12268198 Dept#: 036	14	68.72	Y N		
Grand Total	27	180.20			

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
3	Pallet			150.00		Pallet		
		27	ctns	180.20		Sleepwear,Underwear	49880	100
3		27		330.20		Grand Total		

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: <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 type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input 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.
			Appt Time: In: Out: Driver Signature:

KOHLAPL EXPORT SHEET

03/25/19

PO NOS.	ORDER#	Ship To	UNITS	WEIGHT	Routing	CTNS
12148306	4945418	00806	60	74.90	5.18	10
12268198	4956707	00806	180	140.04	14.28	30
12298754	4953374	00806	30	59.72	7.95	5
		00806 Total	270	274.66	27.41	45
12148306	4945419	00816	54	67.41	4.66	9
12268198	4956708	00816	84	68.72	6.88	14
12298754	4953375	00816	24	44.07	5.75	4
		00816 Total	162	180.20	17.29	27
12148306	4945420	00826	54	67.41	4.66	9
12268198	4956709	00826	144	115.40	11.64	24
12298754	4953376	00826	30	59.72	7.95	5
		00826 Total	228	242.53	24.25	38
12148306	4945421	00836	60	74.90	5.18	10
12268198	4956710	00836	60	46.68	4.76	10
12298754	4953377	00836	18	34.82	4.57	3
		00836 Total	138	156.40	14.51	23
12148306	4945422	00870	60	74.90	5.18	10
12268198	4956711	00870	144	115.40	11.64	24
12298754	4953378	00870	24	44.07	5.75	4
		00870 Total	228	234.37	22.57	38
		Grand Total	1,026	1,088.16	106.03	171

From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center - #00870
DC # 00870
3500 Salzman Road

Middletown, OH 45044-9401

From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center - #00870
DC # 00870
3500 Salzman Road

Middletown, OH 45044-9401

SHIP TO POSTAL CODE
(420) 45044-9401



CARRIER:

PRO:

B/L:

SHIP TO POSTAL CODE
(420) 45044-9401



CARRIER:

PRO:

B/L:

PO: 12268198
DEPT: 036
Style: II417202

Color: NAVY
Size: X LARGE
Case Pack: 6

PO: 12268198
DEPT: 036
Style: II417202

Color: RAJ 450
Size: X LARGE
Case Pack: 6

E&E Order: 4956711 Item: II02-3349 16
DESC: XL II417202 Camisole/Shorts

E&E Order: 4956711 Item: II02-3353 20
DESC: XL II417202 Camisole/Shorts

FOR (91) 000870



00870

FOR (91) 000870



00870

SSCC - 18:
(00) 0 0675716 634646616 0



SSCC - 18:
(00) 0 0675716 634646620 7



From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center -- #00836
DC # 00836
9998 All Points Parkway

Plainfield, IN 46168

SHIP TO POSTAL CODE
(420) 46168



CARRIER:

PRO:

B/L:

PO: 12148306
DEPT: 036
Style: JA218250

Color: PARIS 691
Size: LARGE
Case Pack: 6

E&E Order: 4945421
DESC: L JA218250 Pants Set

Item: HPS02-0203

5

FOR (91) 000836



00836

SSCC-18:

(00) 0 0675716 634646568 2



From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center -- #00836
DC # 00836
9998 All Points Parkway

Plainfield, IN 46168

SHIP TO POSTAL CODE
(420) 46168



CARRIER:

PRO:

B/L:

PO: 12148306
DEPT: 036
Style: JA218250

Color: NEW YORK
Size: SMALL
Case Pack: 6

Order: 4945421
DESC: S JA218250 Pants Set

Item: HPS02-0205

7

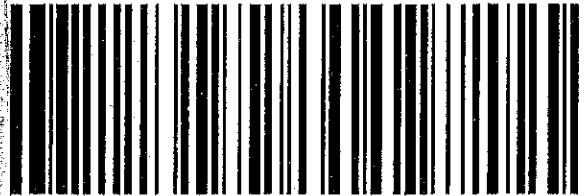
FOR (91) 000836



00836

SSCC-18:

(00) 0 0675716 634646570 5



From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct
Livermore, CA 94550

To
Kohl's Fulfillment Center -- #00836
DC # 00836
9998 All Points Parkway
Plainfield, IN 46168

SHIP TO POSTAL CODE
(420) 46168



CARRIER:

PRO:

B/L:

PO: 12148306
DEPT: 036
Style: JA218250

Color: NEW YORK
Size: LARGE
Case Pack: 6

E&E Order: 4945421
DESC: L JA218250 Pants Set

Item: HPS02-0207

9

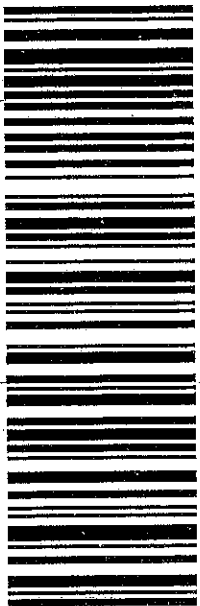
FOR (91) 000836



00836

SSCC-18:

(00) 0 0675716 634646572 9



From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center -- #00836
DC # 00836
9998 All Points Parkway

Plainfield, IN 46168

From
E & E COMPANY LTD
dba JLAHOME
400 Longfellow Ct

Livermore, CA 94550

To
Kohl's Fulfillment Center -- #00836
DC # 00836
9998 All Points Parkway

Plainfield, IN 46168

SHIP TO POSTAL CODE
(420) 46168



CARRIER:

PRO:

B/L:

PO: 12268198

DEPT: 036

Style: II417202

Color: RAJ 450

Size: LARGE

Case Pack: 6

SHIP TO POSTAL CODE
(420) 46168



CARRIER:

PRO:

B/L:

PO: 12268198

DEPT: 036

Style: II417202

Color: NAVY

Size: LARGE

Case Pack: 6

E&E Order: 4956710

Item: II02-3352

8

DESC: L II417202 Camisole/Shorts

FOR

(91) 000836



00836

SSCC-18:

(00) 0 0675716 634646584 2



E&E Order: 4956710

Item: II02-3348

6

DESC: L II417202 Camisole/Shorts

FOR

(91) 000836



00836

SSCC-18:

(00) 0 0675716 634646582 8

