

Supplier Compliance Expense Offset Recap

Stores - 123182 - E & E CO LTD *
 Year 2019 Week 26 thru Year 2019 Week 26 - Reference 3401002

Week	Sub	Reference #	Error Description	Date Sent to AP	Fill Rate Cost	Offset	What-If Offset	Comments (See Help)	Examples
2019/23	723	3401002	Fill Rate - Shortage on Order	7/14/2019	25.00	2.50	0.00		

NON POM PO	Order Qty	Rcvd Qty	Credited Qty	Variance Qty	Tolerance Qty **	Out Of Tolerance Qty	Out of Tolerance Merch Cost	Offset	What-If Offset
000723112344	18	16	16	2	1	1	25.00	2.50	0.00

Lot	Line	Size	Order Qty	Rcvd Qty	Credited Qty	Variance Qty	Tolerance Qty **	Out of Tolerance Qty	Early Ship	Original Cancel
2850	0300	*ONLY	18	16	16	2	1	1	5/6/2019	5/14/2019

DI Details

Store	DI #	Order Qty	Rcvd Qty	Credited Qty	Variance Qty
0067-9	14012788 ✓	2	0	0	2

SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: **06757166000397380**

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div: _____
 Address: **120 Penney Road (PEPS)
 93872**
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: **UNYSON LOGISTICS**

AACT **14470766 - 8**

AA COOPER TRANSPORTATION

Trailer number: **48002**
 Seal number(s): _____
 SCAC: **UYSN**
 Pro Number: **14470766**



DRIVER'S SIGNATURE ACKNOWLEDGES RECEIPTS OF FREIGHT AGREED TO UNDER SEPARATE CONTRACT. TERMS AND CONDITIONS OF TARIFF AACT-100 APPLY. LIABILITY LIMITATION FOR LOSS OR DAMAGE ON THIS SHIPMENT MAY BE APPLICABLE. SEE 49 U.S.C. 14706(c)(1)(A) & (B)

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:

Load #: 131106137

Appointment Time: 12:07 PM Actual Driver Arrival Time: _____ Driver Departure Time: _____
 AM PM AM PM AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14012797	3	28.51	Y	N	06757166000397366	93872	123182
14012799	3	28.51	Y	N	06757166000397366	93872	123182
14012805	1	8.04	Y	N	06757166000397366	93872	123182
14012817	1	2.52	Y	N	06757166000397366	93872	123182
14012827	2	19.60	Y	N	06757166000397366	93872	123182
14012831	1	8.91	Y	N	06757166000397366	93872	123182
14012836	2	21.38	Y	N	06757166000397366	93872	123182
14012838	2	13.21	Y	N	06757166000397366	93872	123182
14012845	1	10.69	Y	N	06757166000397366	93872	123182
14012853	2	21.38	Y	N	06757166000397366	93872	123182
14012871	3	28.51	Y	N	06757166000397366	93872	123182
14012876	1	10.69	Y	N	06757166000397366	93872	123182
14012878	2	18.73	Y	N	06757166000397366	93872	123182

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.

KJ 5.13.19

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.

ACT *Claremont* 5-13-19 *SK*

SHIP FROM

Name: E & E COMPANY LTD
 Address: 550 Northport Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____ FOB:

Master Bill of Lading Number: 06757166000397380

SHIP TO

Name: JC Penney 93872 DC#: _____
 Div: _____
 Address: 120 Penney Road (PEPS)
 93872
 City/State/Zip: Forest Park, GA 30297
 SID#: _____ FOB:

CARRIER NAME: UNYSON LOGISTICS

Trailer number: 480028
 Seal number(s): _____

SCAC: UYSN
 Pro Number: 144707668

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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SPECIAL INSTRUCTIONS:

Load #: 131106137

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14012883	1	8.91	Y	N	06757166000397366	93872	123182
14012891	1	8.91	Y	N	06757166000397366	93872	123182
14012896	1	8.91	Y	N	06757166000397366	93872	123182
14012898	3	20.34	Y	N	06757166000397366	93872	123182
14012911	2	18.73	Y	N	06757166000397366	93872	123182
14012920	3	20.34	Y	N	06757166000397366	93872	123182
14012922	2	19.60	Y	N	06757166000397366	93872	123182
14012934	3	28.51	Y	N	06757166000397366	93872	123182
14012939	2	11.65	Y	N	06757166000397366	93872	123182
14012951	3	22.12	Y	N	06757166000397366	93872	123182
14012963	1	8.91	Y	N	06757166000397366	93872	123182
14012966	2	11.43	Y	N	06757166000397366	93872	123182
14012974	6	47.29	Y	N	06757166000397366	93872	123182

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: Freight Counted:

- By Shipper
- By Driver
- 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

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: **06757166000397380**

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div. _____
 Address: **120 Penney Road (PEPS)**
93872
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: **UNYSON LOGISTICS**

Trailer number: **480028**

Seal number(s): _____

SCAC: **UYSN**

Pro Number: **144707668**

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:

Load #: **131106137**

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14012978	1	8.04	Y	N	06757166000397366	93872	123182
14012979	3	28.51	Y	N	06757166000397366	93872	123182
14012994	1	10.69	Y	N	06757166000397366	93872	123182
14012998	3	20.34	Y	N	06757166000397366	93872	123182
14012999	2	11.43	Y	N	06757166000397366	93872	123182
14013002	2	19.60	Y	N	06757166000397366	93872	123182
14013004	1	8.91	Y	N	06757166000397366	93872	123182
14013009	1	8.91	Y	N	06757166000397366	93872	123182
14013011	1	8.04	Y	N	06757166000397366	93872	123182
14013036	3	20.34	Y	N	06757166000397366	93872	123182
14012787	1	8.04	Y	N	06757166000397366	93872	123182
14012789	3	26.73	Y	N	06757166000397366	93872	123182
14012814	3	25.86	Y	N	06757166000397366	93872	123182

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: Freight Counted:

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> By Shipper | <input 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.

SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: **06757166000397380**

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div. _____
 Address: **120 Penney Road (PEPS)**
93872
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: **UNYSON LOGISTICS**

Trailer number: **480028**

Seal number(s): _____

SCAC: **UYSN**

Pro Number: **144707668**

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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SPECIAL INSTRUCTIONS:

Load #: 131106137

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14012818	1	10.69	Y	N	06757166000397366	93872	123182
14012824	1	10.69	Y	N	06757166000397366	93872	123182
14012835	1	8.91	Y	N	06757166000397366	93872	123182
14012839	2	13.21	Y	N	06757166000397366	93872	123182
14012851	1	8.91	Y	N	06757166000397366	93872	123182
14012856	2	5.26	Y	N	06757166000397366	93872	123182
14012858	1	8.91	Y	N	06757166000397366	93872	123182
14012863	1	2.52	Y	N	06757166000397366	93872	123182
14012867	7	58.67	Y	N	06757166000397366	93872	123182
14012879	8	59.41	Y	N	06757166000397366	93872	123182
14012881	3	14.17	Y	N	06757166000397366	93872	123182
14012886	1	2.52	Y	N	06757166000397366	93872	123182
14012888	1	8.91	Y	N	06757166000397366	93872	123182

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.

SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: 06757166000397380

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div. _____
 Address: **120 Penney Road (PEPS)**
93872
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: **UNYSON LOGISTICS**

Trailer number: **480028**
 Seal number(s): _____
 SCAC: **UYSN**
 Pro Number: **144707668**

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:

Load #: 131106137

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14012899	1	8.04	Y	N	06757166000397366	93872	123182
14012903	1	8.91	Y	N	06757166000397366	93872	123182
14012914	3	28.51	Y	N	06757166000397366	93872	123182
14012919	3	30.29	Y	N	06757166000397366	93872	123182
14012925	1	2.52	Y	N	06757166000397366	93872	123182
14012943	2	21.38	Y	N	06757166000397366	93872	123182
14012946	2	16.95	Y	N	06757166000397366	93872	123182
14012954	2	17.82	Y	N	06757166000397366	93872	123182
14012958	1	8.91	Y	N	06757166000397366	93872	123182
14012961	1	2.52	Y	N	06757166000397366	93872	123182
14012988	1	8.91	Y	N	06757166000397366	93872	123182
14013001	4	29.25	Y	N	06757166000397366	93872	123182
14013027	6	47.29	Y	N	06757166000397366	93872	123182

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

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

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: 06757166000397380

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div. _____
 Address: **120 Penney Road (PEPS)**
93872
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: **UNYSON LOGISTICS**

Trailer number: **480028**
 Seal number(s): _____
 SCAC: **UYSN**
 Pro Number: **144707668**

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

(check box) MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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SPECIAL INSTRUCTIONS:

Load #: 131106137

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
14013041	3	25.86	Y	N	06757166000397366	93872	123182
14013066	6	39.81	Y	N	06757166000397366	93872	123182
14013068	3	32.07	Y	N	06757166000397366	93872	123182
14012800	1	10.69	Y	N	06757166000397366	93872	123182
14012802	1	8.91	Y	N	06757166000397366	93872	123182
14012809	1	8.91	Y	N	06757166000397366	93872	123182
14012813	3	15.53	Y	N	06757166000397366	93872	123182
14012823	1	8.91	Y	N	06757166000397366	93872	123182
14012840	2	17.82	Y	N	06757166000397366	93872	123182
14012842	2	19.60	Y	N	06757166000397366	93872	123182
14012849	1	8.91	Y	N	06757166000397366	93872	123182
14012854	6	41.83	Y	N	06757166000397366	93872	123182
14012875	2	19.60	Y	N	06757166000397366	93872	123182

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:

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> By Shipper | <input 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.

SHIP FROM	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>	Master Bill of Lading Number: 06757166000397380

SHIP TO	
Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: UNYSON LOGISTICS Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668

THIRD PARTY FREIGHT CHARGES BILL TO:							
Name: _____ Address: _____ City/State/Zip: _____	Freight Charge Terms: Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/> <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;">Appointment Time</td> <td style="width: 33%;">Actual Driver Arrival Time</td> <td style="width: 33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM PM	AM PM	AM PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time					
AM PM	AM PM	AM PM					
SPECIAL INSTRUCTIONS: Load #: 131106137							

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14012884	5	45.46	Y	N	06757166000397366	93872	123182
14012895	2	11.43	Y	N	06757166000397366	93872	123182
14012915	1	8.91	Y	N	06757166000397366	93872	123182
14012921	1	8.04	Y	N	06757166000397366	93872	123182
14012938	2	13.21	Y	N	06757166000397366	93872	123182
14012955	3	23.90	Y	N	06757166000397366	93872	123182
14012959	2	5.04	Y	N	06757166000397366	93872	123182
14012960	1	10.69	Y	N	06757166000397366	93872	123182
14012962	5	39.07	Y	N	06757166000397366	93872	123182
14012967	5	44.59	Y	N	06757166000397366	93872	123182
14012984	2	19.60	Y	N	06757166000397366	93872	123182
14012985	4	29.25	Y	N	06757166000397366	93872	123182
14012989	2	19.40	Y	N	06757166000397366	93872	123182

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 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.
--	---	---	---

SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668	
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 #: 131106137		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED <input type="checkbox"/> UNDERLYING BILLS OF LANDING	
		Appointment Time _____ AM/PM Actual Driver Arrival Time _____ AM/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#
14013032	1	8.91	Y	N	06757166000397366	93872	123182
14013034	4	24.64	Y	N	06757166000397366	93872	123182
14013038	3	28.51	Y	N	06757166000397366	93872	123182
14013039	1	2.52	Y	N	06757166000397366	93872	123182
14013051	1	8.91	Y	N	06757166000397366	93872	123182
14013060	2	17.82	Y	N	06757166000397366	93872	123182
14013063	2	13.21	Y	N	06757166000397366	93872	123182
14013065	3	20.34	Y	N	06757166000397366	93872	123182
5696679K	55	488.73	Y	N	06757166000397373	93872	123182
14012785	1	8.91	Y	N	06757166000397366	93872	123182
14012788	2	16.08	Y	N	06757166000397366	93872	123182
14012801	2	11.43	Y	N	06757166000397366	93872	123182
14012806	2	21.18	Y	N	06757166000397366	93872	123182

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: <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.
--	---	---	---

SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668	
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 #: 131106137		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED 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 (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14012834	1	8.91	Y	N	06757166000397366	93872	123182
14012846	6	50.63	Y	N	06757166000397366	93872	123182
14012857	1	8.04	Y	N	06757166000397366	93872	123182
14012860	1	8.91	Y	N	06757166000397366	93872	123182
14012862	11	75.36	Y	N	06757166000397366	93872	123182
14012874	3	25.86	Y	N	06757166000397366	93872	123182
14012887	3	26.73	Y	N	06757166000397366	93872	123182
14012894	1	2.52	Y	N	06757166000397366	93872	123182
14012908	3	13.30	Y	N	06757166000397366	93872	123182
14012910	1	8.91	Y	N	06757166000397366	93872	123182
14012912	1	8.04	Y	N	06757166000397366	93872	123182
14012916	1	10.49	Y	N	06757166000397366	93872	123182
14012917	2	19.60	Y	N	06757166000397366	93872	123182

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 / 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.
--	---	---	---

SHIP FROM		Master Bill of Lading Number: 06757166000397380
Name:	E & E COMPANY LTD	
Address:	550 Northport Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: UNYSON LOGISTICS
Name:	JC Penney 93872	Trailer number: 480028
DC#:		Seal number(s):
Div.:		SCAC: UYSN
Address:	120 Penney Road (PEPS) 93872	Pro Number: 144707668
City/State/Zip:	Forest Park, GA 30297	
SID#:	FOB: <input type="checkbox"/>	

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	Actual Driver Arrival Time	Driver Departure Time
SPECIAL INSTRUCTIONS:		AM PM	AM PM	AM PM
Load #: 131106137				

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
14012923	3	28.51	Y	N	06757166000397366	93872	123182
14012926	2	17.82	Y	N	06757166000397366	93872	123182
14012927	1	8.91	Y	N	06757166000397366	93872	123182
14012935	5	41.72	Y	N	06757166000397366	93872	123182
14012948	1	8.04	Y	N	06757166000397366	93872	123182
14012950	1	8.04	Y	N	06757166000397366	93872	123182
14012952	2	16.95	Y	N	06757166000397366	93872	123182
14012975	1	8.04	Y	N	06757166000397366	93872	123182
14012981	4	40.98	Y	N	06757166000397366	93872	123182
14012982	1	10.69	Y	N	06757166000397366	93872	123182
14012995	2	18.73	Y	N	06757166000397366	93872	123182
14013006	3	25.86	Y	N	06757166000397366	93872	123182
14013008	1	10.69	Y	N	06757166000397366	93872	123182

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:	Freight Counted:
<input type="checkbox"/> By Shipper	<input 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.

SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD			
Address: 550 Northport Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
SID#: _____	FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872	DC#: _____		
	Div. _____		
Address: 120 Penney Road (PEPS) 93872		Trailer number: 480028	
		Seal number(s): _____	
City/State/Zip: Forest Park, GA 30297		SCAC: UYSN	
SID#: _____	FOB: <input type="checkbox"/>	Pro Number: 144707668	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____			
Address: _____		Prepaid: <input type="checkbox"/>	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
Load #: 131106137		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#
14013021	1	10.49	Y	N	06757166000397366	93872	123182
14013030	4	33.90	Y	N	06757166000397366	93872	123182
14013033	2	19.60	Y	N	06757166000397366	93872	123182
14013035	4	31.03	Y	N	06757166000397366	93872	123182
14013046	4	38.33	Y	N	06757166000397366	93872	123182
14013048	1	2.52	Y	N	06757166000397366	93872	123182
14012793	1	8.91	Y	N	06757166000397366	93872	123182
14012807	9	75.22	Y	N	06757166000397366	93872	123182
14012815	1	8.91	Y	N	06757166000397366	93872	123182
14012825	3	20.34	Y	N	06757166000397366	93872	123182
14012843	3	25.86	Y	N	06757166000397366	93872	123182
14012847	5	38.16	Y	N	06757166000397366	93872	123182
14012850	2	13.21	Y	N	06757166000397366	93872	123182

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.

Date: 5/13/2019 12:07:33 PM

Master Bill Of Lading

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SHIP FROM				SHIP TO					
Name: E & E COMPANY LTD				Master Bill of Lading Number: 06757166000397380					
Address: 550 Northport Pkwy				CARRIER NAME: UNYSON LOGISTICS					
City/State/Zip: Port Wentworth, GA 31407				Trailer number: 480028					
SID#: _____ FOB: <input type="checkbox"/>				Seal number(s): _____					
Name: JC Penney 93872				DC#: _____					
Address: 120 Penney Road (PEPS)				Div. _____					
93872				SCAC: UYSN					
City/State/Zip: Forest Park, GA 30297				Pro Number: 144707668					
SID#: _____ FOB: <input type="checkbox"/>				Freight Charge Terms:					
THIRD PARTY FREIGHT CHARGES BILL TO:				Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>					
Name: _____				<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED					
Address: _____				(check box) UNDERLYING BILLS OF LANDING					
City/State/Zip: _____				Appointment Time		Actual Driver Arrival Time		Driver Departure Time	
SPECIAL INSTRUCTIONS:				AM		AM		AM	
Load #: 131106137				PM		PM		PM	
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO		Supplier#	
						DC#			
14012852	3	28.51	Y	N	06757166000397366	93872	123182		
14012859	3	25.86	Y	N	06757166000397366	93872	123182		
14012861	2	16.95	Y	N	06757166000397366	93872	123182		
14012866	2	16.95	Y	N	06757166000397366	93872	123182		
14012868	1	10.69	Y	N	06757166000397366	93872	123182		
14012880	7	43.42	Y	N	06757166000397366	93872	123182		
14012882	4	36.35	Y	N	06757166000397366	93872	123182		
14012889	3	30.29	Y	N	06757166000397366	93872	123182		
14012901	2	19.60	Y	N	06757166000397366	93872	123182		
14012933	2	19.60	Y	N	06757166000397366	93872	123182		
14012936	3	27.64	Y	N	06757166000397366	93872	123182		
14012941	3	29.42	Y	N	06757166000397366	93872	123182		
14012964	2	17.82	Y	N	06757166000397366	93872	123182		

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		Master Bill of Lading Number: 06757166000397380	
Name:	E & E COMPANY LTD		
Address:	550 Northport Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name:	JC Penney 93872	DC#:	
		Div.:	
Address:	120 Penney Road (PEPS) 93872	Trailer number:	480028
City/State/Zip:	Forest Park, GA 30297	Seal number(s):	
SID#:		SCAC:	UYSN
		Pro Number:	144707668
		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 (check box) UNDERLYING BILLS OF LANDING	
Load #: 131106137		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)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14012969	3	20.34	Y	N	06757166000397366	93872	123182
14012973	1	2.52	Y	N	06757166000397366	93872	123182
14012976	2	19.60	Y	N	06757166000397366	93872	123182
14012977	1	8.91	Y	N	06757166000397366	93872	123182
14012993	2	19.40	Y	N	06757166000397366	93872	123182
14012996	1	8.91	Y	N	06757166000397366	93872	123182
14012997	1	8.91	Y	N	06757166000397366	93872	123182
14013010	2	19.60	Y	N	06757166000397366	93872	123182
14013013	2	11.43	Y	N	06757166000397366	93872	123182
14013015	5	41.72	Y	N	06757166000397366	93872	123182
14013026	3	30.29	Y	N	06757166000397366	93872	123182
14013028	1	2.52	Y	N	06757166000397366	93872	123182
14013057	1	8.91	Y	N	06757166000397366	93872	123182

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.
--	---	---	---

SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872 DC#: _____ Div: _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668	
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 #: 131106137		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED <input type="checkbox"/> 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 (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14012872	1	8.91	Y	N	06757166000397366	93872	123182
14012885	5	48.11	Y	N	06757166000397366	93872	123182
14012890	2	18.73	Y	N	06757166000397366	93872	123182
14012892	6	38.07	Y	N	06757166000397366	93872	123182
14012900	2	19.60	Y	N	06757166000397366	93872	123182
14012902	2	19.60	Y	N	06757166000397366	93872	123182
14012906	1	2.52	Y	N	06757166000397366	93872	123182
14012907	1	2.52	Y	N	06757166000397366	93872	123182
14012918	1	8.91	Y	N	06757166000397366	93872	123182
14012924	1	10.69	Y	N	06757166000397366	93872	123182
14012928	2	18.73	Y	N	06757166000397366	93872	123182
14012929	4	30.16	Y	N	06757166000397366	93872	123182
14012940	1	2.52	Y	N	06757166000397366	93872	123182

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.

SHIP FROM		Master Bill of Lading Number: 06757166000397380
Name: E & E COMPANY LTD		
Address: 550 Northport Pkwy		
City/State/Zip: Port Wentworth, GA 31407		
SID#: _____	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: UNYSON LOGISTICS Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668
Name: JC Penney 93872	DC#: _____	
Address: 120 Penney Road (PEPS) 93872	Div: _____	
City/State/Zip: Forest Park, GA 30297		
SID#: _____	FOB: <input type="checkbox"/>	

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 UNDERLYING BILLS OF LANDING		
City/State/Zip: _____	(check box)		
SPECIAL INSTRUCTIONS: Load #: 131106137	Appointment Time AM PM	Actual Driver Arrival Time AM 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#		
14012942	2	16.08	Y	N	06757166000397366	93872	123182
14012947	2	19.60	Y	N	06757166000397366	93872	123182
14012965	3	19.69	Y	N	06757166000397366	93872	123182
14013017	3	25.86	Y	N	06757166000397366	93872	123182
14013020	7	61.54	Y	N	06757166000397366	93872	123182
14013023	5	37.51	Y	N	06757166000397366	93872	123182
14013025	2	19.60	Y	N	06757166000397366	93872	123182
14013031	4	29.25	Y	N	06757166000397366	93872	123182
14013062	2	13.21	Y	N	06757166000397366	93872	123182
14013064	6	56.15	Y	N	06757166000397366	93872	123182
14013069	2	16.95	Y	N	06757166000397366	93872	123182
14013052	1	8.91	Y	N	06757166000397366	93872	123182
14013054	3	25.86	Y	N	06757166000397366	93872	123182

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 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	SHIPPER SIGNATURE
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: 5/13/2019 12:07:33 PM

Master Bill Of Lading

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SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name:	E & E COMPANY LTD		
Address:	550 Northport Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:	FOB: <input type="checkbox"/>		
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name:	JC Penney 93872	DC#:	
		Div.	
Address:	120 Penney Road (PEPS) 93872	Trailer number:	480028
City/State/Zip:	Forest Park, GA 30297	Seal number(s):	
SID#:	FOB: <input type="checkbox"/>	SCAC:	UYSN
THIRD PARTY FREIGHT CHARGES BILL TO:		Pro Number: 144707668	
Name:		Freight Charge Terms:	
Address:		Prepaid: <input type="checkbox"/>	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 #: 131106137		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)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14013059	2	16.08	Y	N	06757166000397366	93872	123182
14013070	2	17.82	Y	N	06757166000397366	93872	123182
14013071	5	25.82	Y	N	06757166000397366	93872	123182
5696687K	10	80.40	Y	N	06757166000397373	93872	123182
14012794	1	8.91	Y	N	06757166000397366	93872	123182
14012795	1	8.91	Y	N	06757166000397366	93872	123182
14012804	5	44.59	Y	N	06757166000397366	93872	123182
14012808	4	32.81	Y	N	06757166000397366	93872	123182
14012820	7	50.50	Y	N	06757166000397366	93872	123182
14012833	5	46.37	Y	N	06757166000397366	93872	123182
14012837	3	25.86	Y	N	06757166000397366	93872	123182
14012841	1	8.91	Y	N	06757166000397366	93872	123182
14012848	1	8.91	Y	N	06757166000397366	93872	123182

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.

<p align="center">SHIP FROM</p> <p>Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/></p>	<p>Master Bill of Lading Number: 06757166000397380</p>
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<p align="center">SHIP TO</p> <p>Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/></p>	<p>CARRIER NAME: UNYSON LOGISTICS</p> <p>Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668</p>
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<p align="center">THIRD PARTY FREIGHT CHARGES BILL TO:</p> <p>Name: _____ Address: _____ City/State/Zip: _____</p> <p>SPECIAL INSTRUCTIONS: Load #: 131106137</p>	<p>Freight Charge Terms:</p> <p>Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM PM	AM PM	AM PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time					
AM PM	AM PM	AM PM					

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
14012865	3	30.29	Y	N	06757166000397366	93872	123182
14012869	5	42.81	Y	N	06757166000397366	93872	123182
14012873	1	8.04	Y	N	06757166000397366	93872	123182
14012893	2	19.60	Y	N	06757166000397366	93872	123182
14012904	4	29.47	Y	N	06757166000397366	93872	123182
14012909	1	8.91	Y	N	06757166000397366	93872	123182
14012913	2	17.82	Y	N	06757166000397366	93872	123182
14012931	3	20.34	Y	N	06757166000397366	93872	123182
14012944	6	56.15	Y	N	06757166000397366	93872	123182
14012949	2	19.60	Y	N	06757166000397366	93872	123182
14012953	2	19.60	Y	N	06757166000397366	93872	123182
14012956	1	8.91	Y	N	06757166000397366	93872	123182
14012957	1	8.91	Y	N	06757166000397366	93872	123182

<p>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 _____</p>	<p>COD Amount \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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).

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p align="right">Shipper Signature</p>
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<p>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.</p>	<p>Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>	<p>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.</p>
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SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD			
Address: 550 Northport Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
SID#: _____	FOB: <input type="checkbox"/>		
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872	DC#: _____	Trailer number: 480028	
	Div. _____	Seal number(s): _____	
Address: 120 Penney Road (PEPS) 93872		SCAC: UYSN	
City/State/Zip: Forest Park, GA 30297		Pro Number: 144707668	
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: Load #: 131106137		Appointment Time AM PM	Actual Driver Arrival Time AM 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#
14012971	1	8.91	Y	N	06757166000397366	93872	123182
14012980	1	8.91	Y	N	06757166000397366	93872	123182
14012986	2	11.43	Y	N	06757166000397366	93872	123182
14012987	3	23.70	Y	N	06757166000397366	93872	123182
14012991	2	16.95	Y	N	06757166000397366	93872	123182
14013000	5	41.72	Y	N	06757166000397366	93872	123182
14013003	1	8.91	Y	N	06757166000397366	93872	123182
14013005	2	19.60	Y	N	06757166000397366	93872	123182
14013012	3	30.09	Y	N	06757166000397366	93872	123182
14013014	3	20.56	Y	N	06757166000397366	93872	123182
14013019	1	8.91	Y	N	06757166000397366	93872	123182
14013037	2	17.82	Y	N	06757166000397366	93872	123182
14013040	3	30.09	Y	N	06757166000397366	93872	123182

<p>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 _____</p>	<p>COD Amount \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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).

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;">Shipper Signature</p>	
<p>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.</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 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.</p>		

SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name:	E & E COMPANY LTD		
Address:	550 Northport Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:	FOB:	<input type="checkbox"/>	

SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name:	JC Penney 93872	DC#:	
		Div.	
Address:	120 Penney Road (PEPS) 93872		
City/State/Zip:	Forest Park, GA 30297		
SID#:	FOB:	<input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/> <input checked="" type="checkbox"/> (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
Load #: 131106137	Appointment Time	Actual Driver Arrival Time	Driver Departure Time
	AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14013043	1	2.52	Y	N	06757166000397366	93872	123182
14013045	2	11.43	Y	N	06757166000397366	93872	123182
14013056	1	10.69	Y	N	06757166000397366	93872	123182
14013058	1	10.69	Y	N	06757166000397366	93872	123182
14013073	1	2.52	Y	N	06757166000397366	93872	123182
14013042	1	2.52	Y	N	06757166000397366	93872	123182
14013044	2	17.82	Y	N	06757166000397366	93872	123182
14013049	3	16.17	Y	N	06757166000397366	93872	123182
14013067	1	2.52	Y	N	06757166000397366	93872	123182
14013072	1	10.69	Y	N	06757166000397366	93872	123182
6754287R	15	120.60	Y	N	06757166000397373	93872	123182
14012786	1	8.04	Y	N	06757166000397366	93872	123182
14012790	1	8.91	Y	N	06757166000397366	93872	123182

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 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 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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SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668	
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 #: 131106137		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED 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#
14012792	3	25.86	Y	N	06757166000397366	93872	123182
14012798	3	16.17	Y	N	06757166000397366	93872	123182
14012803	1	8.91	Y	N	06757166000397366	93872	123182
14012810	2	20.98	Y	N	06757166000397366	93872	123182
14012812	3	26.73	Y	N	06757166000397366	93872	123182
14012819	2	17.82	Y	N	06757166000397366	93872	123182
14012822	1	8.91	Y	N	06757166000397366	93872	123182
14012829	2	16.08	Y	N	06757166000397366	93872	123182
14012844	1	10.69	Y	N	06757166000397366	93872	123182
14012877	2	17.82	Y	N	06757166000397366	93872	123182
14012897	4	28.38	Y	N	06757166000397366	93872	123182
14012905	2	21.38	Y	N	06757166000397366	93872	123182
14012930	6	48.85	Y	N	06757166000397366	93872	123182

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: Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver <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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SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **550 Northport Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: **06757166000397380**

SHIP TO

Name: **JC Penney 93872** DC#: _____
 Div. _____
 Address: **120 Penney Road (PEPS)**
93872
 City/State/Zip: **Forest Park, GA 30297**
 SID#: _____ FOB:

CARRIER NAME: UNYSON LOGISTICS

Trailer number: **480028**
 Seal number(s): _____
SCAC: UYSN
 Pro Number: **144707668**

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING
 (check box)

SPECIAL INSTRUCTIONS:
 Load #: 131106137

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
14012932	2	19.60	Y	N	06757166000397366	93872	123182
14012937	1	10.69	Y	N	06757166000397366	93872	123182
14012945	3	24.12	Y	N	06757166000397366	93872	123182
14012968	3	29.42	Y	N	06757166000397366	93872	123182
14012970	5	41.72	Y	N	06757166000397366	93872	123182
14012972	2	17.82	Y	N	06757166000397366	93872	123182
14012983	5	44.55	Y	N	06757166000397366	93872	123182
14012990	2	19.60	Y	N	06757166000397366	93872	123182
14012992	3	19.47	Y	N	06757166000397366	93872	123182
14013007	2	17.82	Y	N	06757166000397366	93872	123182
14013016	1	8.91	Y	N	06757166000397366	93872	123182
14013018	3	27.64	Y	N	06757166000397366	93872	123182
14013022	1	2.52	Y	N	06757166000397366	93872	123182

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 property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

<p>Trailer Loaded:</p> <p><input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>
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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		Master Bill of Lading Number: 06757166000397380
Name:	E & E COMPANY LTD	
Address:	550 Northport Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name:	JC Penney 93872		Trailer number: 480028
Address:	120 Penney Road (PEPS) 93872		Seal number(s):
City/State/Zip:	Forest Park, GA 30297		SCAC: UYSN
SID#:	FOB: <input type="checkbox"/>	Pro Number: 144707668	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:	Address:	Prepaid: <input type="checkbox"/>	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
Load #: 131106137		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	
			Y	N		DC#	Supplier#
14013024	6	41.59	Y	N	06757166000397366	93872	123182
14013029	1	8.91	Y	N	06757166000397366	93872	123182
14013047	3	15.73	Y	N	06757166000397366	93872	123182
14013050	2	19.60	Y	N	06757166000397366	93872	123182
14013053	2	13.21	Y	N	06757166000397366	93872	123182
14013055	4	36.55	Y	N	06757166000397366	93872	123182
14013061	3	28.51	Y	N	06757166000397366	93872	123182
6746705C	82	735.15	Y	N	06757166000397373	93872	123182
6746713C	20	160.80	Y	N	06757166000397373	93872	123182
Grand Total		920	7653.33				

<p>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 _____</p>	<p>COD Amount \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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).

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;">Shipper Signature</p>
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<p>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.</p>	<p>Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>	<p>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.</p>
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SHIP FROM		Master Bill of Lading Number: 06757166000397380	
Name: E & E COMPANY LTD Address: 550 Northport Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: UNYSON LOGISTICS	
Name: JC Penney 93872 DC#: _____ Div. _____ Address: 120 Penney Road (PEPS) 93872 City/State/Zip: Forest Park, GA 30297 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 480028 Seal number(s): _____ SCAC: UYSN Pro Number: 144707668	
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 #: 131106137		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
		Appointment Time AM PM	Actual Driver Arrival Time 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(a) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallet			350.00		Pallet		70
		920	ctns	7653.33		Pillows,Valance,Towels	49390	100
7				8003.33		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. <div style="text-align: right;">Shipper Signature</div>		
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.	<table style="width:100%;"> <tr> <td style="width: 50%;"> Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver </td> <td style="width: 50%;"> Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces </td> </tr> </table>	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
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.			