

Date: 6/27/2019 7:34:41 AM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757161153925398
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: EPES TRANSPORT
Name:	Macy's /Bloom Consolidation Center DC#:	
Address:	C/O Dynamic High Point 1124 Elon Place, Div.	
City/State/Zip:	High Point, NC 27260	
SID#:	FOB: <input type="checkbox"/>	
		Trailer number: 636356
		Seal number(s): 1870046
		SCAC:
		Pro Number: 0

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 UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time:	Actual Driver Arrival Time:
Load #: 50057176		8:20 AM PM	8:20 AM PM
		Driver Departure Time:	10:45 AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
5465875	6	232.10	Y N	06757161152955990	HF	
2357177	4	198.40	Y N	06757161153563019	CF	
5443853	12	505.43	Y N	06757161152955990	HF	
5466051	12	464.20	Y N	06757161152956969	BM	
5443853	60	2527.15	Y N	06757161152956034	SB	
5465875	30	1160.50	Y N	06757161152956034	SB	
5434051	24	1010.86	Y N	06757161152955969	BM	
Grand Total	148	6098.64				

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 300</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
20	Pallet			1000.00		Pallet		70
		84	ctns	4636.88		Furniture (Seating, Storage, Outdoor)	80580	150

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 \$

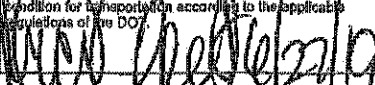

Fee Terms: Collect: Prepaid:

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 / DATE <small>This is to verify 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> 	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE <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> 
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Date: 6/27/2019 7:34:41 AM

Master Bill Of Lading

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SHIP FROM

Name: **E & E COMPANY LTD**
 Address: **311 International Trade Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: **06757161153925398**

SHIP TO

Name: **Macy's /Bloom Consolidation Center** DC#: _____
 Div. _____
 Address: **C/O Dynamic High Point**
1124 Elon Place,
 City/State/Zip: **High Point, NC 27260**
 SID#: _____ FOB:

CARRIER NAME: **EPES TRANSPORT**

Trailer number: **636356**
 Seal number(s): **1870046**

SCAC:
 Pro Number: **0**

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 #: **50057176**

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM PM	AM PM	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(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		64	ctns	1461.76		Furniture (Sleeping, Surfaces)	80580	100
20				7098.64		Grand Total		

Where the rate is dependant 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: 6/27/2019 7:34:25 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 08757161152955969
Name: E & E COMPANY LTD	Address: 311 International Trade Pkwy	 (402)06757161152955969
City/State/Zip: Port Wentworth, GA 31407	SID#:	
PHONE:	VENDOR:	CARRIER NAME: EPES TRANSPORT
	FOB: <input type="checkbox"/>	Responsible Acct.No:

SHIP TO		Trailer number: 636356
Name: Macy's Home Store Bailey Rd DC Location #: BM	Address: 300 South Bailey Road	Seal number(s): 1870046
City/State/Zip: North Jackson, OH 44451	CID#:	SCAC: EPSG
Dept: 0872	FOB: <input type="checkbox"/>	Pro Number: 0

THIRD PARTY FREIGHT CHARGES (SHIP TO)		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Name:	Address:	Prepaid: <input type="checkbox"/>	Collect: X	3rd Party:
City/State/Zip:	SPECIAL INSTRUCTIONS: Load #: 50057176 3794326 Packing List is Attached	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)		
		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
		AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
5466051	12	464.20	Y N	
5444051	24	1010.86	Y N	
Grand Total	36	1475.06		

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 350</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet		
		20	ctns	1109.62		Furniture (Seating, Storage, Outdoor)	80580	150
		16	ctns	365.44		Furniture (Sleeping, Surfaces)	80580	100
4		36		1675.06		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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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.
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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 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.
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Customer: MACY'S HOME STORE BAILEY RD DC

Ship Date: 06/27/2019

SHIP FROM:

E & E COMPANY LTD
311 INTERNATIONAL TRADE PKWY
PORT WENTWORTH, GA 31407

BILL TO:

MACY.COM (DC FOR FUR)
7 W 7TH ST,
CINCINNATI, OH 45202
US

SHIP TO:

MACY'S HOME STORE BAILEY RD DC
300 SOUTH BAILEY ROAD
NORTH JACKSON, OH 44451
US

Customer PO No.	Customer SKD No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
5444051	N/A	FPF17-0129	675716509972	Cirque Quatrefoil Metal Drum T	EA	1	2	2	2	2
5444051	N/A	FPF17-0294	675716613631	Hendrix Mirror Accent Table	EA	1	2	2	2	2
5444051	N/A	FPF17-0295	675716613648	Ario Metal Eyelet Accent Table	EA	1	2	2	2	2
5444051	N/A	FPF17-0298KD	675716608750	Arcadia Naturale End Table	EA	1	2	2	2	2
5444051	N/A	FPF17-0347	675716621377	Sheridan end table	EA	1	2	2	2	2
5444051	N/A	FPF17-0390	675716701406	West Ridge Accent Chest	EA	1	2	2	2	2
5444051	N/A	MP120-0160	675716887483	Quincy Accent Table	EA	1	2	2	2	2
5444051	N/A	MP120-0175	675716887100	Madison End Table	EA	1	2	2	2	2
5444051	N/A	MP120-0184	675716887018	Grammercy Accent Table	EA	1	2	2	2	2
5444051	N/A	MP130-0157	675716887445	Somerset 3-Drawer Chest	EA	1	2	2	2	2
5444051	N/A	MP130-0451	086569917027	Rubrix 3 Drawer Chest	EA	1	2	2	2	2
5444051	N/A	MPS135-0049	675716788490	Lauren Bar Cart	EA	1	2	2	2	2
5466051	N/A	FPF18-0052	675716464059	Hayden Slipper Accent Chair	EA	1	2	2	2	2
5466051	N/A	FPF18-0160	675716530969	Colton chair	EA	1	2	2	2	2
5466051	N/A	FPF18-0195	675716543211	Shandra II Tufted Top Storage	EA	1	2	2	2	2
5466051	N/A	FPF18-0487	675716727178	Shandra upholstered ottoman	EA	1	2	2	2	2
5466051	N/A	FPF18-0514	675716746377	Qwen Button Tufted Chair	EA	1	2	2	2	2
5466051	N/A	MP100-0017	675716843625	Maxwell/Roan/Lyle Chair	EA	1	2	2	2	2

Total Weight: 1475.06
Total Quantity Ordered: 36
Total Cartons Ordered: 36
Total Quantity Shipped: 36
Total Cartons Shipped: 36