

Date: 9/13/2019 8:38:31 AM

# Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000369270	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: Hub Group	
Name:	Macy's Home MMG Secaucus DC	DC#:	SC
		Div.:	
Address:	c/o Secaucus DC 500 Meadowlands Parkway,	Trailer number:	HGIU506433
		Seal number(s):	19863465
City/State/Zip:	Secaucus, NJ 07094	SCAC:	HUBG
SID#:		Pro Number:	N/A
		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:	Macy's c/o Hub Group	Prepaid:	<input type="checkbox"/>
Address:	2000 Clearwater Dr	Collect:	<input type="checkbox"/>
		3rd Party:	<input checked="" type="checkbox"/>
City/State/Zip:	Oak Brook, IL 60523	<input checked="" type="checkbox"/> MASTER BILL OF LANDING; WITH ATTACHED UNDERLYING BILLS OF LANDING	

SPECIAL INSTRUCTIONS:		Appointment Time		Actual Driver Arrival Time		Driver Departure Time	
Load #: 50239399		8:00 AM PM		7:30 AM PM		8:50 AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
9411051	529	3651.57	Y	N	06757163000368921	SC	
9479361	1055	11050.58	Y	N	06757163000368914	SC	
<b>Grand Total</b>	<b>1584</b>	<b>14702.15</b>					

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 366</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
27	Pallet			1350.00		Pallet		70
		1584	ctns	14702.15		Throws, Blankets	49040	150
27				16052.15		<b>Grand Total</b>		

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.  
*Aliso 09/13/19*

Trailer Loaded:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said to contain
	<input type="checkbox"/> By Driver/Pieces

**CARRIER SIGNATURE / PICKUP DATE**  
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.  
*Signature 9-13-19*

Date: 9/13/2019 8:38:20 AM

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000368921	
Name: E & E COMPANY LTD		 (402)06757163000368921	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA.95776			
SID#:			
PHONE:		CARRIER NAME: Hub Group	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: HGIU506433	
Name: Macy's Home MMG Secaucus DC Location #: SC		Seal number(s): 19863465	
Address: c/o Secaucus DC		SCAC: HUBG	
City/State/Zip: 500 Meadowlands Parkway, Secaucus, NJ 07094		Pro Number: N/A	
CID#:			
Dept: 0784		FOB: <input type="checkbox"/>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>			
Name: Macy's c/o Hub Group		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address: 2000 Clearwater Dr		Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	
City/State/Zip: Oak Brook, IL 60523		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: Load #: 50239399		Appointment Time	Actual Driver Arrival Time
Packing List is Attached		AM PM	AM PM
Driver Departure Time			
AM PM			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
9411051	529	3651.57	Y N	
<b>Grand Total</b>	529	3651.57		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 350</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallet			350.00		Pallet		
		529	ctns	3651.57		Throws, Blankets	49040	150
7		529		4001.57		<b>Grand Total</b>		

<p>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 this property is specifically stated by the shipper to be not exceeding _____ per _____</p>	<p><b>COD Amount:</b> _____</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;"><b>Shipper Signature</b></p>
<p><b>SHIPPER SIGNATURE / DATE</b>                  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 checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver/pallets said to contain  <input type="checkbox"/> By Driver/Pieces</p>
<p><b>CARRIER SIGNATURE / PICKUP DATE</b>                  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>	

Customer: MACY'S HOME MMG SECAUCUS DC

Ship Date: 09/13/2019

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 96778

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACY'S HOME MMG SECAUCUS DC  
C/O SECAUCUS DC  
600 MEADOWLANDS PARKWAY  
SECAUCUS, NJ 07094  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
9411051	10016635TW	MCG51-456	675716943127	T Solid Blanket	EA	2	106	53	106	53
9411051	10016635FQ	MCG51-457	675716943172	F/Q Solid Blanket	EA	2	208	104	208	104
9411051	10016635KG	MCG51-458	675716943226	K Solid Blanket	EA	2	160	80	160	80
9411051	10016635TW	MCG51-459	675716943134	T Solid Blanket	EA	2	106	53	106	53
9411051	10016635FQ	MCG51-460	675716943189	F/Q Solid Blanket	EA	2	208	104	208	104
9411051	10016635KG	MCG51-461	675716943233	K Solid Blanket	EA	2	160	80	160	80
9411051	10016635TW	MCG51-659	086569073518	Fleece Blanket	EA	2	14	7	14	7
9411051	10016635FQ	MCG51-660	086569073600	Fleece Blanket	EA	2	22	11	22	11
9411051	10016635KG	MCG51-661	086569073617	Fleece Blanket	EA	2	18	9	18	9
9411051	10016635TW	MCG51-665	086569073532	Fleece Blanket	EA	2	14	7	14	7
9411051	10016635FQ	MCG51-666	086569073570	Fleece Blanket	EA	2	22	11	22	11
9411051	10016635KG	MCG51-667	086569073631	Fleece Blanket	EA	2	20	10	20	10

Total Weight: 3651.57  
 Total Quantity Ordered: 1058  
 Total Cartons Ordered: 529  
 Total Quantity Shipped: 1058  
 Total Cartons Shipped: 529

Date: 9/13/2019 8:38:20 AM

# Bill Of Lading

Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000368921	
Name:	E & E COMPANY LTD	 (402)06757163000368921	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95778		
SID#:			
PHONE:		CARRIER NAME: Hub Group	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: HGIU506433	
Name:	Macy's Home MMG Secaucus DC Location #: SC	Seal number(s): 19863465	
Address:	c/o Secaucus DC	SCAC: HUBG	
City/State/Zip:	500 Meadowlands Parkway, Secaucus, NJ 07094	Pro Number: N/A	
CID#:			
Dept:	0784		
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:	Macy's c/o Hub Group	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	
Address:	2000 Clearwater Dr	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:	Oak Brook, IL 60523	(check box)	
SPECIAL INSTRUCTIONS: Load #: 50239399 Packing List is Attached		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
			Driver Departure Time
			AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
9411051	529	3651.57	Y N	
<b>Grand Total</b>	<b>529</b>	<b>3651.57</b>		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 380</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallet			350.00		Pallet		
		529	ctns	3651.57		Throws, Blankets	49040	150
7		529		4001.57		<b>Grand Total</b>		

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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<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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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Date: 9/13/2019 8:38:26 AM

# Bill Of Lading

Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 08757163000368914										
Name:	E & E COMPANY LTD	 (402)06757163000368914										
Address:	221 Hanson Way											
City/State/Zip:	Woodland, CA 95776											
SID#:												
PHONE:												
VENDOR:		CARRIER NAME: Hub Group										
	FOB: <input type="checkbox"/>	Responsible Acct.No:										
<b>SHIP TO</b>		Trailer number: HGIU506433										
Name:	Macy's Home MMG Secaucus DC Location #: SC	Seal number(s): 19863465										
Address:	c/o Secaucus DC	SCAC: HUBG										
	500 Meadowlands Parkway,	Pro Number: N/A										
City/State/Zip:	Secaucus, NJ 07094											
CID#:												
Dept:	0611	FOB: <input type="checkbox"/>										
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)										
Name:	Macy's c/o Hub Group	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: X										
Address:	2000 Clearwater Dr	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading										
City/State/Zip:	Oak Brook, IL 60523	<table border="1"> <tr> <td>Appointment Time</td> <td>Actual Driver Arrival Time</td> <td>Driver Departure Time</td> </tr> <tr> <td>AM</td> <td>AM</td> <td>AM</td> </tr> <tr> <td>PM</td> <td>PM</td> <td>PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time										
AM	AM	AM										
PM	PM	PM										
SPECIAL INSTRUCTIONS: Load #: 50239399												
Packing List is Attached												

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
9479361	1055	11050.58	Y N	
<b>Grand Total</b>	<b>1055</b>	<b>11050.58</b>		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
20	Pallet			1000.00		Pallet		
		1055	ctns	11050.58		Throws, Blankets	49040	150
20		1055		12050.58		<b>Grand Total</b>		

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
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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.
	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	

Customer: MACY'S HOME MMG SECAUCUS DC

Ship Date: 09/13/2019

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

BILL TO:  
MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

SHIP TO:  
MACY'S HOME MMG SECAUCUS DC  
C/O SECAUCUS DC  
500 MEADOWLANDS PARKWAY  
SECAUCUS, NJ 07094  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
9479361	100071550	MCG50-1301	732996957920	CC Plush Throw	EA	4	392	98	392	98
9479361	100071550	MCG50-1302	732996957821	CC Plush Throw	EA	4	312	78	312	78
9479361	100074841	MCG50-1306	732996958200	CC Plush Throw	EA	4	548	137	548	137
9479361	100074841	MCG50-1308	732996958231	CC Plush Throw	EA	4	212	53	212	53
9479361	100074841	MCG50-1309	732996958224	CC Plush Throw	EA	4	524	131	524	131
9479361	100074841	MCG50-1310	732996958446	CC Plush Throw	EA	4	208	52	208	52
9479361	100071550	MCG50-1497	732996957845	CC Plush Throw	EA	4	380	95	380	95
9479361	100071550	MCG60-1498	732996957807	CC Plush Throw	EA	4	224	56	224	56
9479361	100071550	MCG50-1500	732996957814	CC Plush Throw	EA	4	248	62	248	62
9479361	100071550	MCG50-1501	732996957791	CC Plush Throw	EA	4	420	105	420	105
9479361	100074841	MCG50-1503	732996958453	CC Plush Throw	EA	4	472	118	472	118
9479361	100074841	MCG50-1504	732996958255	CC Plush Throw	EA	4	280	70	280	70

Total Weight: 11050.5  
4220  
Total Quantity Ordered: 1055  
Total Cartons Ordered: 1055  
Total Quantity Shipped: 4220  
Total Cartons Shipped: 1055

Date: 9/13/2019 8:38:26 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macy's Home MMG Secaucus DC Location #: SC
Address:	221 Hanson Way	Address:	c/o Secaucus DC
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	500 Meadowlands Parkway, Secaucus, NJ 07094
SID#:		CID#:	
PHONE:		Dept:	0611
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000368914		Trailer number: HGIU506433	
		Seal number(s): 19863465	
(402)06757163000368914		SCAC: HUBG	
CARRIER NAME: Hub Group		Pro Number: N/A	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid: <input type="checkbox"/>		Collect: <input type="checkbox"/>	
Master Bill of Lading: with attached (check box)		3rd Party: X	
Appointment Time		Actual Driver Arrival Time	
AM		AM	
PM		PM	
Driver Departure Time		AM	
		PM	
SPECIAL INSTRUCTIONS:			
Load #: 50239399			
Packing List is Attached			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name: Macy's c/o Hub Group			
Address: 2000 Clearwater Dr			
City/State/Zip: Oak Brook, IL 60523			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
9479361	1055	11050.58	Y N	
<b>Grand Total</b>	<b>1055</b>	<b>11050.58</b>		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
20	Pallet			1000.00		Pallet		
		1055	ctns	11050.58		Throws, Blankets	49040	150
20		1055		12050.58		<b>Grand Total</b>		

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 sold to contain By Driver/Pieces

## CARRIER SIGNATURE / PICKUP DATE

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





























