

Chargebacks and RTVs

Macy's, Inc. (MacysNet)
 Valid as of: 12/31/2019 1:52:19 AM EST
 Division: Macy's Account #: 05390993890
 Vendor Name: E & E CO LTD
 Document Number: 4934768
 Department/Vendor: 792/938

Check Summary

Check Number: 1849251
 Check Date: 12/25/2019
 Purchase Order Number: 4862449

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
 Total Cost: (\$58.68)

Transaction Type: 796 - RTV DAMAGE ALLOWANCE MDA
 Total Cost: (\$1472.25)

Style Summary

Receipt Number: 5173149-000
 Carrier:
 Freight Bill:
 Bill of Lading: 0675716300
 Cartons: 0
 Weight: 0
 Total Cost: \$0

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost Diff	Ext Qty Diff
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No further detail exists for this transaction.

Receipt Number: 5173150-000
 Carrier:
 Freight Bill:
 Bill of Lading: 0675716300
 Cartons: 0
 Weight: 0
 Total Cost: \$0

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost Diff	Ext Qty Diff
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No further detail exists for this transaction.

Receipt Number: 5401196-000
 Carrier:
 Freight Bill:
 Bill of Lading: 0675716300
 Cartons: 0
 Weight: 0
 Total Cost: (\$58.68)

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost Diff	Ext Qty Diff
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LT	0	-1	\$58.68	\$0.00	\$0.00	-58.68
250						

Date: 10/29/2019 1:51:00 PM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000389537	
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 Store Portland DC	DC#:	PD
		Div.	
Address:	1155 Vaughn Parkway	Trailer number:	HGIU511688
		Seal number(s):	27709573
City/State/Zip:	Portland, TN 37148	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 Drive	Collect:	<input type="checkbox"/>
City/State/Zip:	Oak Brook, IL 60523	3rd Party:	<input checked="" type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
Load #: 50355762		Appointment Time	Actual Driver Arrival Time
		12:00 AM	12:00 AM
		PM	PM
			Driver Departure Time
			2:00 AM
			PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
4862449	39	507.13	Y	N	06757163000388554	PD	
4862449	433	7429.15	Y	N	06757163000388547	PD	
Grand Total	472	7936.28					

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
472	ctns			7936.28		Comforters, Bedspreads	49017	200
472				7936.28		Grand Total		

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

COD Amount \$ _____

Fee Terms: Collect: Prepaid:

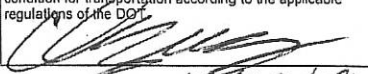
Customer check acceptable:

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

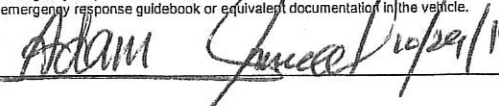
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable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


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

Shipper Signature

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

 10/29/19

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.

 10/29/19

SHIP FROM		Bill of Lading Number: 06757163000388547	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757163000388547	
SHIP TO		CARRIER NAME: Hub Group	
Name: Macy's Home Store Portland DC Location #: PD Address: 1155 Vaughn Parkway City/State/Zip: Portland, TN 37148 CID#: _____ Dept: 0792		Responsible Acct.No: _____ Trailer number: HGIU511688 Seal number(s): 27709573 SCAC: HUBG Pro Number: N/A	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: Macy's c/o Hub Group Address: 2000 Clearwater Drive City/State/Zip: Oak Brook, IL 60523		Prepaid: _____ Collect: _____ 3rd Party: X <input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Load #: 50355762 Packing List is Attached		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		AM	AM
		PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
4862449	433	7429.15	Y N	
Grand Total	433	7429.15		

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
433	ctns			7429.15		Comforters, Bedspreads	49017	200
433				7429.15		Grand Total		

<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 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>
<p>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>	
<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: <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>	

Customer: MACY'S HOME STORE PORTLAND DC

Ship Date: 10/29/2019

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

BILL TO:
MACYS.COM (DC)
2101 EAST KEMPER ROAD
CINCINNATI, OH 45241
US


SHIP TO:
MACY'S HOME STORE PORTLAND DC
1155 VAUGHN PARKWAY
PORTLAND, TN 37148
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
4862449	N/A	MCC10-1450	086569247520	Sherpa Comforter	EA	2	96	48	96	48
4862449	N/A	MCC10-1451	086569247544	Sherpa Comforter	EA	2	96	48	96	48
4862449	N/A	MCC10-1452	086569247513	Sherpa Comforter	EA	2	22	11	22	11
4862449	N/A	MCC10-1453	086569247537	Sherpa Comforter	EA	2	60	30	60	30
4862449	N/A	MCC10-1454	086569247551	Sherpa Comforter	EA	2	64	32	64	32
4862449	MCH10333	MCC10-348	675716657161	F/Q Sherpa Comforter	EA	2	192	96	192	96
4862449	MCH10334	MCC10-349	675716657208	K Sherpa Comforter	EA	2	144	72	144	72
4862449	MCH10342	MCC10-357	675716657192	F/Q Sherpa Comforter	EA	2	96	48	96	48
4862449	MCH10343	MCC10-358	675716657239	K Sherpa Comforter	EA	2	96	48	96	48

Total Weight: 7429.15
 Total Quantity Ordered: 866
 Total Cartons Ordered: 433
 Total Quantity Shipped: 866
 Total Cartons Shipped: 433

Date: 10/29/2019 1:20:15 PM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000388554	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757163000388554	
SHIP TO		CARRIER NAME: Hub Group	
Name: Macy's Home Store Portland DC Location #: PD Address: 1155 Vaughn Parkway City/State/Zip: Portland, TN 37148 CID#: _____ Dept: 0792		Responsible Acct.No: _____ Trailer number: HGIU511688 Seal number(s): 27709573	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: HUBG	
Name: Macy's c/o Hub Group Address: 2000 Clearwater Drive City/State/Zip: Oak Brook, IL 60523		Pro Number: N/A Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
SPECIAL INSTRUCTIONS: Load #: 50355762 Packing List is Attached		Prepaid: _____ Collect: _____ 3rd Party: X <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
		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
4862449	39	507.13	Y N	
Grand Total	39	507.13		

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
39	ctns			507.13		Comforters, Bedspreads	49017	200
39				507.13		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. <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 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 PORTLAND DC

Ship Date: 10/29/2019

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

BILL TO:
MACYS.COM (DC)
2101 EAST KEMPER ROAD
CINCINNATI, OH 45241
US

SHIP TO:
MACY'S HOME STORE PORTLAND DC
1155 VAUGHN PARKWAY
PORTLAND, TN 37148
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
4862449	N/A	MCC10-1449	086569249395	Sherpa Comforter	EA	2	26	13	26	13
4862449	MCH10332	MCC10-347	675716657123	T Sherpa Comforter	EA	2	26	13	26	13
4862449	MCH10341	MCC10-356	675716657154	T Sherpa Comforter	EA	2	26	13	26	13

Total Weight: 507.13
 Total Quantity Ordered: 78
 Total Cartons Ordered: 39
 Total Quantity Shipped: 78
 Total Cartons Shipped: 39

