


SHIP FROM	Shipment subject to the Amazon.com Terms and Conditions in effect on the date of shipment and available at vendorcentral.amazon.com. Bill of Lading Number: 06757166000460435  (402)06757166000460435
[Name] E & E COMPANY LTD [Street Address] 550 Northport Pkwy [City,ST ZIPCODE] Port Wentworth, GA 31407 [DC Contact] N/A [Phone Number] 510-490-9788 SID#:FOB:	Carrier Name: UPS Trailer number: UPST8397170 ARN: 7781113103 Seal number: 27931767
SHIP TO	Serial number(s): SCAC: UPSS Pro Number:
[Name] Amazon.com.dedc LLC-TEB6 [Street Address] 22 Hightstown Cranbury State Road [City,ST ZIPCODE] Cranbury, NJ 08512 CID No.:	
FREIGHT CHARGE TERMS (FREIGHT CHARGES ARE PREPAID UNLESS MARKED OTHERWISE):	
Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	

CUSTOMER ORDER INFORMATION							
Customer Order No.	ARN (WEPAY)	Unit Qty	# of Packages	Weight	Pallet/Slip (circle one)		Additional Shipper Information
2PEXOJHA	7781113103	1	1	31.52	Y	N	
Grand Total		1	1	31.52			

CARRIER INFORMATION										
# of Pallets		Carton Count								LTL Only
Qty	Type	Qty	Type	WEIGHT	HM (X)	Commodity Description			NMFC No.	Class
1	Pallet			50.00		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				
		1	ctns	31.52		Comforters, Bedspreads			49017	200
1		1		81.52		Grand Total				

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

COD Amount: \$ _____

Fee Terms: Collect Prepaid Customer check acceptable

Note: No Limitation of carrier liability applies to this shipment, unless set forth in the Transportation Agreement between the parties.

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 charges and all other lawful fees. If a motor carrier, freight forwarder, broker or other transportation service provider accepts this shipment from anyone other than the shipper listed hereon, it agrees to seek payment of its charges exclusively from the entity from which it accepted the shipment (e.g. the broker) and expressly waives any other collection rights or remedies otherwise available to it, including any right to seek payment of the transportation charges from the consignor or consignee. 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. AC 11-4-19	<table style="width:100%;"> <tr> <td style="width:30%;"> Trailer Loaded: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces </td> <td style="width:40%;"> Freight Counted: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces </td> <td style="width:30%;"> Carrier Signature/Pickup Date Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. </td> </tr> </table>	Trailer Loaded: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	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 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
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Order No.: 50753873 Order Date: 10/07/2019 Customer: AMAZON.COM.DEDC LLC-TEB6 Customer PO No.: 2PEXOJHA

SHIP FROM: E & E COMPANY LTD 550 NORTHPORT PKWY PORT WENTWORTH, GA 31407	BILL TO: AMAZON FULFILLMENT SERVICES P O BOX 81226 SEATTLE, WA 98108 US	SHIP TO: AMAZON.COM.DEDC LLC-TEB6 22 HIGHTSTOWN CRANBURY STATE ROAD CRANBURY, NJ 08512 US	Shipping Date: 11/05/2019
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
B071S99KP3	MPS10-305	675716945428	K Wellington 9pcs Comforter Se	EA	1	1	1	1	1

Total Weight:	31.52
Total Quantity Ordered:	1
Total Cartons Ordered:	1
Total Quantity Shipped:	1
Total Cartons Shipped:	1