

Chargebacks and RTVs

Macy's, Inc. (MacysNet)

Valid as of: 1/27/2020 9:01:45 AM EST

Division: Macy's Account #: 05390993890

Vendor Name: E & E CO LTD

Document Number: 4954751 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8212639 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$80)

Style Summary

Receipt Number: 4796520-004

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$80)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1		\$80.00		\$0.00			\$0.00				-80

Document Number: 4954941 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8210769 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$160)

Style Summary

Receipt Number: 4796519-014

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$160)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1	\$160.00		\$0.00				\$0.00				-160

Document Number: 4954942 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8210307 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$160)

Style Summary

Receipt Number: 4796519-005

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$160)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1	\$160.00		\$0.00				\$0.00				-160

Document Number: 4954943 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8211297 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$80)

Style Summary

Receipt Number: 4796519-010

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$80)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1		\$80.00		\$0.00			\$0.00				-80

Document Number: 4954944 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8210197 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$160)

Style Summary

Receipt Number: 4796519-009

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$160)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1		\$160.00		\$0.00			\$0.00				-160

Document Number: 4954945 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020
Purchase Order Number: 8256243

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
Total Cost: (\$80)

Style Summary

Receipt Number: 4796519-013
Carrier:
Freight Bill:
Bill of Lading: 1Z871R9403
Cartons: 0
Weight: 0
Total Cost: (\$80)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1		\$80.00		\$0.00			\$0.00				-80

Document Number: 4954946
Department/Vendor: 631/938

Check Summary

Check Number: 1857571
Check Date: 1/15/2020
Purchase Order Number: 8256199

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
Total Cost: (\$80)

Style Summary

Receipt Number: 4796519-007
Carrier:
Freight Bill:
Bill of Lading: 1Z871R9403
Cartons: 0
Weight: 0
Total Cost: (\$80)

Style	Qty	Rec	Qty	Diff	Order	Cost	Cost	Diff	UOM	Ext	Cost	Diff	Ext	Qty	Diff
LT 250		0		-1		\$80.00		\$0.00			\$0.00				-80

Document Number: 4954947

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8282698 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$160)

Style Summary

Receipt Number: 4796520-032

Carrier:

Freight Bill:

Bill of Lading: 1Z871R9403

Cartons: 0

Weight: 0

Total Cost: (\$160)

Style	Qty Rec	Qty Diff	Order Cost	Cost Diff	UOM	Ext Cost	Cost Diff	Ext Qty	Diff
LT 250	0	-1	\$160.00	\$0.00		\$0.00			-160

Document Number: 4954948 ✓

Department/Vendor: 631/938

Check Summary

Check Number: 1857571

Check Date: 1/15/2020

Purchase Order Number: 8282302 ✓

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE

Total Cost: (\$80)

Style Summary

Receipt Number: 4796520-016

Carrier:

Freight Bill:


Bill of Lading: 1Z871R9403

Cartons: 0


Weight: 0

Total Cost: (\$80)

Style	Qty	Rec Qty	Diff	Order Cost	Cost Diff	UOM	Ext Cost	Diff	Ext Qty	Diff
LT 250		0	-1	\$80.00	\$0.00		\$0.00			-80

Document Number: 4954949 
Department/Vendor: 631/938

Check Summary

Check Number: 1857571
Check Date: 1/15/2020
Purchase Order Number: 8212738 

Transaction Summary

Transaction Type: 506 - DM-CARTON SHORTAGE VND RESPONSIBLE
Total Cost: (\$80)

Style Summary

Receipt Number: 4796520-012
Carrier:
Freight Bill:
Bill of Lading: 1Z871R9403
Cartons: 0
Weight: 0
Total Cost: (\$80)

Style	Qty	Rec Qty	Diff	Order Cost	Cost Diff	UOM	Ext Cost	Diff	Ext Qty	Diff
LT 250		0	-1	\$80.00	\$0.00		\$0.00			-80

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: _____

Bill of Lading Number: 0675716800005352

 (402)06757168000053532

SHIP TO
 Name: South Windsor Pool Stock Location #: SW
 Address: 301 Governor's Hwy
 City/State/Zip: South Windsor, CT 06074
 CID#: _____
 Dept: 0631

CARRIER NAME: UPS
 Responsible Acct.No: _____
 Trailer number: 371594
 Seal number(s): _____
 SCAC: UPSN
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____
 SPECIAL INSTRUCTIONS:
 Packing List is Attached

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: _____ Collect: _____ 3rd Party: **X**
 Master Bill of Lading: with attached underlying Bills of Lading

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

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8212639	1	15.07	Y N	
Grand Total	1	15.07		

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
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		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 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.
LC 11/13/19

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.

Customer: SOUTH WINDSOR POOL STOCK

Ship Date: 11/13/2019

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:

SOUTH WINDSOR POOL STOCK
 301 GOVERNORS HWY
 SOUTH WINDSOR, CT 06074
 US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8212639	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight:	15.07
Total Quantity Ordered:	2
Total Cartons Ordered:	1
Total Quantity Shipped:	2
Total Cartons Shipped:	1

SHIP FROM		Bill of Lading Number: 06757168000053464	
Name: E & E COMPANY LTD		 (402)06757168000053464	
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
SID#:			
PHONE:		CARRIER NAME: UPS	
VENDOR:	FOB: <input type="checkbox"/>	Responsible Acct.No:	

SHIP TO		Trailer number: 371594
Name: Macy'sHom	Location #: 0820	Seal number(s):
Address: AltamonteFurnitureGallery		
Address: 820 W Town Pkwy		SCAC: UPSN
City/State/Zip: Altamonte Springs, FL 32714		Pro Number:
CID#:		
Dept: 0631	FOB: <input type="checkbox"/>	

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

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8210769	2	30.14	Y N	
Grand Total	2	30.14		

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
2	Pallet			100.00		Pallet		
		2	ctns	30.14		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
2		2		130.14		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"/>
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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. <i>LC</i> 11/13/19	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 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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Customer: MACYSHOM ALTAMONTEFURNITUREGALLERY

Ship Date: 11/13/2019

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:

MACYSHOM
ALTAMONTEFURNITUREGALLERY
820 W TOWN PKWY
ALTAMONTE SPRINGS, FL 32714
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8210769	4660155	MCH153-0005	086569279217	Table lamp	EA	2	4	2	4	2

Total Weight:	30.14
Total Quantity Ordered:	4
Total Cartons Ordered:	2
Total Quantity Shipped:	4
Total Cartons Shipped:	2

SHIP FROM		Bill of Lading Number: 06757168000053433	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757168000053433	
SHIP TO		CARRIER NAME: UPS Responsible Acct.No: _____ Trailer number: 371594 Seal number(s): _____	
Name: Macy'sHomeSPembrokeFurniture Location #: 0775 Gallery Address: 13640 Pines Blvd City/State/Zip: Pembroke Pines, FL 33027 CID#: _____ Dept: 0631		SCAC: UPSN Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: _____ 3rd Party: X	
Name: _____ Address: _____ City/State/Zip: _____		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading Appointment Time: _____ Actual Driver Arrival Time: _____ Driver Departure Time: _____ AM PM AM PM AM PM	
SPECIAL INSTRUCTIONS: Packing List is Attached			

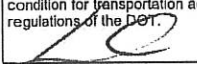
CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8210307	2	30.14	Y N	
Grand Total	2	30.14		

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
2	Pallet			100.00		Pallet		
		2	ctns	30.14		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
2		2		130.14		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"/>
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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 property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.  11/13/19	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 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: MACYSHOMESPEMBROKEFURNITUREGALLERY

Ship Date: 11/13/2019

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:

MACYSHOMESPEMBROKEFURNITUREGALLERY
13640 PINES BLVD
PEMBROKE PINES, FL 33027
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8210307	4660155	MCH153-0005	086569279217	Table lamp	EA	2	4	2	4	2

Total Weight: 30.14
Total Quantity Ordered: 4
Total Cartons Ordered: 2
Total Quantity Shipped: 4
Total Cartons Shipped: 2

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: _____

Bill of Lading Number: 06757168000053419

 (402)06757168000053419

SHIP TO
 Name: Macy's HomeStoreAventura Home Location #: 0769 Store
 Address: 19535 Biscayne Blvd
 City/State/Zip: Aventura, FL 33180
 CID#: _____
 Dept: 0631

CARRIER NAME: UPS
 Responsible Acct.No: _____
 Trailer number: 371594
 Seal number(s): _____

SCAC: UPSN
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: Collect: 3rd Party: **X**

Master Bill of Lading: with attached underlying Bills of Lading

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

SPECIAL INSTRUCTIONS:
 Packing List is Attached

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8211297	1	15.07	Y N	
Grand Total	1	15.07		

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 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		Grand Total		

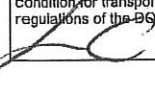
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

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.
 11/23/19

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.

Customer: MACYS HOMESTOREAVENTURA HOME STORE

Ship Date: 11/13/2019

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:

MACYS HOMESTOREAVENTURA HOME
 STORE
 19535 BISCAYNE BLVD
 AVENTURA, FL 33180
 US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8211297	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight:	15.07
Total Quantity Ordered:	2
Total Cartons Ordered:	1
Total Quantity Shipped:	2
Total Cartons Shipped:	1

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: _____

Bill of Lading Number: 06757168000053402

 (402)06757168000053402

SHIP TO
 Name: Macy'sHomeStoreFt Location #: 0768
 LauderdaleGallery
 Address: 4501 North Federal Highway
 City/State/Zip: Fort Lauderdale, FL 33308
 CID#: _____
 Dept: 0631

CARRIER NAME: UPS
 Responsible Acct.No: _____
 Trailer number: 371594
 Seal number(s): _____

SCAC: UPSN
Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: Collect: 3rd Party: X

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

SPECIAL INSTRUCTIONS:
 Packing List is Attached

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8210197	2	30.14	Y N	
Grand Total	2	30.14		

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 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		2	ctns	30.14		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
2		2		130.14		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 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 BOT.
LC 11/23/19

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.

Customer: MACYSHOMESTOREFT LAUDERDALEGALLERY

Ship Date: 11/13/2019

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:

MACYSHOMESTOREFT
LAUDERDALEGALLERY
4501 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE, FL 33308
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8210197	4660155	MCH153-0005	086569279217	Table lamp	EA	2	4	2	4	2

Total Weight:	30.14
Total Quantity Ordered:	4
Total Cartons Ordered:	2
Total Quantity Shipped:	4
Total Cartons Shipped:	2

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: _____

Bill of Lading Number: 06757168000053389

 (402)06757168000053389

CARRIER NAME: UPS
 Responsible Acct.No: _____
 Trailer number: 371594
 Seal number(s): _____

SHIP TO
 Name: Macy's Home Store Wellington Location #: 0762
 Green
 Address: 10316 Forest Hill Blvd
 City/State/Zip: Wellington, FL 33414
 CID#: _____
 Dept: 0631

SCAC: UPSN
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: Collect: 3rd Party: X

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time Actual Driver Arrival Time Driver Departure Time
 AM AM AM
 PM PM PM

SPECIAL INSTRUCTIONS:
 Packing List is Attached

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8256243	1	15.07	Y N	
Grand Total	1	15.07		

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
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		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 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.
LC 11/13/19

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.

Customer: MACYS HOME STORE WELLINGTON GREEN

Ship Date: 11/13/2019

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:

MACYS HOME STORE WELLINGTON
GREEN
10316 FOREST HILL BLVD
WELLINGTON, FL 33414
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8256243	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight:	15.07
Total Quantity Ordered:	2
Total Cartons Ordered:	1
Total Quantity Shipped:	2
Total Cartons Shipped:	1

SHIP FROM		Bill of Lading Number: 06757168000053372	
Name: E & E COMPANY LTD		 (402)06757168000053372	
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407		CARRIER NAME: UPS	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 371594	
VENDOR:		Seal number(s):	
FOB: <input type="checkbox"/>		SCAC: UPSN	
SHIP TO		Pro Number:	
Name: Macy's Home Store The Gardens Location #: 0760		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address: 3107 PGA Blvd			
City/State/Zip: Palm Beach Gardens, FL 33410		Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: X	
CID#:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
Dept: 0631			
FOB: <input type="checkbox"/>		Appointment Time	
THIRD PARTY FREIGHT CHARGES BILL TO:		Actual Driver Arrival Time	
Name:		Driver Departure Time	
Address:		AM	
City/State/Zip:		PM	
SPECIAL INSTRUCTIONS: Packing List is Attached		AM	
		PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8256199	1	15.07	Y N	
Grand Total	1	15.07		

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 366</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		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"/>
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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. <i>LC 11/13/19</i>	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 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: MACYS HOME STORE THE GARDENS

Ship Date: 11/13/2019

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:

MACYS HOME STORE THE GARDENS
3107 PGA BLVD
PALM BEACH GARDENS, FL 33410
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8256199	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight:	15.07
Total Quantity Ordered:	2
Total Cartons Ordered:	1
Total Quantity Shipped:	2
Total Cartons Shipped:	1

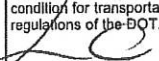
SHIP FROM		Bill of Lading Number: 06757168000053525	
Name: E & E COMPANY LTD		 (402)06757168000053525	
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407		CARRIER NAME: UPS	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 371594	
VENDOR: FOB: <input type="checkbox"/>		Seal number(s):	
SHIP TO		SCAC: UPSN	
Name: Macy's Home Store Secaucus DC Location #: SC		Pro Number:	
Address: 500 Meadowlands Pkwy			
City/State/Zip: Secaucus, NJ 07094			
CID#:			
Dept: 0631 FOB: <input type="checkbox"/>			
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: X	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:			
SPECIAL INSTRUCTIONS: 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
8282698	2	30.14	Y N	
Grand Total	2	30.14		

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
2	Pallet			100.00		Pallet		
		2	ctns	30.14		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
2		2		130.14		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"/>
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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.	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.  11/13/19	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 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.		

Customer: MACYS HOME STORE SECAUCUS DC

Ship Date: 11/13/2019

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:

MACYS HOME STORE SECAUCUS DC
 500 MEADOWLANDS PKWY
 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
8282698	4660155	MCH153-0005	086569279217	Table lamp	EA	2	4	2	4	2

Total Weight: 30.14
Total Quantity Ordered: 4
Total Cartons Ordered: 2
Total Quantity Shipped: 4
Total Cartons Shipped: 2

SHIP FROM		Bill of Lading Number: 06757168000053334
Name: E & E COMPANY LTD	 (402)06757168000053334	
Address: 311 International Trade Pkwy		
City/State/Zip: Port Wentworth, GA 31407		
SID#:		
PHONE:		
VENDOR:	CARRIER NAME: UPS	
FOB: <input type="checkbox"/>	Responsible Acct.No:	

SHIP TO		Trailer number: 371594
Name: Macy's Home Store Cross County Location #: 0173 SC	Seal number(s): SCAC: UPSN Pro Number:	
Address: 800 Central Park Avenue		
City/State/Zip: Yonkers, NY 10704		
CID#:		
Dept: 0631		
FOB: <input type="checkbox"/>	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	

THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: X		
Name:	Master Bill of Lading: with attached underlying Bills of Lading			
Address:				
City/State/Zip:	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	
SPECIAL INSTRUCTIONS: Packing List is Attached	AM	AM	AM	
	PM	PM	PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8282302	1	15.07	Y N	
Grand Total	1	15.07		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		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"/>
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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. <i>LC 11/13/19</i>	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 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: MACYS HOME STORE CROSS COUNTY SC

Ship Date: 11/13/2019

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:

MACYS HOME STORE CROSS COUNTY SC
 800 CENTRAL PARK AVENUE
 YONKERS, NY 10704
 US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8282302	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight:	15.07
Total Quantity Ordered:	2
Total Cartons Ordered:	1
Total Quantity Shipped:	2
Total Cartons Shipped:	1

SHIP FROM		Bill of Lading Number: 06757168000053327	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757168000053327	
SHIP TO		CARRIER NAME: UPS	
Name: Macy's Home Store Northshore Location #: 0034 MA Address: 210 Andover St RTE 114 City/State/Zip: Peabody, MA 01960 CID#: _____ Dept: 0631		Responsible Acct.No: _____ Trailer number: 371594 Seal number(s): _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: UPSN	
Name: _____ Address: _____ City/State/Zip: _____		Pro Number: _____ Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
SPECIAL INSTRUCTIONS: Packing List is Attached		Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

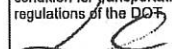
CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
8212738	1	15.07	Y N	
Grand Total	1	15.07		

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
1	Pallet			50.00		Pallet		
		1	ctns	15.07		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
1		1		65.07		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"/>
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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.  11/23/19	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 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: MACYS HOME STORE NORTHSHORE MA

Ship Date: 11/13/2019

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:

MACYS HOME STORE NORTHSHORE MA
 210 ANDOVER ST RTE 114
 PEABODY, MA 01960
 US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
8212738	4660155	MCH153-0005	086569279217	Table lamp	EA	2	2	1	2	1

Total Weight: 15.07
Total Quantity Ordered: 2
Total Cartons Ordered: 1
Total Quantity Shipped: 2
Total Cartons Shipped: 1