




Bed Bath & Beyond Canada L.P
Vendor Chargeback - Freight Claim

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 03/10/2020		
Freight Claim # 151689 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 777-6663430-5 Store Saskatoon Bed Bath & Beyond #2053 110 1709 Preston Avenue North Saskatoon SK S7N 4V2		Pro/Pickup Date 12/26/2019 Delivery Date 01/09/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 4977973 FC C/B Inv Dte 12/05/2019		PO/Reference# CC8K2PE		Internal Cl# 16927
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569266613	IVY CMF FQ PINK	D	1	\$40.00
Total Extended Cost				\$40.00
Freight Charge				\$2.80
Total Chargeback Amount				\$42.80

3475

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683


SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
SCAC: CTII
Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ Act: 
 AM _____ 777-6663430-5 B/L
 PM _____

CUSTOMER ORDER INFORMATION Subject to NACVO 100; CT 100/CT 101 Rules Tariffs; 49 USC 14706 and 49 CFR 370 Drivers signature only acknowledges receipt of freight

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
CC8C9ZE	4	12.36	Y	N	
CC8H6ZT	3	20.43	Y	N	
CC8H8PX	1	23.58	Y	N	
CC8H8SM	2	13.62	Y	N	
CC8K2PE	1	20.06	Y	N	
CC8K2PS	5	35.43	Y	N	
ER6S6YG	3	9.27	Y	N	
ER7P7BZ	4	12.36	Y	N	
ER7U2XM	1	3.09	Y	N	
ER7X8AM	2	6.18	Y	N	
ER7Y4VH	3	9.27	Y	N	
ER8D4ZT	1	3.09	Y	N	
ER8E3FD	1	3.09	Y	N	

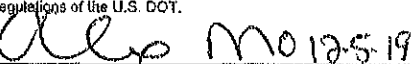
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount: _____
Fee Terms: Collect: Prepaid:
 Customer check acceptable:

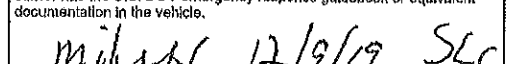
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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
 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 U.S. DOT.

 12/5/19

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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

 12/9/19 SLC


1700432

Date: 12/5/2019 9:09:12 AM

Bill Of Lading

Page 2 of 11

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683


SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDPS725657 Dept: _____ FOB:

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDPS725657

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ AM _____ PM

777-6663430-5 BL Pg 2

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
ER8E3QL	1	3.09	Y	N	
ER8F9KP	2	6.18	Y	N	
ER8H4MU	1	3.09	Y	N	
ER8H7XE	2	6.18	Y	N	
ER8H8QZ	1	3.09	Y	N	
ER8J6LQ	1	3.09	Y	N	
ER8K4AU	3	9.27	Y	N	
ER8P7VQ	3	9.27	Y	N	
ER8Q6SG	2	6.18	Y	N	
ER8S6NN	3	9.27	Y	N	
ER8T8FR	2	6.18	Y	N	
ER8T8WF	3	9.27	Y	N	
ER8W4CD	2	6.18	Y	N	

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
 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 U.S. DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

SHIPPER SIGNATURE
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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Date: 12/5/2019 9:09:12 AM

Bill Of Lading

Page 3 of 11

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683



SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 Dept: _____ FOB:

CARRIER NAME: Central Transport

Responsible Acct.No:

Trailer number: 1700432

Seal number(s):

SCAC: CTII

Pro Number: 77786634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: 3rd Party:

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

SPECIAL INSTRUCTIONS:

BB & B Vendor # : 028372
 MVDP5725657

Appointment Time

AI



ure Time

AM

PI

777-6663430-5

BL Pg 3

PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
ER8Y2GP	1	3.09	Y N	
ER8Y6TW	4	12.36	Y N	
ER8Z7WA	1	3.09	Y N	
ER9A8VB	2	6.18	Y N	
ER9C9BC	1	3.09	Y N	
ER9D9YB	1	3.09	Y N	
ER9H4VF	3	9.27	Y N	
ES5L5DW	7	47.67	Y N	
ES6K6ED	2	13.62	Y N	
ES6L6NT	2	13.62	Y N	
ES6L7EL	4	27.24	Y N	
ES6N3JA	4	12.32	Y N	
ES6N4BL	1	6.81	Y N	

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 U.S. 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM:
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO:
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

Master Bill of Lading: with attached
 (check box) 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
ES6N5CT	4	34.14	Y	N	
ES6Q4PZ	1	6.81	Y	N	
ES6Q5YN	3	11.45	Y	N	
ES6Q7UR	2	5.29	Y	N	
ES6Q7VA	5	34.05	Y	N	
C3GR0DF	3	9.97	Y	N	
ES6R8DQ	4	27.24	Y	N	
ES6S7DT	6	40.86	Y	N	
ES6S7DZ	3	11.44	Y	N	
ES6S8XE	5	14.59	Y	N	
ES6V6CZ	2	40.78	Y	N	
ES6V6GS	4	32.76	Y	N	
ES6V6HZ	1	6.81	Y	N	

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 / 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 U.S. DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

SHIPPER SIGNATURE
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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Traller number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

Master Bill of Lading: with attached
 (check box) 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
ES6W3SG	3	43.41	Y N	
ES6W3UJ	5	35.37	Y N	
ES6X3EZ	2	43.20	Y N	
ES6X3JU	1	6.81	Y N	
ES6X6YR	1	6.81	Y N	
ES6X6ZE	6	71.60	Y N	
ES6X9RN	5	34.05	Y N	
ES6X9TN	7	48.33	Y N	
ES6Y8NF	5	106.02	Y N	
ES6Y8VL	12	83.04	Y N	
ES6Y8VT	1	4.40	Y N	
ES6Z7DH	4	15.84	Y N	
ES6Z8QD	1	7.47	Y N	

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 property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

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
ES6Z8QY	1	3.96	Y	N	
ES7A2AS	1	19.84	Y	N	
ES7A3MT	1	8.37	Y	N	
ES7A3RY	5	34.05	Y	N	
ES7B5RG	6	39.31	Y	N	
ES7B5SY	8	54.48	Y	N	
ES7B9EZ	2	9.24	Y	N	
ES7B9FX	1	6.81	Y	N	
ES7C2AH	2	39.68	Y	N	
ES7C2QJ	3	20.43	Y	N	
ES7C2RR	4	20.28	Y	N	
ES7C3GX	1	3.63	Y	N	
ES7C3JJ	3	20.43	Y	N	

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 U.S. DOT.

Trailer Loaded: Freight Counted:
 By Shipper By Shipper
 By Driver By Driver/pallets said to contain
 By Driver 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

Master Bill of Lading: with attached
 (check box) 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
ES7C5WP	5	34.71	Y	N	
ES7D2PR	13	86.45	Y	N	
ES7D2PS	6	40.86	Y	N	
ES7D9GH	4	36.01	Y	N	
ES7D9KY	17	117.09	Y	N	
ES7E3CB	1	3.85	Y	N	
ES7F5TH	4	27.24	Y	N	
ES7F6GD	2	7.92	Y	N	
ES7F8ZP	1	3.96	Y	N	
ES7F9DP	12	84.42	Y	N	
ES7G3KX	7	47.67	Y	N	
ES7G3XA	2	2.28	Y	N	
ES7G4BB	6	41.58	Y	N	

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 / 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 U.S. DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces


SHIPPER SIGNATURE
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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Date: 12/5/2019 9:09:12 AM

Bill Of Lading

Page 8 of 11

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

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
ES7G4BF	2	43.42	Y N	
ES7G8YW	2	3.96	Y N	
ES7G9DD	7	48.39	Y N	
ES7H3NG	2	13.62	Y N	
ES7H3SQ	2	24.91	Y N	
ES7H4PR	4	37.04	Y N	
ES7H9YY	7	47.67	Y N	
ES7K3AP	7	48.33	Y N	
ES7K3FT	3	20.43	Y N	
ES7K3GA	6	19.58	Y N	
ES7N9CQ	2	13.62	Y N	
ES7T5WA	4	79.36	Y N	
ES7T5WT	3	20.43	Y N	

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 property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM:
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO:
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

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
ES7U5SE	2	44.52	Y	N	
ES7U5TA	5	34.05	Y	N	
ES7U7WP	5	34.05	Y	N	
ES7V5QN	7	47.67	Y	N	
ES7V5WB	4	27.24	Y	N	
ES7V6YV	1	5.51	Y	N	
ES7V7AA	3	20.43	Y	N	
ES7X4JG	7	59.04	Y	N	
ES7X4KV	4	27.24	Y	N	
ES7Z3VS	1	6.81	Y	N	
ES7Z8UN	1	1.14	Y	N	
ES7Z8VH	5	40.41	Y	N	
ES7Z8VY	1	7.53	Y	N	

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 / 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 U.S. DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets sold to contain By Driver/Pieces

SHIPPER SIGNATURE
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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 08757163000400683

 (402)06757163000400683

SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Traller number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

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
ES8B7QN	5	34.05	Y N	
ES8C3UQ	2	39.68	Y N	
ES8C3XC	8	54.48	Y N	
ES8D7QD	3	33.60	Y N	
ES8D7RL	3	20.43	Y N	
ES8F2PS	1	23.58	Y N	
ES8F2QS	3	20.43	Y N	
ES8F5MN	15	102.15	Y N	
ES8F5MV	13	110.26	Y N	
Grand Total	454	3225.77		

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 property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM:
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683

SHIP TO:
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
SCAC: CTII
Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5725657

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

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

CARRIER INFORMATION										
HANDLING UNIT		PACKAGE		WEIGHT	CUBE	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		
5	Pallet			260.00		Pallet	150390.4	70		
		47	ctns	972.48		Comforters, Bedspreads	49017	200		
		398	ctns	2215.52		Pillows, Valance, Towels	49390	100		
		7	ctns	33.37		Rugs	70970-5	125		
		2	ctns	4.40		Shower curtain	49385	77.5		
5		454		3475.77		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 U.S. 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

454
CTI

Trk 1700432


3475

Date: 12/5/2019 9:09:12 AM

Bill Of Lading

Page 1 of 11

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000400683

 (402)06757163000400683


SHIP TO
 Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
 Address: DEMAR LOGISTICS
 376 LIES RD, CHI-VDP
 City/State/Zip: CAROL STREAM, IL 60188
 CID#: MVDP5725657 FOB:

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: 1700432
 Seal number(s):
 SCAC: CTII
 Pro Number: 77766634305

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Berman Blake Associates
 PO Box 9202
 City/State/Zip: Old Bethpage, NY 11804-9002

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor #: 028372
 MVDP5725657

Appointment Time: _____ Act: _____
 AM _____ PM _____

 777-6663430-5 B/L

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
CC8C9ZE	4	12.36	Y N
CC8H6ZT	3	20.43	Y N
CC8H6PX	1	23.58	Y N
CC8H8SM	2	13.62	Y N
CC8K2PE	1	20.06	Y N
CC8K2PS	5	35.43	Y N
ER6S6YG	3	9.27	Y N
ER7P7BZ	4		
ER7U2XM	1		
ER7X8AM	2		
ER7Y4VH	3		
ER8D4ZT	1		
ER8E3FD	1		

ADDITIONAL SHIPPER INFO

P&C# 2625 RECEIPT DATE 12-26-19
 BBB MGR : EA
 PLTS SHIPPED 5 PLTS RECEIVED 5
 CTNS SHIPPED 454 CTNS RECEIVED 448
 EXCEPTIONS YES NO
 #CTNS SHORT 6 #CTNS OVER 0 #CTNS DMG 9
 OS&D# 1926251819
 OS&D DATE 12-27-19 OS&D TIME 7:02 PM
 OS&D CONTACT: WEBSITE

Where the rate is dependent on value, shippers are required to state and declared value of the property as follows:

The agreed or declared value of the property is specifically stated by the _____ per _____

NOTE Liability Limitation for loss or damage in this shipment may be applicable (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 U.S. DOT.
 [Signature] 12/5/19

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

SHIPPER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
 [Signature] 12/9/19 SLC

1700432



Pro Number
777-6663430-5

Ship Date
2019-12-09

Reference Number
MVDP5725657

Org DC
958 605

Freight Terms
Freight Charges Are Collect

P.O. Number
CC8C9ZE

SCAC:

Consignee:

BED BATH -BEYOND 2625 %
DEMAR LOGISTICS
376 LIES RD
CAROL STREAM, IL 60188

Shipper:

E-E CO LTD
221 HANSON WAY
WOODLAND, CA 95776

Special Instructions

Date: 12/5/2019 8:09:12 AM **Bill Of Lading** Page 11 of 11

SHIP FROM
Name: E & E COMPANY LTD - 028372
Address: 221 Hanson Way
City/State/Zip: Woodland, CA 95776
SID#: _____ FOB:

SHIP TO
Name: Bed Bath & Beyond #2625 Location #: CHI-VDP
Address: DEMAR LOGISTICS
376 LIES RD, CHI-VDP
City/State/Zip: CAROL STREAM, IL 60188
CID#: MVDP5725657 FOB:

THIRD PARTY FREIGHT CHARGES BILL TO:
Name: Bed Bath & Beyond etc
Address: Benmar Blake Associates
PO Box 9202
City/State/Zip: Old Bethpage, NY 11804-8002

SPECIAL INSTRUCTIONS:
BB & B Vendor #: 028372
MVDP5725657

Bill of Lading Number: 00757163000400683
Barcode: (402)06757163000400683

CARRIER NAME: Central Transport
Responsible Acct No: _____
Trailer number: 700432
Seal number(s): _____
SCAC: CTII
Pro Number: 77766634305

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

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

HANDLING UNIT	PACKAGE	WEIGHT	CUBE	COMMODITY DESCRIPTION	PACKAGE
QTY	TYPE	QTY	TYPE		NMFC # CLASS
5	Pallet			Pallet	150390,4 70
		47	ctns	Comforters, Bedspreads	48017 200
		398	ctns	Pillows,Valance,Towels	49380 100
		7	ctns	Rugs	70970-5 125
		2	ctns	Shower curtain	49386 77.5
5		454		Grand Total	

Please see this in detail on the back of this bill. All items are required to stated specifically in writing the agreed or declared value of the property as follows:
This agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____

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 individual delivery and rates of contracts that have been agreed upon in writing between the carrier and shipper. If applicable, other rates, conditions and terms that have been established by the carrier and are available to the shipper, on request, and in all applicable state and federal regulations.

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

SHIPPER SIGNATURE / DATE
This is to certify that the above named commodity has properly passed all applicable laws and regulations, and is in proper condition for transportation, excepting in the applicable regulations of the U.S. DOT.

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets sealed to contain
 By Driver/Pallets

CARRIER SIGNATURE / PICKUP DATE
Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available under contract to the U.S. DOT emergency response and detection and control documentation if the vehicle.

Shipper Signature

Pro Number **777-6663430-5**

Additional Delivery Services Requested

- Inside Delivery Sort - Segregate Driver Delay
 Residential Delivery Liftgate Redelivery

By signing below, Consignee acknowledges that additional delivery service was performed and agrees to pay any and all additional delivery service fees at the rate(s) listed above.

Customer Signature _____ Date _____

Firm BED BATH -BEYOND 2625 % DEMAR LOGISTICS

By CUST W/OUT SIGN
Shipment received in good order

HUs Received 5

Driver CT-605252 (1801228) Date 12/26/2019

Arrive Time 9:53 AM Depart Time 9:53 AM

Date	# And Type of Contalner	# And Type of PCS	Exception Type
12/26/2019			
Log #			
Total			
Exceptions			

Central Transport Delivery Receipt