



Beyond
Vendor Chargeback - Freight Claim


-Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 03/25/2020		
Freight Claim # 9398597 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 77766635104 Store Lake Pleasant Pavillions Bed Bath & Beyond #1141 24760 N Lake Pleasant Parkway Peoria AZ 85383		Pro/Pickup Date 01/10/2020 Delivery Date 01/22/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5015156 FC C/B Inv Dte 01/13/2020	PO/Reference# EV3R3JW	Internal Cl# 1069695		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569192608	PET FRIENDS RUG	D	1	\$12.15
Total Extended Cost				\$12.15
Freight Charge				\$0.85
Total Chargeback Amount				\$13.00

01/10/2020
ATR
09341

1815

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

Bill of Lading Number: 06757163000409341

 (402)06757163000409341


SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5771218 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1700425
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6663510-4

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
 MVDP5771218

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

 777-6663510-4 B/L

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EU7J6UY	1	24.25	Y N	
EU8V2ZV	4	17.60	Y N	
EU8V3GZ	4	30.12	Y N	
EV2M9UG	2	15.10	Y N	
EV2M9XB	3	13.11	Y N	
EV2N4NU	11	165.45	Y N	
EV2N6MX	6	44.86	Y N	
EV2N6PS	2	10.58	Y N	
EV2P7EH	4	14.76	Y N	
EV2P7GF	7	18.45	Y N	
EV2P7GT	1	8.11	Y N	
EV2S7ZV	1	2.09	Y N	
EV2S8BQ	8	44.52	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.
Alamo 1-10-20

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.
ew 1/13/20
TL#1700425
SIC 4

Date: 1/10/2020 2:28:15 PM

Bill Of Lading

Page 2 of 6

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

Bill of Lading Number: 06757163000409341

 (402)06757163000409341

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5771218 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1700425
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6663510-4

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
 MVDP5771218

Master Bill of Lading: with attached
 (check box) underlying Bills of Lading
 Appointment Time _____ re Time _____
 AI _____ AM _____

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EV2T3TZ	8	18.53	Y N	
EV2T3VX	1	5.51	Y N	
EV2W8AQ	4	7.79	Y N	
EV3C2AJ	2	7.20	Y N	
EV3C2CU	1	5.07	Y N	
EV3E3MW	1	5.42	Y N	
EV3E3PT	2	7.60	Y N	
EV3J2HU	11	44.84	Y N	
EV3J2MK	1	5.51	Y N	
EV3J8CG	6	24.46	Y N	
EV3J8EH	2	11.02	Y N	
EV3J9UN	3	15.65	Y N	
EV3L8VK	4	39.72	Y N	

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

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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: 06757163000409341

 (402)06757163000409341

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5771218 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1700425
 Seal number(s): _____
 SCAC: CTII
 Pro Number: 777-6683510-4

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
 MVDP5771218

(check box) Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ AM  Time _____ AM
777-6663510-4 BL Pg 3

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EV3N4KM	1	11.02	Y N	
EV3N4LF	22	109.85	Y N	
EV3R3JW	12	104.58	Y N	
EV3R3KG	1	2.09	Y N	
EV3R6TJ	2	7.76	Y N	
EV3R7YN	1	5.07	Y N	
EV3R8CB	11	167.50	Y N	
EV3U7FQ	5	22.30	Y N	
EV3U7FR	10	59.40	Y N	
EV3V9TX	1	5.51	Y N	
EV3W2JS	6	73.57	Y N	
EV3X3NZ	7	44.83	Y N	
EV3X9FD	3	13.45	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).


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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.

SHIP FROM		Bill of Lading Number: 06757163000409341
Name: E & E COMPANY LTD - 028372		 (402)06757163000409341
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#: _____ FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: Central Transport
Name: Bed Bath & Beyond #2642	Location #: PHO-VDP	Responsible Acct.No:
Address: Phoenix -Legacy SCS 1511 S. 47th Ave Suite 300, PHO-VDP		Trailer number: TL1700425
City/State/Zip: Phoenix, AZ 85043		Seal number(s):
CID#: MVDP5771218	FOB: <input type="checkbox"/>	SCAC: CTII
Dept: _____		Pro Number: 777-6663510-4

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name: Bed Bath & Beyond o/o		
Address: Berman Blake Associates PO Box 9202		
City/State/Zip: Old Bethpage, NY 11804-9002		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>

SPECIAL INSTRUCTIONS: BB & B Vendor #: 028372 MVDP5771218	<input type="checkbox"/> (check box)	Master Bill of Lading: with attached underlying Bills of Lading
	Appointment Time AM	Actual Driver Arrival Time AM
		Driver Departure Time AM

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV3X9XG	1	8.11	Y	N	
EV3X9YC	7	41.26	Y	N	
EV3Y2CJ	1	5.07	Y	N	
EV3Y6WR	4	30.95	Y	N	
EV3Y7ST	2	7.47	Y	N	
EV4B4UE	1	20.94	Y	N	
EV4B6FY	3	26.44	Y	N	
EV4C3UQ	2	6.82	Y	N	
EV4C7SU	1	8.11	Y	N	
EV4C7UA	9	54.48	Y	N	
EV4D4VF	5	107.34	Y	N	
EV4D8BU	3	12.67	Y	N	
EV4D8FL	4	47.05	Y	N	


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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 U.S. DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	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.
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SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000409341

 (402)06757163000409341

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5771218 Dept: _____ FOB:

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1700425
 Seal number(s):
SCAC: CTII
 Pro Number: 777-6663510-4

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
 MVDP5771218

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

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EV4F3YN	2	4.60	Y N	
Grand Total	227	1615.54		

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(p) of NMFC item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet	150390.4	70
		72	ctns	318.19		Bath Accessories	49470	100
		32	ctns	87.65		Bath Towel, Beach Towel	49390	175
		38	ctns	803.88		Comforters, Bedspreads	49017	200
		4	ctns	35.35		Framed Goods	76580 Sub 5	125
		12	ctns	65.32		Panels, Valances	49390	175
		1	ctns	1.98		Pillows, Cushions	149269	250
		27	ctns	127.21		Rugs	70970-5	125

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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).


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

SHIPPER SIGNATURE
 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		Bill of Lading Number: 06757163000409341
Name: E & E COMPANY LTD - 028372		 (402)06757163000409341
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#: _____ FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: Central Transport
Name: Bed Bath & Beyond #2642	Location #: PHO-VDP	Responsible Acct.No:
Address: Phoenix -Legacy SCS 1511 S. 47th Ave Suite 300, PHO-VDP		Trailer number: TL1700425
City/State/Zip: Phoenix, AZ 85043		Seal number(s):
CID#: MVDP5771218	FOB: <input type="checkbox"/>	SCAC: CTH
Dept: _____		Pro Number: 777-8663510-4

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name: Bed Bath & Beyond c/o		
Address: Berman Blake Associates PO Box 9202		
City/State/Zip: Old Bethpage, NY 11804-9002		Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____

SPECIAL INSTRUCTIONS: BB & B Vendor # : 028372 MVDP5771218	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)					
	<table border="1"> <tr> <td>Appointment Time</td> <td>Actual Driver Arrival Time</td> <td>Driver Departure Time</td> </tr> <tr> <td>AM</td> <td>AM</td> <td>AM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time				
AM	AM	AM				

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(4) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		41	ctns	175.96		Shower curtain	49385	77.5
4		227		1815.54		Grand Total		

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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 U.S. DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	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.
	Shipper Signature _____		

1900834

1815

Date: 1/10/2020 2:28:15 PM **Bill of Lading** Page 1 of 6

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____ FOB:

Bill of Lading Number: 06757163000409341

 (402)06757163000409341


SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix-Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5771218 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1700425
 Seal number(s): _____
 SCAC: CTII
 Pro Number: 777-6663510-4

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
 MVDP5771218

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

 777-6663510-4 B/L

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
EU7J6UY	1	24.25	Y N
EU8V2ZV	4	17.60	Y N
EU8V3GZ	4	30.12	Y N
EV2M9UG	2	15.10	Y N
EV2M9XB	3	13.11	P&C# N
EV2N4NU	11	165.45	BBB MGR
EV2N6MX	6	44.86	PLTS SHIPPED 4 PLTS RECEIVED 4
EV2N6PS	2	10.58	CTNS SHIPPED 27 CTNS RECEIVED 27
EV2P7EH	4	14.76	EXCEPTIONS YES
EV2P7GF	7	18.45	#CTNS SHORT 0 #CTNS OVER 0 #CTNS DMG 4
EV2P7GT	1	8.11	OS&D # N 202620020
EV2S7ZV	1	2.09	OS&D DATE 12/20/19 OS&D TIME 3 31
EV2S8BQ	8	44.52	OS&D CONTACT [Signature]

Subject to NHTSA 100, CT 1030T (1) Rules Title: 49 USC 14706 and 49 CFR 370
 Debark signature only acknowledges receipt of freight

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).

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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] 1-10-20

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.
 [Signature] 1/13/20
 TL# 1700425
 (SLC 4)

Run Date: 01/20/20
 App Date: 01/20/20

Official Fast Freight - Phoenix
 Final Over, Short & Damaged Reconciliation Report

Page: 1
 Time: 3:54 PM MST

Trailer: BBB TL1700425 Close Date: 01/10/20 Arrival Date: 01/20/20 Origin: ASN Seal #: TL1700425 Seal Cond: Intact
 Carrier: CTII Carrier Pro: 77766635104 Arv Seal #: 012020

=====

Vendor: 069089 E & E CO., L Carrier: Carrier Pro: 77766635104 MBOL #: 06757163000409341
 221 Hanson Way
 Woodland, CA 95776

Scanned Trailer totals to Vendor BOL:										
Damaged:	Over:	Short:	Out-Area:	Match:	Bad-rec:	BOL:	Scanned:	CTNs on Pallets:	Total Pallets:	Loose Cartons:
4	0	0	0	0	0	227	227	227	33	0
Scanned Trailer totals to Vendor ASN:										
	Over:	Short:		Match:		ASN:				
	0	0		227		227				

Cartons On Vendor/Building ASN not scanned into building (SHORTS)

Store PO #	Carton Number	Store PO #	Carton Number	Store PO #	Carton Number
------------	---------------	------------	---------------	------------	---------------

*** All cartons on the Vendor/Building ASN were scanned into the building ***

Cartons Not on Vendor/Building ASN but scanned into building (OVERS)

Store PO #	Carton Number	ASN BOL #	Store PO #	Carton Number	ASN BOL #
------------	---------------	-----------	------------	---------------	-----------

*** Only cartons on the Vendor/Building ASN were scanned into the building ***



Pro Number
777-6663510-4

Ship Date
2020-01-13

Reference Number
MVDP5771218

Org DC
958 861

Freight Terms
**Freight Charges
Are Collect**

P.O. Number
EU7J6UY

SCAC:

Consignee:

BBB 2642%PHOENIX LEGACY SCS
1511 S 47TH AVE STE 300
PHOENIX, AZ 85043

Shipper:

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

Special Instructions

Date: 1/10/2020 2:28:15 PM		Bill Of Lading	Page 6 of 6
SHIP FROM		Bill of Lading Number: 0675716300409341	
Name: E & E COMPANY LTD - 028372		 (402)0675716300409341	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#: _____ FOB: <input type="checkbox"/>		SHIP TO	
Name: Bed Bath & Beyond #2842		Location #: PHO-VDP	
Address: Phoenix-Legacy SCS		1511 S. 47th Ave Suite 300, PHO-VDP	
City/State/Zip: Phoenix, AZ 85043		CID#: MVDP5771218	
Dept: _____		FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		CARRIER NAME: Central Transport	
Name: Bed Bath & Beyond c/o		Responsible Acct.No:	
Address: Herman Blake Associates		Trafor number: TL1700425	
PO Box 9202		Seal number(s):	
City/State/Zip: Old Bethpage, NY 11864-9002		SCAC: CTI	
SPECIAL INSTRUCTIONS: BB & B Vendor #: 028372 MVDP5771218		Pro Number: 777-6663510-4	
Prepaid: _____		Collect: X	
3rd Party: _____		Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Appointment Time: _____ AM		Actual Driver Arrival Time: _____ AM	
Driver Departure Time: _____ AM		Driver Departure Time: _____ AM	
CARRIER INFORMATION			
HANDLING UNIT	PACKAGE	WEIGHT	COMMODITY DESCRIPTION
QTY	TYPE	QTY	TYPE
		41	ctns
		175.96	
		227	
		1815.64	
			Shower curtains
			46385
			77.5
			Grand Total

<p>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:</p> <p>*The agreed or declared value of the property is specifically stated by the shipper below and exceeding _____</p>	<p>COD Amount:</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
<p>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).</p>	
<p>RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.</p>	<p>The carrier shall make delivery of this shipment without payment of freight and all other local charges.</p>
<p>SHIPPER SIGNATURE / DATE This is to certify that the above mentioned contents are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.</p>	<p>Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Places <input type="checkbox"/> By Driver/Places</p>
<p>SHIPPER SIGNATURE</p>	
<p>CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and proper placards. Carrier confirms emergency response information was made available under carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</p>	

Pro Number **777-6663510-4**

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 _____

Date	1/16/2020	# And Type of Container	# And Type of PCS	Exception Type
Log #	_____			
Total Exceptions	_____			

Firm BBB 2642%PHOENIX LEGACY SCS

By

Shipment received in good order

HUs Received 4

Driver CT-861328 (1900834) Date 1/16/2020

Arrive Time 8:15 AM Depart Time 8:18 AM

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051(2)(i).

Central Transport Delivery Receipt



Beyond
Vendor Chargeback - Freight Claim

- Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 04/13/2020		
Freight Claim # 9406018 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 06757163000409334 Store Mt Laurel Bed Bath & Beyond #788 8 Centerton Road Mt Laurel NJ 08054		Pro/Pickup Date 01/10/2020 Delivery Date 01/27/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5015161 FC C/B Inv Dte 01/13/2020	PO/Reference# EV3V3KD	Internal Cl# 1071523		
UPC/VIN 0086569268198	Description IVY PLL 14" X 14" PINK	S/D D	Qty 1	Unit Cost \$6.75
Total Extended Cost				\$6.75
Freight Charge				\$0.47
Total Chargeback Amount				\$7.22

*02/10/2020
CTR
09334*



Beyond
Vendor Chargeback - Freight Claim

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 03/25/2020		
Freight Claim # 9402765 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 06757163000409334 Store Marlton Bed Bath & Beyond #348 740 Route 73 South Marlton NJ 08053		Pro/Pickup Date 01/10/2020 Delivery Date 01/24/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5015497 FC C/B Inv Dte 01/13/2020	PO/Reference# EV2W5RM		Internal Cl# 1069696	
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569255891	HH PALMETTO BAY WHT 18X18 PLL	D	1	\$20.00
Total Extended Cost				\$20.00
Freight Charge				\$1.40
Total Chargeback Amount				\$21.40

01/10/2020
CTR
09334

579

Date: 1/10/2020 2:12:50 PM

Bill Of Lading

Page 1 of 3

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

Bill of Lading Number: 06757163000409334



SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5771212 FOB:
 Dept: _____

CARRIER NAME: Central Transport

Responsible Acct.No: _____

Trailer number: TL1700425

Seal number(s): _____

SCAC: CTII

Pro Number: 777-6499608-6

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
 (check box) underlying Bills of Lading

Appointment Time _____ AM



Time _____ AM

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5771212

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EU8Q5ZE	4	12.51	Y	N
EU8S5TV	2	4.44	Y	N
EU8S5XG	1	5.07	Y	N
EU8V2ZV	4	17.60	Y	N
EU8V3GZ	2	15.06	Y	N
EU8W2AH	1	1.98	Y	N
EV2N4CS	1	15.65	Y	N
EV2Q9TV	2	37.25	Y	N
EV2S4DW	9	83.72	Y	N
EV2U7JC	2	44.96	Y	N
EV2U7LV	1	4.89	Y	N
EV2W5RM	4	47.59	Y	N
EV2W6WG	1	13.49	Y	N

Subject to NMFC 106; CT 100/OT 101 Rules Tariffs; 49 USC 14706 and 49 CFR 370
 Driver's signature only acknowledges receipt of freight

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.
John Mo 1-10-20

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets 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.
John H 1/13/20
 (SLC 2) TL# 1700425

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

Bill of Lading Number: 06757163000409334

 (402)06757163000409334


SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5771212 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1700425
 Seal number(s): _____
 SCAC: CTII
 Pro Number: 777-6499608-6

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
 MVDP5771212

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ Actual Departure Time _____ Actual Arrival Time _____ Signature Time _____
 A  AM

CUSTOMER ORDER INFORMATION  **777-6499608-6** BL Pg 2

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV2X3XD	1	20.94	Y	N	
EV3A8ZQ	1	11.02	Y	N	
EV3E9NH	8	67.98	Y	N	
EV3H9ZA	3	33.03	Y	N	
EV3M6MW	1	1.14	Y	N	
EV3V3KD	2	17.94	Y	N	
EV3V4RH	2	3.53	Y	N	
EV3Z2FM	2	20.16	Y	N	
Grand Total	54	479.95			

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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet	150390.4	70

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

Date: 1/10/2020 2:12:50 PM **Bill Of Lading** Page 3 of 3

SHIP FROM		Bill of Lading Number: 06757163000409334
Name: E & E COMPANY LTD - 028372	Address: 221 Hanson Way	 (402)06757163000409334
City/State/Zip: Woodland, CA 95776	SID#: _____ FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Central Transport
Name: Bed Bath & Beyond #2666	Location #: PHL-VDP	Responsible Acct.No:
Address: c/o International Distribution Group	1808 River Rd., PHL-VDP	Trailer number: TL1700425
City/State/Zip: Burlington, NJ 08016	CID#: MVDP6771212	Seal number(s):
Dept: _____	FOB: <input type="checkbox"/>	SCAC: CTII
THIRD PARTY FREIGHT CHARGES BILL TO:		Pro Number: 777-6499608-6
Name: Bed Bath & Beyond c/o	Address: Berman Blake Associates	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
City/State/Zip: Old Bethpage, NY 11804-9002	PO Box 9202	
SPECIAL INSTRUCTIONS: BB & B Vendor #: 028372 MVDP6771212		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: _____
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading
		Appointment Time _____ AM  777-6499608-6 BL Pg 9 _____ AM

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 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		5	ctns	16.34		Bath Accessories	49470	100
		2	ctns	6.66		Bath Towel, Beach Towel	49390	175
		16	ctns	307.68		Comforters, Bedspreads	49017	200
		3	ctns	29.40		Framed Goods	76580 Sub 5	125
		11	ctns	50.26		Panels, Valances	49390	175
		12	ctns	39.74		Pillows, Cushions	149269	250
		1	ctns	5.07		Rugs	70970-5	125
		4	ctns	24.90		Sheet Set & Pillowcase	49390	175
2		54		579.95		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 / 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: <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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
	Shipper Signature _____		

Delivery Stop Manifest
1/21/2020

Trailer: 53-8908
Podle: BBB 2666 (088T06)

Bills: 11
HUs: 36

0738 0594
SEAL # 540272

Stop	Appt	Consignee	Address	Bills	HUs	
99		BED BATH - BEYOND 2666	1808 RIVER RD BURLINGTON, NJ 08016	11	36	BOL Required
		PRO	HUs			
		777-6499608-6	2			
		148-8249407-4	2			
		148-5535919-7	1			
		148-7468643-6	2			
		148-7079254-7	3			
		148-8208956-9	5			
		145-6843979-9	4			
		145-9921536-6	10			
		777-5707116-2	4			
		148-8761619-2	1			
		148-8763170-4	1			

1/21/20
Victor 9:30 AM

Date: 1/16/2020 2:12:50 PM

Bill Of Lading

Page 2 of 3

SHIP FROM
 Name: E & E OOM/PANY LTD - 028372
 Address: 221 Hainson Way
 City/State/Zip: Woodland, CA 95778
 SID#:

Bill of Lading Number: 06757163000409334
 (402)36757163000409334

SHIP TO
 Name: Bed Bath & Beyond #2588
 Address: c/o International Distribution Group
 1809 River Rd., PH-LVDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5771212
 Dept:

CARRIER NAME: Central Transport
 Responsibility Acct No:
 Trailer number: TL1709425
 Seal number(s):
 SCAC: CTI
 Pro Number: 777-6496808-6

THIRD PARTY FREIGHT CHARGES BILL TO
 Name: Bed Bath & Beyond c/o
 Address: Barman Blake Associates
 PO Box 9202

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

SPECIAL INSTRUCTIONS:
 BS & B Vendor #: 028372
 MVDP5771212

777-6496808-6 BL Pg 2
 ADDITIONAL SHIPPER INFO

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALETS/SLIP	CLASS
EVJ3XD	1	20.94	Y	N
EV3A8ZQ	1	1.02	Y	N
EV3E9NH	8	67.98	Y	N
EV3H9ZA	3	33.03	Y	N
EV3MSMW	1		Y	N
EV3V3KD				
EV3V4RH				
EV3Z2FM				
Grand Total				

RECEIVED Subject to individual carrier rates or contracts that have been agreed upon in writing between the carrier and shipper, it is hereby acknowledged that the goods, packages and items have been received by the carrier and are available to the shipper on request, and to all applicable state and federal regulations.

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14708(c)(1)(A) and (B).

SHIPPER SIGNATURE / DATE
 This is to certify that the above named consignee has properly completed, packaged, marked and labeled, and is in proper condition for shipment in accordance with the regulations of the U.S. DOT.

Trailer Loaded: By Shipper By Driver
 Freight Collected: By Shipper By Driver/Process

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and items and that the carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Date: 1/10/2020 2:12:50 PM

Bill of Lading

SHIPPER
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SLD#:

Bill of Lading Number: 06757163000469334
 (402) 26757163000469334

SHIP TO
 Name: Bed Bath & Beyond #2866 Location #: PHL
 Address: c/o International Distribution Group
 1828 River Rd., PHL, VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5771212 FOB:
 Dest:

CARRIER NAME: Central Transport
 Response & Acct. No.:

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

Trailer number: TL1700425
 Seal number(s):
 SCAC: CTH
 Pro Number: 777-6498608-6

SPECIAL INSTRUCTIONS:
 BB & B Vendor #: 028372
 MVDP5771212

Prepaid: Collect: X 3rd Party:
 (check box) Master Bill of Lading: with attached
 underlying Bills of Lading

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLETS/SLIP
EUR00ZE	4	12.51	Y N
EURS5TV	2	4.14	Y N
EURS6XG	1	5.07	Y N
EURVZTV	4	17.60	Y N
EURV3GZ	2	15.06	Y N
EURW2AH	1	1.98	Y N
EVAW4CS	1	15.85	Y N
EVA08TV	2	37.25	Y N
EVA34DW	9	83.72	Y N
EVAU7JG	2	44.96	Y N
EVAU7LV	1	4.89	Y N
EVAWSRM	4	47.89	Y N
EVAW6RG	1	13.49	Y N

CUSTOMER INFORMATION
 Appointment Time: AM 777-6498608-6 E/L AM

When the rate is dependent on vehicle, shipment was required to select 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 \$_____

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).
 The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

RECEIVED subject to liability, determined date or contents that have been signed upon in writing by the carrier and shipper. If applicable, other way to the date, classification and rate that have been agreed upon by the carrier and shipper, on request, and to applicable laws and Federal Regulations.

COB Amount: Collect Prepaid:
 Customer check acceptable:

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are properly packed, secured, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.
 Carriers
 1-10-2020

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and insures them. Carrier certifies emergency response information was made available and/or other information as required by the U.S. DOT emergency response guidebook or equivalent document in the vehicle.
 SHIPPER SIGNATURE
 1/13/20
 SLD# 777-6498608-6

DELIVERY TRAILER MANIFEST

Terminal: 086 Dest: BBB 2666 (086T06) Date: 01/21/2020
 Trailer Number: 53-8908 Door: 25 Time: 08:33
 Weight: 26321
 HUs: 36
 Closed By: HOLZEMAN, MARK
 Remarks:

Received By: _____
Name: _____
Date: _____

BED BATH BEYOND



0862666012120083304



M#: Q086-0074695-2

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
145-6843979-9		442	MGA ENTERTAINMENT	BBB DC 2666 % INTERN	MVDP5797862	ER9NSBW	MVDP5797862
HU		Loader					
<input type="checkbox"/> 145-6843979 01		CT-086292			145-6843979 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	
<input type="checkbox"/> 145-6843979 02		CT-086292			145-6843979 02: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-6843979 03		CT-086292			145-6843979 03: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-6843979 04		CT-086292			145-6843979 04: <input type="checkbox"/> <input type="checkbox"/>		
145-9921536-6	HSS	072	H-SCHULTZ-SONS	BED-BATH-BEYOND-26	215034	EU4J3UC	MVDP5789299
HU		Loader					
<input type="checkbox"/> 145-9921536 01		CT-086384			145-9921536 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	
<input type="checkbox"/> 145-9921536 02		CT-086302			145-9921536 02: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 03		CT-086292			145-9921536 03: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 04		CT-086292			145-9921536 04: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 05		CT-086302			145-9921536 05: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 06		CT-086292			145-9921536 06: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 07		CT-086302			145-9921536 07: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 08		CT-086292			145-9921536 08: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 09		CT-086292			145-9921536 09: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 145-9921536 10		CT-086292			145-9921536 10: <input type="checkbox"/> <input type="checkbox"/>		
148-5535919-7		496	VENTURI INC - 49684	BBB DC 2666 % INTERN	MVDP5779623	EV5G2YM	MVDP5779623
HU		Loader					
<input type="checkbox"/> 148-5535919 01		CT-086303			148-5535919 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	
148-7079254-7		917	CORE HOME	BBB DC 2666 % INTERN	08176870003109240		MVDP5780769
HU		Loader					
<input type="checkbox"/> 148-7079254 01		CT-086386			148-7079254 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	
<input type="checkbox"/> 148-7079254 02		CT-086292			148-7079254 02: <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> 148-7079254 03		CT-086386			148-7079254 03: <input type="checkbox"/> <input type="checkbox"/>		
148-7468843-6		907	COLORDRIFT LLC % ANT	BBB DC 2666 % INTERN	08483220000941751	EQ3M5WP	MVDP5787639
HU		Loader					
<input type="checkbox"/> 148-7468843 01		CT-086292			148-7468843 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	
<input type="checkbox"/> 148-7468843 02		CT-086302			148-7468843 02: <input type="checkbox"/> <input type="checkbox"/>		
148-8208956-9		603	WILTON BRANDS LLC	BED BATH- BEYOND 266	11726553	EV3E9UH	MVDP5786949
HU		Loader					
<input type="checkbox"/> 148-8208956 01		CT-086253			148-8208956 01: <input type="checkbox"/> S <input type="checkbox"/> D	Notation	

DELIVERY TRAILER MANIFEST

Terminal: 086 Dest: BBB 2666 (086T08) Date: 01/21/2020
 Trailer Number: 53-8908 Door: 25 Time: 08:33
 Weight: 26321
 HUs: 35
 Closed By: HOLZEMAN, MARK
 Remarks:

Received By: _____
Name: _____
Date: _____

BED BATH BEYOND



0862666012120083304



M#: Q086-0074695-2

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
<input type="checkbox"/> 148-8208956 02			CT-086303		148-8208956 02:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 148-8208956 03			CT-086303		148-8208956 03:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 148-8208956 04			CT-086303		148-8208956 04:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 148-8208956 05			CT-086303		148-8208956 05:	<input type="checkbox"/> <input type="checkbox"/>	
148-8249407-4		917	SPLASH HOME	BED BATH- BEYOND 266	0000072218		MVDP5779758
HU			Loader			S & D	Notation
<input type="checkbox"/> 148-8249407 01			CT-086386		148-8249407 01:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 148-8249407 02			CT-086386		148-8249407 02:	<input type="checkbox"/> <input type="checkbox"/>	
148-8761619-2		150	USA PAN	BED BATH- BEYOND 266	00000177646788753	EV9S6TP	5788753
HU			Loader			S & D	Notation
<input type="checkbox"/> 148-8761619 01			CT-086377		148-8761619 01:	<input type="checkbox"/> <input type="checkbox"/>	
148-8763170-4		150	TMD HOLDINGS	BBB DC 2666 % INTERN	MVDP5779078	EU6W2LY	MVDP5779078
HU			Loader			S & D	Notation
<input type="checkbox"/> 148-8763170 01			CT-086377		148-8763170 01:	<input type="checkbox"/> <input type="checkbox"/>	
777-5707115-2		442	INTERDESIGN INC	BED BATH - BEYOND 26	00814920032387724	ER9T2HU	MVDP5796198
HU			Loader			S & D	Notation
<input type="checkbox"/> 777-5707115 01			CT-086292		777-5707115 01:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 777-5707115 02			CT-086292		777-5707115 02:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 777-5707115 03			CT-086292		777-5707115 03:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 777-5707115 04			CT-086292		777-5707115 04:	<input type="checkbox"/> <input type="checkbox"/>	
777-6499608-8		958	E-E COMPANY LTD	BED BATH- BEYOND 266	06757163000409334	EU8Q5ZE	MVDP5771212
HU			Loader			S & D	Notation
<input type="checkbox"/> 777-6499608 01			CT-086292		777-6499608 01:	<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> 777-6499608 02			CT-086386		777-6499608 02:	<input type="checkbox"/> <input type="checkbox"/>	



Pro Number
777-6499608-6

Ship Date
2020-01-13

Reference Number
MVDP5771212

Org DC
958 086

Freight Terms
**Freight Charges
Are Collect**

P.O. Number
EUBQSZ

SCAC:

Consignee:

BED BATH- BEYOND 2666% INT DIS
1808 RIVER RD
BURLINGTON, NJ 08016

Shipper:

E-E COMPANY LTD
22.1 HANSON WAY
WOODLAND, CA 95776

Special Instructions

Central transport delivery receipt

Date: 1/10/2020 2:12:50 PM **Bill Of Lading** Page 3 of 3

SHIP FROM
Name: E E E COMPANY LTD - 020372
Address: 221 Hanson Way
City/State/Zip: Woodland, CA 95776
BID#: FOB

SHIP TO
Name: Bed Bath & Beyond #2088 Location #: PHL- YDP
Address: c/o International Distribution Group
1808 River Rd., PHL VDP
City/State/Zip: Burlington, NJ 08016
CID#: MVDP5771212 FOB

SHIP FROM
Name: Bed Bath & Beyond c/o
Address: Bed Bath & Beyond Associates
PO Box 6202
City/State/Zip: Old Bethpage, NY 11804-9002

SHIP TO
Name: Bed Bath & Beyond c/o
Address: Bed Bath & Beyond Associates
PO Box 6202
City/State/Zip: Old Bethpage, NY 11804-9002

Bill of Lading Number: 00767163000108331
(402)08767163000108331

CARRIER NAME: Central Transport
Responsible Acct. No.:
Trailer number: TL4700426
Seal number(s):
SCAC: CT
Pro Number: 777-6499608-6

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

Prepaid: Collect: X 3rd Party:

Special Instructions:
SB & B Vendor #: 026372
MVDP5771212

Appointment Time: (check box) Major Bill of Lading: with attached Underlying Bill of Lading

Appoint Time: (check box) Major Bill of Lading: with attached Underlying Bill of Lading

HANDLING UNIT		PACKAGE		WEIGHT	CUBE	COMMODITY DESCRIPTION	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		5	ctns	16.34		Bath Accessories	49470	100
		2	ctns	6.58		Bath Towel, Beach Towel	49390	175
		16	ctns	307.88		Comforters, Bedspreads	46017	200
		3	ctns	29.40		Framed Goods	76660 Sub 5	125
		11	ctns	50.28		Frames, Valances	48390	175
		12	ctns	39.74		Pillows, Cushions	149289	250
		1	ctns	6.07		Rugs	70970-5	125
		4	ctns	24.10		Sheet Set & Pillowcase	49390	175
2		64		576.95		Grand Total		

RECEIVED: unless noted otherwise, consignee is required to inspect goods by the date of receipt and report any damage to the carrier immediately.

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

SHIPPER SIGNATURE / DATE: _____

TRAILER LOADED: By Shipper By Driver

FREIGHT COUNTED: By Shipper By Driver

SHIPPER SIGNATURE: _____

CARRIER SIGNATURE / PICKUP DATE: _____

Firm: BED BATH- BEYOND 2666% INT DIS

By: Shipment received in good order

HUs Received: 2

Driver: CT-086200 (53-8908) Date: 1/21/2020

Arrive Time: 9:36 AM Depart Time: 9:36 AM

Pro Number **777-6499608-6**

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: _____

Date: 1/21/2020 # And Type of Container: _____ # And Type of PCS: _____ Exception Type: _____

Log #: _____

Total Exceptions: _____

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051.2(f).



Beyond
Vendor Chargeback - Freight Claim


-Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 04/13/2020		
Freight Claim # 9420211 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 777-6499615-1 Store INDIANAPOLIS Bed Bath & Beyond #91 8655 N. RIVER CROSSING BLVD INDIANAPOLIS IN 46240		Pro/Pickup Date 01/24/2020 Delivery Date 02/04/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5016789 FC C/B Inv Dte 01/14/2020	PO/Reference# EV6D5CQ	Internal Cl# 1071104		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569917256	MARBLE SLV TBH	D	1	\$7.03
Total Extended Cost				\$7.03
Freight Charge				\$0.49
Total Chargeback Amount				\$7.52

*01/16/2020
CTR
10354*

(133)

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

Bill of Lading Number: 06757163000410354

 (402)06757163000410354

SHIP TO
 Name: Bed Bath & Beyond #2675 Location #: CIN-VDP
 Address: c/o Demar Logistics
 376 East Lies Road, CIN-VDP
 City/State/Zip: Carol Stream, IL 60188
 CID#: MVDP5787341 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6499615-1

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
 MVDP5787341

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

 777-6499615-1 B/L _____

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EU7E8JK	4	96.08	Y	N
EV4Z5DV	2	3.10	Y	N
EV5S8PX	1	5.07	Y	N
EV5S8RR	5	12.44	Y	N
EV5T4HL	1	23.58	Y	N
EV5T9AH	8	58.86	Y	N
EV5T9AK	1	5.51	Y	N
EV5X5KX	1	2.09	Y	N
EV5X5PG	3	11.88	Y	N
EV5Z3KR	9	40.16	Y	N
EV5Z3QD	1	5.07	Y	N
EV5Z3SP	4	21.92	Y	N
EV6A8VL	1	4.82	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.
also m 01.14.20

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 for equivalent documentation in the vehicle.
com 4/15/20

(SLC2) TL#1800167

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

Bill of Lading Number: 08757163000410354

 (402)06757163000410354

SHIP TO
 Name: Bed Bath & Beyond #2675 Location #: CIN-VDP
 Address: c/o Demar Logistics
 376 East Lies Road, CIN-VDP
 City/State/Zip: Carol Stream, IL 60188
 CID#: MVDP5787341 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6499615-1

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
 MVDP5787341

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ Driver Departure Time _____ AM
 777-6499615-1 BL Pg 3 PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV6L3HC	1	5.07	Y	N	
EV6L3JE	1	3.41	Y	N	
EV6M4JS	5	55.44	Y	N	
EV6M4QL	1	5.07	Y	N	
EV6Q9LG	2	10.58	Y	N	
EV6Q9PP	1	3.41	Y	N	
EV6U7ZR	3	16.00	Y	N	
EV6U8CA	3	11.46	Y	N	
EV6V6BR	1	4.62	Y	N	
EV7B8PR	5	37.79	Y	N	
EV7B8PZ	1	8.11	Y	N	
EV7B8RT	2	10.14	Y	N	
EV7D5XG	1	3.41	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 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.

Shipper Signature

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

Bill of Lading Number: 06757163000410354

 (402)06757163000410354

SHIP TO
 Name: Bed Bath & Beyond #2675 Location #: CIN-VDP
 Address: c/o Demar Logistics
 376 East Liles Road, CIN-VDP
 City/State/Zip: Carol Stream, IL 60188
 CID#: MVDP5787341 FOB:
 Dept: _____

CARRIER NAME: Central Transport
Responsible Acct.No: _____
Trailer number: TL1800187
Seal number(s): _____
SCAC: CTII
Pro Number: 777-6499615-1

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
 MVDP5787341

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV7E6DQ	6	28.76	Y	N	
EV7F8CJ	2	10.58	Y	N	
EV7F9YJ	2	7.76	Y	N	
EV7G2BY	3	16.09	Y	N	
EV7H9CA	2	16.69	Y	N	
EV7H9GK	4	14.76	Y	N	
EV7K4BU	2	7.96	Y	N	
Grand Total	133	774.77			

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 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet	150390.4	70
		32	ctns	123.96		Bath Accessories	49470	100

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

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: 1/14/2020 9:29:23 AM		Bill Of Lading		Page 5 of 5	
SHIP FROM				Bill of Lading Number: 06767163000410354	
Name: E & E COMPANY LTD - 028372		Address: 221 Hanson Way		 (402)06767163000410354	
City/State/Zip: Woodland, CA 95776		SID#: _____			
		FOB: <input type="checkbox"/>			
SHIP TO				CARRIER NAME: Central Transport	
Name: Bed Bath & Beyond #2675		Location #: CIN-VDP		Responsible Acct.No:	
Address: c/o Demar Logistics		376 East Lies Road, CIN-VDP		Trailer number: TL1800167	
City/State/Zip: Carol Stream, IL 60188		CID#: MVDP5787341		Seal number(s):	
Dept: _____		FOB: <input type="checkbox"/>		SCAC: CTII	
THIRD PARTY FREIGHT CHARGES BILL TO:				Pro Number: 777-6499615-1	
Name: Bed Bath & Beyond c/o		Address: Berman Blake Associates		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		PO Box 9202			
City/State/Zip: Old Bethpage, NY 11804-9002				Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____	
SPECIAL INSTRUCTIONS: BB & B Vendor # : 028372 MVDP5787341				<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
		Appointment Time		Actual Driver Arrival Time	
		AM		AM	
		PM		PM	
		Driver Departure Time		AM	
				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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		19	ctns	60.45		Bath Towel, Beach Towel	49390	175
		9	ctns	189.76		Comforters, Bedspreads	49017	200
		5	ctns	104.19		Framed Goods	76580 Sub 5	125
		2	ctns	4.19		Pillows, Cushions	149269	250
		30	ctns	145.97		Rugs	70970-5	125
		1	ctns	6.94		Sheet Set & Pillowcase	49390	175
		35	ctns	139.01		Shower curtain	49385	77.5
2		133		874.77		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
---	--

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
--	---

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



6052625012320123909

BED BATH & BEYOND
STORE 2625

CENTRAL TRANSPORT
DROPPED TRAILER MANIFEST
TRLR: 1900545
SEAL: 10024366

DATE: 01/23/2020
TIME: 12:39:09
PAGE: 1 OF 8

CAROL STREAM, IL 60188 MANIFEST#: 6052625012320123909
S/C: CRT TEL# (586) 467-1900

PRO#	SHIPPER NAME	P	BILLED	SWT	LOADER
P/U DATE	CITY/ST ZIP	C	PCS	WGT	Y/N INITIALS
777-6499615-1 R0	95776000214	C	133	874	CT-60524
01/15/20	E & E WOODLAND, CA 95776		RCVD:		

PO Number
EU7B8JK
EV4ZSDV
EV5S8PX
EV5S8RR
EV5T9AH
EV5T9AK
EV5X5PG
EV5Z3KR
EV5Z3SP

CTN CT RECEIVER #

TOTAL H/U: SKIDS 2 OTHER 0 TOTAL PIECES: 133
O S D OSD#:

777-5707082-4 R0	92376911081	C	420	2340	CT-60524
01/16/20	MADE SMART - A RIALTO, CA 92376		RCVD:		

PO Number
EV5T5MQ
EV6B6ZU
EV6D7PY
EV6G6CC
EV6K2FJ
EV6L3TD
EV6L7CW
EV6Q9VG
EV6U7SE
EV6Y2YY
EV6Y5LS
EV6Z7FB
EV7A5JA
EV7A5TC
EV7B7PR
EV7C3VM
EV7C7BS
EV7D3SL
EV7D5BE
EV7D7SN
EV7D9QZ
EV7E2YF
EV7E3YK
EV7E4HY
EV7E4UA
EV7E4XG
EV7E4ZK
EV7E5UE
EV7E6AW
EV7E6GB
EV7E6ZZ
EV7E8BQ
EV7F3KJ
EV7G3FY
EV7G4DG
EV7G6JL
EV7J6ZB

CTN CT RECEIVER #


TL# 1800167

(133)

133
CTN

Date: 1/14/2020 9:29:23 AM **Bill Of Lading** Page 1 of 5

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

Bill of Lading Number: 06767183000410354

(402)06757183000410354


SHIP TO
Name: Bed Bath & Beyond #2675 Location #: CIN-VDP
Address: c/o Derner Logistics
376 East Lies Road, CIN-VDP
City/State/Zip: Carol Stream, IL 60188
CID#: MVDP5787341 FOB:

CARRIER NAME: Central Transport
Responsible Accl.No:
Trailer number: TL1800167
Seal number(s):
SCAC: CTII
Pro Number: 777-6499615-1

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
MVDP5787341

Master Bill of Lading: with attached underlying Bills of Lading
Appointment Time _____ AM _____ PM
 777-6499615-1 B/L _____ AM _____ PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EU7E8JK	4	96.08	Y	N
EV4Z5DV	2	3.10	Y	N
EV5S8PX	1	5.07	Y	N
EV5S8RR	5	12.44	Y	N
EV5T4HL	1	23.58	Y	N
EV5T9AH	8	58.86	Y	N
EV5T9AK	1	5.51	Y	N
EV5X6KX	1	2.09	Y	N
EV5X6PG	3	11.88	Y	N
EV5Z3KR	9	40.16	Y	N
EV5Z3QD	1	5.07	Y	N
EV6Z3SP	4	2:		
EV6A8VL	1	4		

P&C# 2675 RECEIPT DATE 01-24-20
BBB MGR: EA
PLTS SHIPPED 2 PLTS RECEIVED 2
CTNS SHIPPED 167 CTNS RECEIVED 167
EXCEPTIONS YES NO
#CTNS SHORT 0 #CTNS OVER 0 #CTNS DMG 3
OS&D# 2026750082
OS&D DATE 01-27-20 OS&D TIME 7:31 PM
OS&D CONTACT: WEBSITE

Where the rate is dependent on value, shippers are required to state specifically in v declared value of the property as follows:
*The agreed or declared value of the property is specifically stated by the shipper to b per _____

NOTE Liability Limitation for loss or damage:

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

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.
also mo 1.14.20

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.
com 4/15/20

(SLC2) TL# 1800167

Trailer: BBB T11800167
 Close Date: 01/16/20 Arrival Date: 01/27/20 Origin: NO SCAN Seal #: T11800167 Seal Cond.: Intact
 Carrier: CTH Carrier Pro:
 MBOL #: 06757163000410354 Arr Seal #: 01272020

Trailer TOTALS:
 Damaged: 3 Over: 0 Short: 0 Out-Area: 0 Match: 167 Bad-rec: 0 ASN: 167 OSD: 167 Pallets: 167 Pallets: 167 Total Loose Cartons: 0

Vendor: 069089 E & E CO., I Carrier: 221 Hanson Way
 777-6499615-1 MBOL #: 06757163000410354
 Woodland, CA 95776

Scanned Trailer totals to Vendor BOL:
 Damaged: 3 Over: 0 Short: 0 Out-Area: 0 Match: 0 Bad-rec: 0 BOL: 167 Scanned: 167 Pallets: 167 Total Loose Cartons: 0
 Scanned Trailer totals to Vendor ASN:
 Over: 34 Short: 0 Match: 133 ASN: 133

Cartons On Vendor/Building ASN not scanned into building (SHORTS)

*** All cartons on the Vendor/Building ASN were scanned into the building ***

Cartons Not on Vendor/Building ASN but scanned into building (OVERS)

Store PO #	Carton Number	ASN BOL #	Store PO #	Carton Number	ASN BOL #
0091	EUTY7RG	00006757166450592977	0091	EUTY7RG	06757163000406524
0091	EUTY7RG	00006757166450592991	0091	EUTY7UA	06757163000406524
0091	EUTY7UA	00006757166450593011	0167	EY9L6NW	06757163000406524
0167	EUT74NP	00006757166450594100	0375	EUTU6WX	06757163000406524
0375	EUTU6WX	00006757166450596265	0375	EUTU6WX	06757163000406524



Pro Number
777-6499615-1

Ship Date
2020-01-15

Reference Number
MVDP5787341

Org DC
958 605

Freight Terms
Freight Charges Are Collect

P.O. Number
EU7E8JK

SCAC:

Consignee:

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

Shipper:

E & E
221 HANSON WAY
WOODLAND, CA 95776

Special Instructions

SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO:	
Name:	E & E COMPANY LTD - 028372	Name:	Bed Bath & Beyond #2675	Name:	Bed Bath & Beyond c/o
Address:	221 Hanson Way	Address:	c/o Demar Logistics	Address:	Berman Blake Associates
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	376 East Lies Road, CIN-VDP	Address:	PO Box 9202
SID#:		City/State/Zip:	Carol Stream, IL 60188	City/State/Zip:	Old Bothpage, NY 11804-9302
FOB:	<input type="checkbox"/>	CID#:	MVDP6787341	SPECIAL INSTRUCTIONS:	BB & B Vendor #: 028372 MVDP5787341
BIN of Lading Number: 06767483000410354		GARRIER NAME: Central Transport		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Responsible Acct.No:		Trailer number: TL1800' 67		Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
Seal number(s):		SCAC: CTH		Master Bill of Lading: with attached	
Pro Number: 777-6499615-1		Pro Number: 777-6499615-1		underlying Bills of Lading	
Appointment Time:		Actual Driver Arrival Time:		Driver Departure Time:	
AM PM		AM PM		AM PM	
CARRIER INFORMATION					
HANDLING UNIT	PACKAGE	WEIGHT	CUBE	COMMODITY DESCRIPTION	PACKAGE
QTY	TYPE	QTY	TYPE		NMFC # CLASS
		19	ctns	Bath Towel, Beach Towel	49380 175
		9	ctns	Comforters, Bedsores	49017 200
		5	ctns	Framed Goods	76580 Sub 5 125
		2	ctns	Pillows, Cushions	149269 250
		30	ctns	Rugs	70970-5 125
		1	ctns	Sheet Set & Pillowcase	49390 175
		35	ctns	Shower curtain	49385 77.5
2		133		Grand Total	

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

RECEIVED, subject to individually determined rates or charges that have been agreed upon in writing between the carrier and shipper, it applies to the rates, classifications and rates list now shown established by the carrier and are subject to the shipper, or 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 _____

Trailer Loaded: By Shipper By Driver

Freight Counted: By Shipper By Driver/pallets held to contain By Driver/pallets

CARRIER SIGNATURE / PICKUP DATE _____

SHIPPER SIGNATURE _____

Firm BED BATH - BEYOND 2625 % DEMAR LOG

By *Christy*
Shipment received in good order

HUs Received 2

Driver CT-605252 (1900545) Date 1/24/2020

Arrive Time 8:50 AM Depart Time 8:50 AM

Pro Number **777-6499615-1**

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 _____

Date 1/24/2020 # And Type of Contalner _____ # And Type of PCS _____ Exception Type _____

Log # _____

Total Exceptions _____

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051(2)(f).

Central Transport Delivery Receipt



Beyond
Vendor Chargeback - Freight Claim

Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 04/13/2020		
Freight Claim # 9416912 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 06757163000410491 Store Bethlehem Bed Bath & Beyond #775 4449 Southmont Way Easton PA 18045		Pro/Pickup Date 01/16/2020 Delivery Date 01/30/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5016963 FC C/B Inv Dte 01/14/2020	PO/Reference# EV7D7HS	Internal Cl# 1071541		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569205124	ISA 10PC NAVY KING CMF	D	1	\$59.80
0086569280206	LENNOX 3PC FQ QLT EMERALD	D	1	\$58.50
Total Extended Cost				\$118.30
Freight Charge				\$8.28
Total Chargeback Amount				\$126.58

*01/16/2020
CTR
10491*

1250


Date: 1/14/2020 9:44:55 AM **Bill Of Lading** Page 1 of 5

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 #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 Dept: _____ FOB:

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5787503

Bill of Lading Number: 06757163000410491

 (402)06757163000410491

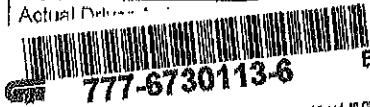
CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1800167
 Seal number(s): _____
SCAC: CTII
Pro Number: 777-6730113-6

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

Prepaid: _____ Collect: 3rd Party: _____

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

Appointment Time _____ Actual Delivery Time _____
 A) _____ B/L AM

CUSTOMER ORDER INFORMATION

 777-6730113-6
 Subject to: NMF 100, CT 100CT 101 Rules Tariffs: 49 USC 14708 and 49 CFR 370
 Drivers signature only acknowledges receipt of freight

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EU5L6PH	1	2.09	Y	N
EV5A3VU	13	105.85	Y	N
EV5E8WR	5	49.35	Y	N
EV5Q9FH	3	15.21	Y	N
EV5T9UD	23	330.75	Y	N
EV5U2CH	11	72.61	Y	N
EV5U5KW	9	81.26	Y	N
EV5U5NW	2	10.14	Y	N
EV5U8ES	1	5.07	Y	N
EV5V9MQ	18	162.19	Y	N
EV5V9SR	2	6.21	Y	N
EV5W4LU	2	10.14	Y	N
EV5W4MJ	5	35.36	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.
Also mo 1.14.20

Trailer Loaded:
 By Shipper
 By Driver


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

SHIPPER SIGNATURE
SM/1/25/20

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.
TL#1800167

546 TL#1800167

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

Bill of Lading Number: 06757163000410491

 (402)06757163000410491


SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6730113-6

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
 MVDP5787503

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


CUSTOMER ORDER INFORMATION  777-6730113-6 BL Pg 2

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV5X6GQ	5	58.18	Y	N	
EV5Y5PQ	5	53.78	Y	N	
EV5Y6QB	1	5.07	Y	N	
EV5Z2RA	16	170.13	Y	N	
EV5Z2TH	1	5.07	Y	N	
EV6B5NE	1	5.07	Y	N	
EV6B9UA	15	81.23	Y	N	
EV6E5PT	1	5.07	Y	N	
EV6F8GE	10	96.96	Y	N	
EV6G8EM	1	1.05	Y	N	
EV6G8JX	1	5.07	Y	N	
EV6H8MP	2	24.72	Y	N	
EV6H8PQ	1	5.07	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

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.

Shipper Signature

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

Bill of Lading Number: 06757163000410491

 (402)06757163000410491


SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6730113-6

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
 MVDP5787503

Appointment Time _____ AM
 _____ AM

CUSTOMER ORDER INFORMATION **777-6730113-6** BL Pg 3

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV6J5LK	4	36.48	Y	N	
EV6L3PQ	2	11.46	Y	N	
EV6M3NK	14	58.09	Y	N	
EV6N6PW	13	121.86	Y	N	
EV6T6AF	15	130.11	Y	N	
EV6U4CZ	9	97.73	Y	N	
EV6U4FR	3	15.65	Y	N	
EV6V4AN	1	1.36	Y	N	
EV6V4DX	2	11.02	Y	N	
EV6X6LU	4	42.98	Y	N	
EV6X6MS	2	11.02	Y	N	
EV7B3GC	1	5.07	Y	N	
EV7B4RK	1	19.62	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.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____ FOB:

Bill of Lading Number: 06757163000410491

 (402)06757163000410491

SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
SCAC: CTII
 Pro Number: 777-6730113-6

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
 MVDP5787503

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV7B4SX	2	10.14	Y	N	
EV7C4TH	1	5.51	Y	N	
EV7C8KH	1	5.07	Y	N	
EV7D7AJ	2	11.02	Y	N	
EV7D7HS	11	128.48	Y	N	
EV7E2TF	1	7.71	Y	N	
EV7F8UV	8	93.42	Y	N	
Grand Total	251	2226.48			

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(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
6	Pallet			300.00		Pallet	150390.4	70
		3	ctns	3.96		Bath Accessories	49470	100

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/Places

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: 06757163000410491

 (402)06757163000410491

SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
SCAC: CTII
 Pro Number: 777-6730113-6

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
 MVDP5787503

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

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 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		5	ctns	7.56		Bath Towel, Beach Towel	49390	175
		81	ctns	1530.74		Comforters, Bedspreads	49017	200
		105	ctns	422.51		Panels, Valances	49390	175
		15	ctns	39.01		Pillows, Cushions	149269	250
		24	ctns	120.66		Rugs	70970-5	125
		10	ctns	57.96		Sheet Set & Pillowcase	49390	175
		8	ctns	44.08		Shower curtain	49385	77.5
6		251		2526.48		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 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.

Delivery Stop Manifest
1/25/2020

Trailer: 49-7076 ✓
Peddle: BBB 2666 (086T06)

Bills: 13
HUs: 31

Stop	Appt	Consignee	Address	Bills	HUs	BOL Required
99		BBB 2666 INTERNATIONAL DISTRIBUTION GROUP	BURLINGTON, NJ 08016	1808 RIVER RD	13	31

- PRO
- 777-6730113-6
- 777-6232387-9
- 148-7961131-8
- 148-9920709-7
- 148-5119064-6
- 148-7902103-9
- 148-0462397-4
- 148-5420558-1
- 148-3147408-6
- 148-7053474-1
- 148-6816124-2
- 777-6475992-2
- 777-6399831-5

HUs
BURLINGTON, NJ 08016

1808 RIVER RD 13 31 BOL Required

07380670

Damage rare door top frame

1/27/20 10:46am

Trailer: 49-7076 ✓
 Peddle: BBB 2666 (086T06)

Delivery Stop Manifest
 1/25/2020

Bills: 13
 HUs: 31

Stop	Appt	Consignee	Address	Bills	HUs	BOL Required
99		BBB 2666 INTERNATIONAL DISTRIBUTION GROUP	BURLINGTON, NJ 08016	1808 RIVER RD	13	31
		PRO	HUS			
		777-6730113-6	6			
		777-6232387-9	1			
		148-7961131-8	1			
		148-9920709-7	1			
		148-5119064-6	5			
		148-7902103-9	2			
		148-0462397-4	4			
		148-5420558-1	1			
		148-3147408-6	1			
		148-7053474-1	1			
		148-6816124-2	1			
		777-6475992-2	1			
		777-6399831-5	6			

07380670

Damage rare door top frame

1/27/20 10:46am

Date: 1/14/2020 9:44:55 AM

Bill Of Lading

251

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

Bill of Lading Number: 06757163000410491



SHIP TO
 Name: Bed Bath & Beyond #2666 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP5787503 FOB:
 Dept: _____

CARRIER NAME: Central Transport

Responsible Acct.No:

Trailer number: TL1800167

Seal number(s):

SCAC: CTII

Pro Number: 777-6730113-6

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)

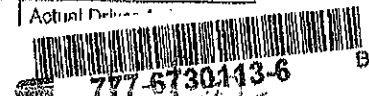
Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS:

BB & B Vendor #: 028372
MVDP5787503

Master Bill of Lading: with attached underlying Bills of Lading

Appointment Time: _____ Actual Delivery Time: _____



CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
EU5L5PH	1	2.09	Y N
EV5A3VU	13	105.85	Y N
EV5E8WR	5	49.35	Y N
EV5Q9FH	3	15.21	Y N
EV5T9UD	23	330.75	Y N
EV5U2CH	11	72.61	Y N
EV5U5KW	9	84.86	Y N
EV5U5NW	2	BB#	Y N
EV5U8ES	1	BB#	Y N
EV5V9MQ	18	162.99	Y N
EV5V9SR	2	6.27	Y N
EV5W4LU	2	10.14	Y N
EV5W4MJ	5	35.36	Y N

DELIVERY DATE: 1/14/20
 PLTS RECEIVED: 245
 CTNS RECEIVED: NO
 #CTNS OVER: 1
 #CTNS DMG: 2
 OS&D TIME: 15:00
 OS&D CONTACT: 800-445-5552

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(e)(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.
 [Signature] 1/14/20

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.
 [Signature] 1/14/20

SAC 6 TCH (800) 167

Date: 1/14/2020 9:44:56 AM

Bill Of Lading

Page 2 of 5

SHIP FROM		Bill of Lading Number: 08767163000410491
Name:	E & E COMPANY LTD - 028372	 (402)06767163000410491
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: Central Transport
Name:	Bed Bath & Beyond #2666	Location #: PHL-VDP
Address:	c/o International Distribution Group 1808 River Rd., PHL-VDP	
City/State/Zip:	Burlington, NJ 08016	
CID#:	MVDP5787503	FOB: <input type="checkbox"/>
Dept:		

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name:	Bed Bath & Beyond c/o	
Address:	Berman Blake Associates	
	PO Box 9202	
City/State/Zip:	Old Bethpage, NY 11804-9002	

SPECIAL INSTRUCTIONS:	Prepaid: <input type="checkbox"/>	Collect: X	3rd Party: <input type="checkbox"/>
BB & B Vendor #: 028372	Master Bill of Lading: with attached underlying Bills of Lading		
MVDP5787503	(check box)		
	Appointment Time		Time
	AM		AM

CUSTOMER ORDER INFORMATION 777-6730113-6 BL Pg 2

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EV5X6GQ	5	58.18	Y	N	
EV5Y5PQ	5	53.78	Y	N	
EV5Y6QB	1	5.07	Y	N	
EV5Z2RA	15	170.13	Y	N	
EV5Z2TH	1	5.07	Y	N	
EV6B5NE	1	5.07	Y	N	
EV6B9UA	15	81.23	Y	N	
EV6E5PT	1	5.07	Y	N	
EV6F8GE	10	96.96	Y	N	
EV6G8EM	1	1.05	Y	N	
EV6G8JX	1	5.07	Y	N	
EV6H8MP	2	24.72	Y	N	
EV6H8PQ	1	5.07	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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
---	--

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(e)(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.
--	---

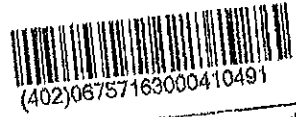
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input 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	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.
---	--	--	--

Bill of Lading

Date: 1/14/2020 9:44:55 AM

Bill of Lading Number: 06757163000410491

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 #2666
 Location #: PHL-VDP
 Address: c/o International Distribution Group
 1808 River Rd., PHL-VDP
 City/State/Zip: Burlington, NJ 08016
 CID#: MVDP6787503
 Dept: _____
 FOB:

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1800167
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6730113-6

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
 Appointment Time _____ AM
 777-6730113-6 Bl. Pg 3

SPECIAL INSTRUCTIONS:
 RR & B Vendor #: 028372
 MVDP6787503

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
			Y	N
EV6J5LK	4	36.48	Y	N
EV6L3PQ	2	11.46	Y	N
EV6M3NK	14	58.09	Y	N
EV6N6PW	13	121.86	Y	N
EV6T6AF	15	130.11	Y	N
EV6U4CZ	9	97.73	Y	N
EV6U4FR	3	15.65	Y	N
EV6V4AN	1	1.36	Y	N
EV6V4DX	2	11.02	Y	N
EV6X6LU	4	42.98	Y	N
EV6X6MS	2	11.02	Y	N
EV7B3GC	1	6.07	Y	N
EV7B4RK	1	19.62	Y	N

ADDITIONAL SHIPPER INFO

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.

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 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.

DELIVERY TRAILER MANIFEST

Terminal: 086
 Trailer Number: 49-7076
 Weight: 14142
 HUs: 31
 Closed By: HOLZERMAN, MARK
 Remarks:

Dest: BBB 2666 (086T06)
 Door: 25

Date: 01/25/2020
 Time: 04:43

BED BATH BEYOND



0862666012520044332



M#: Q086-0095715-2

Received By: _____
 Name: _____
 Date: _____

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
148-0462397-4	HU	767	LETS GEL INC Loader CT-086303	BED BATH- BEYOND 266	VDP001107	5068367	MVDP5789643
<input type="checkbox"/> 148-0462397 01					148-0462397 01:		
<input type="checkbox"/> 148-0462397 02					148-0462397 02:		
<input type="checkbox"/> 148-0462397 03					148-0462397 03:		
<input type="checkbox"/> 148-0462397 04					148-0462397 04:		
148-3147408-6	HU	496	VENTURI INC - 49684 Loader CT-086356	BBB 2666 INTERNATIONAL	MVDP5788858	EW2L7MB	MVDP5788858
<input type="checkbox"/> 148-3147408 01					148-3147408 01:		
148-5119064-6	HU	658	ARLEE HOME FASHIONS Loader CT-086302	BBB 2666 INTERNATIONAL	MVDP5789576		MVDP5789576
<input type="checkbox"/> 148-5119064 01					148-5119064 01:		
<input type="checkbox"/> 148-5119064 02					148-5119064 02:		
<input type="checkbox"/> 148-5119064 03					148-5119064 03:		
<input type="checkbox"/> 148-5119064 04					148-5119064 04:		
<input type="checkbox"/> 148-5119064 05					148-5119064 05:		
148-5420558-1	HU	381	THERMOS LLC Loader CT-086356	BED BATH- BEYOND 266	796945	EV3V5LK	MVDP5797545
<input type="checkbox"/> 148-5420558 01					148-5420558 01:		
148-6816124-2	HU	318	AMERICAN TEXTILE Loader CT-086303	BBB DC 2666 % INTERN	0224150001783302	EV9M6UC	MVDP5791042
<input type="checkbox"/> 148-6816124 01					148-6816124 01:		
148-7053474-1	HU	495	GUARDSMAN US LLC Loader CT-086302	BBB 2666 INTERNATIONAL	PHLPOOL012220		MVDP5797904
<input type="checkbox"/> 148-7053474 01					148-7053474 01:		
148-7902103-9	HU	436	SUNBEAM PRODUCTS INC Loader CT-086377	BED BATH- BEYOND 266	00168530004962507	EU4R5NU	MVDP5790074
<input type="checkbox"/> 148-7902103 01					148-7902103 01:		
<input type="checkbox"/> 148-7902103 02					148-7902103 02:		
148-7961131-8	HU	405	EDGECRAFT - 40361 Loader	BED BATH- BEYOND 266	00878770004764576	EV9E5ED	MVDP5790084
<input type="checkbox"/> 148-7961131 01							

DELIVERY TRAILER MANIFEST

Terminal: 086
 Trailer Number: 49-7076
 Weight: 14142
 HUs: 31

Dest: BBB 2666 (086T06)
 Door: 25

Date: 01/25/2020
 Time: 04:43

Closed By: HOLZERMAN, MARK
 Remarks:

BED BATH BEYOND



0862666012520044332



Q086-0095715-2

Received By: _____
 Name: _____
 Date: _____

M#:

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
<input type="checkbox"/> 148-7961131 01		CT-086356			148-7961131 01: <input type="checkbox"/>		
148-9920709-7	HU	534 BEMIS MFG CO	Loader	BBB DC 2666 % INTERN	7669002666000	EV8C2ZH	MVDP5795911
<input type="checkbox"/> 148-9920709 01		CT-086303			148-9920709 01: <input type="checkbox"/>	S & D	
777-6232387-9	HU	799 BROKERS LOGISTICS IN	Loader	BED BATH- BEYOND 266	040000000848365	EV9H3PY	MVDP5796247
<input type="checkbox"/> 777-6232387 01		CT-086362			777-6232387 01: <input type="checkbox"/>	S & D	
777-6399831-5	HSS	089 LONDON LUXURY % SEA	Loader	BED BATH- BEYOND 266	0846756000369929	000036992	MVDP5788868
<input type="checkbox"/> 777-6399831 05		CT-086386			777-6399831 05: <input type="checkbox"/>	S & D	
<input type="checkbox"/> 777-6399831 06		CT-086386			777-6399831 06: <input type="checkbox"/>		
<input type="checkbox"/> 777-6399831 07		CT-086386			777-6399831 07: <input type="checkbox"/>		
<input type="checkbox"/> 777-6399831 08		CT-086386			777-6399831 08: <input type="checkbox"/>		
<input type="checkbox"/> 777-6399831 09		CT-086386			777-6399831 09: <input type="checkbox"/>		
<input type="checkbox"/> 777-6399831 10		CT-086386			777-6399831 10: <input type="checkbox"/>		
777-6475992-2	HU	424 ANCHOR HOCKING GLASS	Loader	BED BATH - BEYOND 266	00764408601127132	ET3L6QF	MVDP5790172
<input type="checkbox"/> 777-6475992 01		CT-086377			777-6475992 01: <input type="checkbox"/>	S & D	
777-6730113-6	HU	958 E-E CO LTD	Loader	BBB DC 2666 % INTERN	06757163000410491		MVDP5787503
<input type="checkbox"/> 777-6730113 01		CT-086378			777-6730113 01: <input type="checkbox"/>	S & D	
<input type="checkbox"/> 777-6730113 02		CT-086378			777-6730113 02: <input type="checkbox"/>		
<input type="checkbox"/> 777-6730113 03		CT-086253			777-6730113 03: <input type="checkbox"/>		
<input type="checkbox"/> 777-6730113 04		CT-086378			777-6730113 04: <input type="checkbox"/>		
<input type="checkbox"/> 777-6730113 05		CT-086377			777-6730113 05: <input type="checkbox"/>		
<input type="checkbox"/> 777-6730113 06		CT-086253			777-6730113 06: <input type="checkbox"/>		



Pro Number
777-6730113-6

Ship Date
2020-01-15

Reference Number
MVPD5787503

Org DC
958 086

Freight Terms
Freight Charges Are Collect

P.O. Number

SCAC:

Consignee:

BBB DC 2666 % INTERNATIONAL
1808 RIVER RD
BURLINGTON, NJ 08016


Shipper:

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

Special Instructions

Date: 1/14/2020 9:44:56 AM **Bill Of Lading** Page 1 of 5

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

Bill of Lading Number: 0875718300041049

(402)08757183000410491


SHIP TO
Name: Bed Bath & Beyond #2686 Location #: PHL-VDP
Address: c/o International Distribution Group
1808 River Rd., PHL-VDP
City/State/Zip: Burlington, NJ 08018
CID#: MVPD5787503 FOB:

CARRIER NAME: Central Transport
Responsible Acct. No: _____
Trailer number: TL1800-67
Seal number(s): _____
SCAC: CTII
Pro Number: 777-6730113-6

THIRD PARTY FREIGHT CHARGES BILL TO:
Name: Bed Bath & Beyond c/o
Address: Berman Bleke Associates
PO Box #202
City/State/Zip: O d Bathpage, NY 11804-9302

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

SPECIAL INSTRUCTIONS:
SB & B Vendor #: 028372
MVPD5787503

Master Bill of Lading: with attached underlying Bills of Lading
Appointment Time: _____ Act in Cont: _____ Time: _____
A.  B/L AM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EUSL5PH	1	2.09	Y	N
EV6A3VU	13	105.85	Y	N
EV5E8WR	5	49.35	Y	N
EV5Q9FH	3	15.27	Y	N
EV5T8UD	23	330.75	Y	N
EV6U2CH	11	72.61	Y	N
EV8U6KW	9	81.26	Y	N
EV6U5NW	2	10.14	Y	N
EV6U8ES	1	5.07	Y	N
EV5V9MQ	18	162.19	Y	N
EV5V9SR	2	6.21	Y	N
EV5W4LU	2	10.14	Y	N
EV5W4MJ	5	35.36	Y	N

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

GDD 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(e)(1)(A) and (B).

RECEIVED, subject to individually determined rates or conditions that have been agreed upon and filed between the carrier and shipper. It applies to the rules, classifications and rules that have been established by the carrier and are available to the shipper, on request, and in all applicable state and local regulations.

The carrier shall not make delivery of this or any other property without payment of freight and all other valid charges.

SHIPPER SIGNATURE / DATE
This is to certify that the above described goods are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.
Almo 01/14/20

Trailer Loaded: By Shipper By Driver
Freight Counted: By Shipper By Driver/Pallets used in container By Driver/Placards

CARRIER SIGNATURE / PICKUP DATE
Carrier acknowledges receipt of packages and required placards. Carrier certifies that the proper response information has been available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
EM/1/25/20

SAC6 TEL 18001167

Firm BBB DC 2666 % INTERNATIONAL

By _____
Shipment received in good order

HUs Received 6

Driver CT-086341 (49-7076) Date 1/27/2020

Arrive Time 11:16 AM Depart Time 11:17 AM

Pro Number 777-6730113-6
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 _____

Date	# And Type of Container	# And Type of PCS	Exception Type
1/27/2020			
Log #			
Total Exceptions			

Central Transport Delivery Receipt




Beyond
Vendor Chargeback - Freight Claim

- Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 05/07/2020		
Freight Claim # 9446938 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 77764996284 Store Scottsdale Bed Bath & Beyond #573 7000 E Mayo Blvd Building 12 Phoenix AZ 85054		Pro/Pickup Date 02/06/2020 Delivery Date 02/20/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5039589 FC C/B Inv Dte	PO/Reference# EW8X6UF	Internal Cl# 1074425		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569917249	MARBLE SLV LOT	D	1	\$7.79
Total Extended Cost				\$7.79
Freight Charge				\$0.55
Total Chargeback Amount				\$8.34

*02/06/2020
CTR
110462*

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

Bill of Lading Number: 06757163000416462

 (402)06757163000416462


SHIP TO:
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5818846 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1900342
 Seal number(s): _____
SCAC: CTII
Pro Number: 777-6499628-4

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
 MVDP5818846

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ AM
 11:00 AM

CUSTOMER ORDER INFORMATION  **777-6499628-4** B/L

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EW7L7JN	13	28.19	Y	N
EW7L7PD	1	23.58	Y	N
EW7M5SD	1	4.55	Y	N
EW7M5VA	3	16.09	Y	N
EW7N5MX	1	5.51	Y	N
EW7N5MZ	3	19.77	Y	N
EW7S6VC	2	15.55	Y	N
EW7S6XF	2	7.60	Y	N
EW7W7VZ	12	56.19	Y	N
EW7W9QP	3	9.39	Y	N
EW7W9TR	1	5.51	Y	N
EW7X5ZP	6	29.70	Y	N
EW7X6AV	2	7.16	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.
Also no 2/6/20

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.
Milner 2/6/20 SLc

1900342

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

Bill of Lading Number: 06757163000416462

 (402)06757163000416462

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1611 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5818846 FOB:
 Dept: _____


CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1000342
 Seal number(s):

SCAC: CTII
 Pro Number: 777-6499628-4

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

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

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5818846

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

CUSTOMER ORDER INFORMATION  **777-6499628-4** BL Pg 2

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EW7Y7GN	9	40.77	Y	N	
EW7Y7JG	1	2.09	Y	N	
EW7Z9CZ	1	3.41	Y	N	
EW8C5MR	5	26.04	Y	N	
EW8C5QG	1	5.51	Y	N	
EW8D3UN	6	14.48	Y	N	
EW8D3UV	1	1.14	Y	N	
EW8D6GW	2	19.61	Y	N	
EW8D6MS	1	5.51	Y	N	
EW8E8AX	18	67.47	Y	N	
EW8F3YB	2	4.55	Y	N	
EW8F9YA	1	1.14	Y	N	
EW8F9YH	6	34.47	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 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/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.

Date: 2/6/2020 8:11:53 AM

Bill Of Lading

Page 3 of 5

SHIP FROM		Bill of Lading Number: 06757163000416462
Name: E & E COMPANY LTD - 028372		 (402)06757163000416462
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#: _____ FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: Central Transport
Name: Bed Bath & Beyond #2642	Location #: PHO-VDP	Responsible Acct.No:
Address: Phoenix -Legacy SCS 1511 S. 47th Ave Suite 300, PHO-VDP		Trailer number: TL1900942
City/State/Zip: Phoenix, AZ 85043		Seal number(s):
CID#: MVDP5818846	FOB: <input type="checkbox"/>	SCAC: CTII
Dept:		Pro Number: 777-6499028-4

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name: Bed Bath & Beyond c/o		
Address: Berman Blake Associates PO Box 9202		
City/State/Zip: Old Bethpage, NY 11804-9002		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>

SPECIAL INSTRUCTIONS: BB & B Vendor # : 028372 MVDP5818846	Master Bill of Lading: with attached underlying Bills of Lading
	Appointment Time: _____ AM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EW8G8UB	4	10.95	Y N	
EW8G8WT	1	5.51	Y N	
EW8K8UL	9	33.61	Y N	
EW8K8WP	2	11.02	Y N	
EW8P7EP	10	50.30	Y N	
EW8R4QC	1	5.07	Y N	
EW8U6CV	2	16.22	Y N	
EW8U6DF	4	27.83	Y N	
EW8U6EU	2	10.58	Y N	
EW8W9ED	7	53.33	Y N	
EW8W9FC	4	21.60	Y N	
EW8X6SM	2	11.02	Y N	
EW8X6UF	31	103.44	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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
--	--

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
--	---

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	SHIPPER SIGNATURE _____ _____	SHIPPER DATE _____	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.
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SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000416462

 (402)06757163000416462

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Logacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5818846 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No: _____
 Trailer number: TL1900342
 Seal number(s): _____
SCAC: CTII
 Pro Number: 777-6499628-4

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
 MVDP5818846

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EW8X7EA	2	10.14	Y N	
EW8X7GK	8	35.98	Y N	
EW8X9XQ	2	18.75	Y N	
EW8Y4LU	1	3.41	Y N	
EW8Z3PZ	3	9.03	Y N	
EW8Z8LC	1	3.41	Y N	
EW8Z8NZ	2	3.23	Y N	
EW8Z8PW	1	1.66	Y N	
EW9A2EY	5	32.25	Y N	
Grand Total	208	933.32		

777-6499628-4

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: 06757163000416462

 (402)06757163000416462

SHIP TO
 Name: Bed Bath & Beyond #2642 Location #: PHO-VDP
 Address: Phoenix -Legacy SCS
 1511 S. 47th Ave Suite 300, PHO-VDP
 City/State/Zip: Phoenix, AZ 85043
 CID#: MVDP5818846 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1900342
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6499628-4

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
 (check box) underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5818846

Appointment Time AM	Actual Driver Arrival Time AM	Driver Departure Time AM
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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 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet	150390.4	70
		80	ctns	343.29		Bath Accessories	49470	100
		36	ctns	92.46		Bath Towel, Beach Towel	49390	175
		4	ctns	90.36		Comforters, Bedspreads	49017	200
		2	ctns	16.22		Framed Goods	76580 Sub 5	125
		4	ctns	29.74		Panels, Valances	49390	175
		21	ctns	98.15		Rugs	70970-5	125
		1	ctns	5.51		Sheet Set & Pillowcase	49390	175
		60	ctns	257.59		Shower curtain	49385	77.5
2		208		1033.32		Grand Total		

777-6499628-4

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.

Date: 2/6/2020 8:11:53 AM

Bill Of Lading

Page 1 of 5

SHIP FROM		Bill of Lading Number: 06757163000416462
Name: E & E COMPANY LTD - 028372	1901757	 (402)06757163000416462
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#:		

SHIP TO		CARRIER NAME: Central Transport
Name: Bed Bath & Beyond #2642	Location #: PHO-VDP	Responsible Acct.No:
Address: Phoenix -Legacy SCS 1511 S. 47th Ave Suite 300, PHO-VDP		Trailer number: TL1000342
City/State/Zip: Phoenix, AZ 85043		Seal number(s):
CID#: MVDP5818846	FOR: <input type="checkbox"/>	SCAC: CTII
Dept:		Pro Number: 777-6499628-4

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name: Bed Bath & Beyond c/o		
Address: Berman Blake Associates PO Box 9202		
City/State/Zip: Old Bathpage, NY 11804-9002		Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS: BB & B Vendor #: 028372 MVDP5818846	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading
Appointment Time	AM

2 PA

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EW7L7JN	13	28.19	Y	N
EW7L7PD	1	23.58	Y	N
EW7M5SD	1	4.55	P&C# 204	DELIVERY DATE 2-12-2020
EW7M5VA	3	16.09	BBB MGR	N
EW7N5MX	1	6.51	OLTSY SHIPPED	2 PLS RECEIVED 2
EW7N5MZ	3	19.77	OLTSY SHIPPED	208 PLS RECEIVED 207
EW7S6VC	2	15.55	ACTIVE STICKER	PLS
EW7S6XF	2	7.60	ACTIVE STICKER	1 PLS OVER 0 #CTNS DMG 1
EW7W7VZ	12	56.19	OS&D#	2020/2/20/2020
EW7W9QP	3	9.39	OS&D DATE	2-17-20 OS&D TIME 3:07
EW7W9TR	1	5.51	OS&D CONTACT	Internet
EW7X5ZP	6	29.70	Y	N
EW7X6AV	2	7.16	Y	N

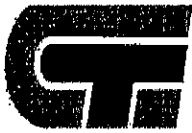
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.	COD Amount: Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
---	--

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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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 U.S. DOT. <i>Also on 2-6-20</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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. <i>Milena 2/6/20 SLC</i>
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1900343



Pro Number
777-6499628-4

Ship Date 2020-02-06	
Reference Number MVDP5818846	
Org 958	DG 861
Freight Terms Freight Charges Are Collect	
P.O. Number EW7L7JN	
SCAC:	

Consignee:
BED BATH - BEYOND % PHOENIX
LEGACY SCS
1511 S 47TH ST STE 300
PHOENIX, AZ 85043

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

Special Instructions

Date: 2/8/2020 8:11:53 AM		Bill Of Lading		Page 1 of 5	
SHIP FROM:			Bill of Lading Number: 06757163000418482		
Name: E & E COMPANY LTD - 028372			Address: 221 Hanson Way Woodland, CA 95776		
City/State/Zip: Woodland, CA 95776			SID#: _____ FOB: <input type="checkbox"/>		
SHIP TO:			CARRIER NAME: Central Transport		
Name: Bed Bath & Beyond #2542			Location # PHO-VDP		
Address: Phoenix -Legacy SCS 1611 S. 47th Ave Suite 300, PHO-VDP			Responsible Acct. No:		
City/State/Zip: Phoenix, AZ 85043			Trailer number: TL1309342		
CID#: MVDP5818846			Seal number(s):		
Dept: _____			SCAC: CTII		
THIRD PARTY FREIGHT CHARGES BILL TO:			Pro Number: 777-6499628-4		
Name: Bed Bath & Beyond c/o			Address: Harman Blake Associates PO Box 9232		
City/State/Zip: Old Ballpage, NY 11804-9002			Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party: _____		
SPECIAL INSTRUCTIONS: R3 & B Vendor #: 028372 MVDP5818846			<input type="checkbox"/> Master Bill of Lading: with attached <input type="checkbox"/> underlying Bills of Lading Appointment Time: _____ AM B/L: 777-6499628-4		
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		
EW7L7JN	13	28.19	Y N		
EW7L7PD	1	23.58	Y N		
EW7M5SD	1	4.65	Y N		
EW7M5VA	3	16.09	Y N		
EW7N5MX	1	5.51	Y N		
EW7N5MZ	3	19.77	Y N		
EW7S6VC	2	15.65	Y N		
EW7S6XF	2	7.60	Y N		
EW7W7VZ	12	58.19	Y N		
EW7W9QP	3	9.39	Y N		
EW7W9TR	1	5.51	Y N		
EW7X5ZP	6	29.70	Y N		
EW7X6AV	2	7.15	Y N		
Where there is discrepancy in value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.			COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).					
RECEIVED, subject to individual commodity rates and conditions. Rates have been agreed upon in writing between the carrier and shipper. If applicable, charges in the rates, pass fixtures and/or US Mail have been validated by the carrier and are payable to the shipper, on request, and to all applicable state and federal regulations.			The carrier shall not be liable for loss or damage to the goods without receipt of freight and all other lawful charges.		
SHIPPER SIGNATURE / DATE <i>Alma Moore</i> 2/6/20		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 <i>Milun 2/6/20 SLC</i>					

Central Transport Delivery Receipt

Firm BED BATH - BEYOND % PHOENIX LEGACY SCS

By *[Signature]*
Shipment received in good order

HUs Received 2

Driver CT-861329 (1901757) Date 2/12/2020

Arrive Time 9:09 AM Depart Time 9:20 AM

Pro Number **777-6499628-4**

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 _____

Date <u>2/12/2020</u>	# And Type of Container _____	# And Type of PCS _____	Exception Type _____
Log # _____	Total _____	Exceptions _____	

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051(2)(i).



Beyond
Vendor Chargeback - Freight Claim

Valid

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 05/22/2020		
Freight Claim # 9486307 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 77766635278A Store Jersey City Bed Bath & Beyond #627 400 Luis Munoz Marin Blvd Jersey City NJ 07302		Pro/Pickup Date 02/27/2020 Delivery Date 03/13/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5057265 FC C/B Inv Dte	PO/Reference# EX2Q5HF	Internal Cl# 1075687		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569286369	ISABEL WB WHT	D	2	\$16.50
0086569350336	BREE WB GREY	D	2	\$16.25
Total Extended Cost				\$65.50
Freight Charge				\$4.59
Total Chargeback Amount				\$70.09

*02/27/2020
CR
25457*



Beyond
Vendor Chargeback - Freight Claim

Vendor 28372 E & E CO., LTD. 45875 NORTHPORT LOOP EAST FREMONT CA 94538 Currency Code USD		C/B Invoice Date 05/22/2020		
Freight Claim # 9486307 Carrier 45829 CENTRAL TRANSPORT Pro/Tracking# 77766635278A Store Jersey City Bed Bath & Beyond #627 400 Luis Munoz Marin Blvd Jersey City NJ 07302		Pro/Pickup Date 02/27/2020 Delivery Date 03/13/2020 Chargeback Reason STC,SLC (SHRT/DAMG)		
Inv# 5057265 FC C/B Inv Dte	PO/Reference# EX7R8KG	Internal Cl# 1075687		
UPC/VIN	Description	S/D	Qty	Unit Cost
0086569286369	ISABEL WB WHT	D	2	\$16.50
0086569350336	BREE WB GREY	D	2	\$18.25
Total Extended Cost				\$65.50
Freight Charge				\$4.59
Total Chargeback Amount				\$70.09

02/27/2020
 CTR
 25457

Date: 2/26/2020 9:47:16 AM **Bill Of Lading** Page 1 of 5

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

Bill of Lading Number: 06757163000425457

 (402)06757163000425457

SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
SCAC: CTII
Pro Number: 777-6663527-8

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: _____
 Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5849370

Appointment Time _____
 AM _____ PM _____

777-6663527-8 B/L
 AM _____ PM _____

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EX2Q5CJ	37	138.44	Y N	
EX7P6QQ	2	7.60	Y N	
EX7R8AA	53	172.37	Y N	
EX7V2NR	13	85.17	Y N	
EX8T2NE	1	1.14	Y N	
EX8T2UL	18	87.31	Y N	
EX8W8YL	4	17.74	Y N	
EX8W8YT	14	80.90	Y N	
EX8Y9PF	5	13.41	Y N	
EX9A3JP	6	22.73	Y N	
EX9A4ME	11	26.81	Y N	
EX9B3JX	17	83.99	Y N	
EX9C3SA	14	65.41	Y N	

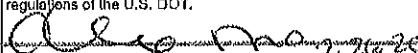
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

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(e)(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.

 2/26/20

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.

 2/26/20

1901048


SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____ FOB:

Bill of Lading Number: 06757163000425457

 (402)06757163000425457

SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
SCAC: CTII
Pro Number: 777-6663527-8

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:
 Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ ture Time _____
 P _____ AM
 F  777-6663527-8 BL Pg 2 _____ PM

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5849370

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EX9C3UT	2	7.60	Y	N	
EX9C7UZ	2	10.58	Y	N	
EX9D7VZ	3	9.27	Y	N	
EX9E6LZ	13	65.17	Y	N	
EX9E6PG	2	6.65	Y	N	
EX9F2UU	7	39.00	Y	N	
EX9F4SJ	4	9.50	Y	N	
EX9F4YT	1	1.43	Y	N	
EX9K4VU	2	16.22	Y	N	
EX9K4WG	8	35.14	Y	N	
EX9K4ZK	2	10.58	Y	N	
EX9K6YL	1	8.11	Y	N	
EX9K6YT	14	58.59	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.

SHIP FROM
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____ FOB:

Bill of Lading Number: 06757163000425457

 (402)06757163000425457

SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
SCAC: CTII
Pro Number: 777-6663527-8

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
 (check box) underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 BB & B Vendor # : 028372
 MVDP5849370

Appointment Time  Time
 AM **777-6663527-8** AM
 PM BL Pg 3 PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
EX9R8EF	17	64.95	Y	N	
EX9U7EY	2	15.42	Y	N	
EX9V2EW	2	8.95	Y	N	
EX9V2FF	1	5.07	Y	N	
EX9Z7AP	5	23.65	Y	N	
EY2A8UQ	1	8.11	Y	N	
EY2A8VD	10	46.80	Y	N	
EY2A8WU	4	17.74	Y	N	
EY2B7EH	16	71.44	Y	N	
EY2B7ER	4	17.74	Y	N	
EY2F4CT	2	8.48	Y	N	
EY2F4HP	1	1.49	Y	N	
EY2F4JQ	6	20.80	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: 2/26/2020 9:47:16 AM **Bill Of Lading** Page 4 of 5

SHIP FROM:
 Name: E & E COMPANY LTD - 028372
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95778
 SID#: _____ FOB:

Bill of Lading Number: 06757163000425457

 (402)06757163000425457

SHIP TO:
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
SCAC: CTII
Pro Number: 777-6663527-8

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
 MVDP5849370

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
EY2F4WQ	3	7.84	Y N	
EY2F4YC	1	5.07	Y N	
EY2G2MS	5	23.27	Y N	777-6663527-8
EY2G2QD	1	5.07	Y N	
Grand Total	337	1432.75		

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 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
3	Pallet			150.00		Pallet	150390.4	70
		225	ctns	921.63		Bath Accessories	49470	100
		36	ctns	111.16		Bath Towel, Beach Towel	49390	175
		4	ctns	70.53		Comforters, Bedspreads	49017	200
		5	ctns	33.93		Framed Goods	76580 Sub 5	125

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

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.

Shipper Signature

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

Bill of Lading Number: 06757163000425457

 (402)06757163000425457

SHIP TO
 Name: Bed Bath & Beyond #2678 Locallon #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
SCAC: CTII
Pro Number: 777-8863527-8

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
 MVDP5849370

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

CARRIER INFORMATION						COMMODITY DESCRIPTION		PACKAGE	
HANDLING UNIT		PACKAGE		WEIGHT	CUBE	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 350	NMFC #	CLASS	
QTY	TYPE	QTY	TYPE						
		4	ctns	23.34		Panels, Valances	49390	175	
		28	ctns	127.27		Rugs	70970-5	125	
		1	ctns	6.94		Sheet Set & Pillowcase	49390	175	
		34	ctns	137.95		Shower curtain	49385	77.5	
3		337		1582.75		Grand Total			

777-6463527-8

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.

Date: 2/26/2020 9:47:16 AM **Bill Of Lading** Page 3 of 5

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

Bill of Lading Number: 06757163000426457

 (402)06757163000426457

SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP6849370 FOB:

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6663527-8

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
 MVDP6849370

Appointment Time: _____ AM/PM
 777-6663527-8 EL Pg 3

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EX9R8EF	17	64.95	Y N	
EX9U7EY	2	16.42	Y N	
EX9V2EW	2	8.95	Y N	
EX9V2FF	1	5.07	Y N	
EX9Z7AP	5	23.65	Y N	
EY2A8UQ	1	8.11	Y N	
EY2A8VD	10	46.8	Y N	
EY2A8WU	16		Y N	
EY2B7EH	4		Y N	
EY2B7ER	4		Y N	
EY2F4CT	2		Y N	
EY2F4HP	1		Y N	
EY2F4JQ	6		Y N	


Handwritten notes:
 DELIVERY DATE 2-11-2020
 4P&C# 2678
 16 BBB MGR
 3 PLTS SHIPPED
 3 CTNS SHIPPED
 EXCEPTIONS YES
 #CTNS SHORT 5
 OS&D # 2026780291
 OS&D DATE 2-11-2020
 3 PLTS RECEIVED
 3 CTNS RECEIVED
 NO #CTNS OVER
 #CTNS DMG 14


Where the rate is dependant on value, shippers are required to state specifically the agreed 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 _____
 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.

Date: 2/26/2020 9:47:16 AM		Bill Of Lading		Page 4 of 5			
SHIP FROM			Bill of Lading Number: 06757163000425457				
Name: E & E COMPANY LTD - 028372 Address: 221 Hanson Way City/State/Zip: Woodland, CA 96776 SID#: _____ FOB: <input type="checkbox"/>			 (402)06757163000425457				
SHIP TO			CARRIER NAME: Central Transport				
Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP Address: c/o Gilbert Company 19 Crows Mill Road, KNJ-VDP City/State/Zip: Keasbey, NJ 08832 CID#: MVDP6849370 FOB: <input type="checkbox"/> Dept: _____			Responsible Acct.No: Trailer number: TL1901048 Seal number(s): SCAC: CTII Pro Number: 777-6663527-8				
THIRD PARTY FREIGHT CHARGES BILL TO:			Freight Charge Terms; (freight charges are prepaid unless marked otherwise)				
Name: Bed Bath & Beyond c/o Address: Berman Blake Associates PO Box 9202 City/State/Zip: Old Bethpage, NY 11804-9002							
SPECIAL INSTRUCTIONS: BB & B Vendor #: 028372 MVDP6849370			Prepaid: <input type="checkbox"/> Collect: X 3rd Party: _____ <input type="checkbox"/> (check box) 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		
EY2F4WQ		3	7.84	Y N			
EY2F4YC		1	5.07	Y N			
EY2G2MS		5	23.27	Y N	777-666-3527-8		
EY2G2QD		1	5.07	Y N			
Grand Total		337	1432.75				
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		PACKAGE	
				Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300			
QTY	TYPE	QTY	TYPE	WEIGHT	CUBE	NMFC #	CLASS
3	Pallet			150.00		150390,4	70
		225	ctns	921.63		49470	100
		36	ctns	111.16		49390	175
		4	ctns	70.53		49017	200
		5	ctns	33.93		76580 Sub 5	125
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____				COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).							
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.				The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.			
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.			
				Shipper Signature			


SHIP FROM		Bill of Lading Number: 06757163000425457	
Name:	E & E COMPANY LTD - 028372	 (402)06757163000425457	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:	FOB: <input type="checkbox"/>		
SHIP TO		CARRIER NAME: Central Transport	
Name:	Bed Bath & Beyond #2678	Location #:	KNJ-VDP
Address:	c/o Gilbert Company 19 Crows Mill Road, KNJ-VDP		
City/State/Zip:	Keasbey, NJ 08832		
CID#:	MVDP5849370	FOB:	<input type="checkbox"/>
Dept:			
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		
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
BB & B Vendor #: 028372 MVDP5849370		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	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(a) of NMFC Item 380.</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		4	ctns	23.34		Panels, Valances	49390	175
		28	ctns	127.27		Rugs	70970-5	125
		1	ctns	6.94		Sheet Set & Pillowcase	49390	175
		34	ctns	137.95		Shower curtain	49385	77.5
3		337		1582.75		Grand Total		

777-6663527-8

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"		COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).			
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.		The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.		Shipper Signature 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 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: 06757163000425457

 (402)06757163000425457


SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
 SCAC: C'II
 Pro Number: 777-6663527-8

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
 (check box) underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 BB & B Vendor #: 028372
 MVDP5849370

Appointment Time _____
 AM _____
 PM _____

 777-6663527-8 B/L

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
EX2Q5CJ	37	138.44	Y N
EX7P6QQ	2	7.60	Y N
EX7R8AA	53	172.37	Y N
EX7V2NR	13	85.17	Y N
EX8T2NE	1	1.14	Y N
EX8T2UL	18	87.31	Y N
EX8W8YL	4	17.74	Y N
EX8W8YT	14	80.90	Y N
EX8Y9PF	5	13.41	Y N
EX9A3JP	6	22.73	Y N
EX9A4ME	11	26.81	Y N
EX9B3JX	17	83.99	Y N
EX9C3SA	14	65.41	Y N

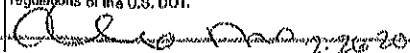
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

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

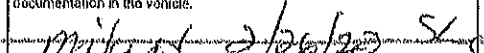
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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.

 2/26/20

Trailer Loaded: Freight Counted:
 By Shipper By Shipper
 By Driver By Driver/pallets used 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.

 2/26/20

Date: 2/26/2020 9:47:16 AM **Bill Of Lading** Page 2 of 5

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

Bill of Lading Number: 06757163000425457

 (402)06757163000425457


SHIP TO
 Name: Bed Bath & Beyond #2678 Location #: KNJ-VDP
 Address: c/o Gilbert Company
 19 Crows Mill Road, KNJ-VDP
 City/State/Zip: Keasbey, NJ 08832
 CID#: MVDP5849370 FOB:
 Dept: _____

CARRIER NAME: Central Transport
 Responsible Acct.No:
 Trailer number: TL1901048
 Seal number(s):
 SCAC: CTII
 Pro Number: 777-6663527-8

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Bed Bath & Beyond c/o
 Address: Bernan 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
 MVDP5849370

Master Bill of Lading: with attached underlying Bills of Lading
 Appointment Time _____ Future Time _____
 A _____ AM
 F  777-6663527-8 BL Pg 2 PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
EX9C3UT	2	7.60	Y N	
EX9C7UZ	2	10.58	Y N	
EX9D7VZ	3	9.27	Y N	
EX9E6LZ	13	65.17	Y N	
EX9E6PG	2	6.65	Y N	
EX9F2UU	7	39.00	Y N	
EX9F4SJ	4	9.50	Y N	
EX9F4YT	1	1.43	Y N	
EX9K4VU	2	16.22	Y N	
EX9K4WG	8	35.14	Y N	
EX9K4ZK	2	10.58	Y N	
EX9K6YL	1	8.11	Y N	
EX9K6YT	14	58.59	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/pallets

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.

Shipper Signature

SHIP FROM		Bill of Lading Number: 0728560214905
Name: RUSSO SPD Address: 105 NEW ERA DRIVE City/State/Zip: SOUTH PLAINFIELD, NJ 07080 SID#:		
FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: CTI
Name: 08832121856 (13) Location #:		Trailer number: 5313019R
Address: 19 CROWS MILL RD		Seal number(s): 07449381
City/State/Zip: KEASBEY, NJ 08832		
CID#:		
FOB: <input type="checkbox"/>		

THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC:
Name:		Pro number: 072-0214905-2
Address:		
City/State/Zip:		

SPECIAL INSTRUCTIONS:		Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i>
		Prepaid _____ Collect <u>X</u> 3 rd Party _____
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
00197186703170358			<input type="radio"/> Y	<input type="radio"/> N	
00310090612328665			<input type="radio"/> Y	<input type="radio"/> N	
00310090612328672			<input type="radio"/> Y	<input type="radio"/> N	
00310090612328689			<input type="radio"/> Y	<input type="radio"/> N	
GRAND TOTAL					

CARRIER INFORMATION					
HANDLING UNIT	PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION
QTY	TYPE	QTY	TYPE		<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 7 of NMFCA Form 300</small>
47	CTN			645	GAMES OR TOYS
23	SKD			9294	UTENSILS
1	CTN			1091	STEEL ART
71				11030	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: \$ _____
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).		Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>

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 <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.</small> N. Russo-03/06/2020	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE <small>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. <i>Property described above is critical in need of care, special handling.</i></small>
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DELIVERY TRAILER MANIFEST

Terminal: 072
 Trailer Number: 5313019R
 Weight: 11519
 HUs: 26
 Closed By: RUSSO, NICK
 Remarks:

Dest: BBB 2678 (072T03)
 Door: 2

Date: 03/06/2020
 Time: 07:39

BED BATH BEYOND



0722678030620073905

Received By: _____
 Name: _____
 Date: _____



M#: Q072-0214905-2

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
148-5420592-0	HU	381	THERMOS LLC Loader CT-072150	BED BATH BEYOND 2678	801603	EY5L6GH	
<input type="checkbox"/> 148-5420592 01					148-5420592 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-5542120-3	HU	405	EDGE CRAFT CORPORATIO Loader CT-072107	BED BATH BEYOND 2678	00878770004769182	EY3T6ZQ	MVDP5850952
<input type="checkbox"/> 148-5542120 01					148-5542120 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-7757592-9	HU	072	TATARA GROUP Loader NRUSSO	BED BATH BEYOND 2678	MVDP5850224		MVDP5850224
<input type="checkbox"/> 148-7757592 01					148-7757592 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-7809743-6	HU	602	TABLECRAFT PRODUCTS Loader CT-072107	BED BATH BEYOND 2678	555-6801166-6	01-46976-00	MVDP5841144
<input type="checkbox"/> 148-7809743 01					148-7809743 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-7810227-7	HU	602	WEIMAN % LESANT LOG Loader CT-072107	BED BATH - BEYOND PO	4409302252007		MVDP5843336
<input type="checkbox"/> 148-7810227 01					148-7810227 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-7913128-3	HU	436	LIBBEY GLASS Loader CT-072107	BED BATH BEYOND 2678	00310090612328689	EX6C6VR	MVDP5850831
<input type="checkbox"/> 148-7913128 01					148-7913128 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
148-8245578-6	HSS	923	CARTERS%OSHKOSH DC67 Loader CT-072155	BED BATH BEYOND 2678	00197186703170358	EX7K2XP	MVDP5847090
<input type="checkbox"/> 148-8245578 01					148-8245578 01:		S & D <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 02					148-8245578 02:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 03					148-8245578 03:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 04					148-8245578 04:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 05					148-8245578 05:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 06					148-8245578 06:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 07					148-8245578 07:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 08					148-8245578 08:		<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> 148-8245578 09					148-8245578 09:		<input type="checkbox"/> <input type="checkbox"/>
148-9105955-3	HU	799	SDI TECHNOLOGIES Loader	BED BATH - BEYOND PO	00475322001352576	EY3T7AU	MVDP5853879
							S & D <input type="checkbox"/> <input type="checkbox"/>

DELIVERY TRAILER MANIFEST

Terminal: 072
 Trailer Number: 5313019R
 Weight: 11519
 HUs: 26
 Closed By: RUSSO, NICK
 Remarks:

Dest: BBB 2678 (072T03)
 Door: 2

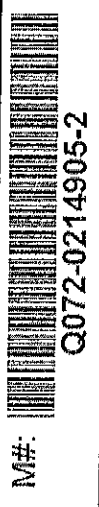
Date: 03/06/2020
 Time: 07:39

BED BATH BEYOND



0722678030620073905

Received By: _____
 Name: _____
 Date: _____



M#: Q072-0214905-2

Pro	Flags	Orig	Shipper	Consignee	BOL #	PO #	Ref #
<input type="checkbox"/> 148-9105955 01		CT-072155			148-9105955 01: <input type="checkbox"/>		
148-9666127-0	HU	442	STEP 2 COMPANY Loader CT-072140 CT-072140	BED BATH BEYOND 2678	10921146	EY5C5TX	MVDP5851294
<input type="checkbox"/> 148-9666127 01					148-9666127 01: <input type="checkbox"/>	S & D	
<input type="checkbox"/> 148-9666127 02					148-9666127 02: <input type="checkbox"/>		
148-9707925-8	NTN	276	CROSCILL Loader CT-072132 CT-072132 CT-072132	BED BATH BEYOND 2678	00830130003701437	EY3H3FS	MVDP5854227
<input type="checkbox"/> 148-9707925 01					148-9707925 01: <input type="checkbox"/>	S & D	
<input type="checkbox"/> 148-9707925 02					148-9707925 02: <input type="checkbox"/>		
<input type="checkbox"/> 148-9707925 03					148-9707925 03: <input type="checkbox"/>		
777-5642097-0	HU	282	BONA US Loader CT-072107	BED BATH BEYOND 2678	6635	EY3V7LP	MVDP5854860
<input type="checkbox"/> 777-5642097 01					777-5642097 01: <input type="checkbox"/>	S & D	
777-6663527-8	HU	958	E-E CO LTD Loader CT-072107 CT-072107 CT-072107	BED BATH BEYOND 2678	06757163000425457	EX9R8EF	MVDP5849370
<input type="checkbox"/> 777-6663527 01					777-6663527 01: <input type="checkbox"/>	S & D	
<input type="checkbox"/> 777-6663527 02					777-6663527 02: <input type="checkbox"/>		
<input type="checkbox"/> 777-6663527 03					777-6663527 03: <input type="checkbox"/>		
777-6678131-2	HU	631	HOPE COMPANY Loader CT-072150	BED BATH BEYOND 2678	005133022720154010		MVDP5851900
<input type="checkbox"/> 777-6678131 01					777-6678131 01: <input type="checkbox"/>	S & D	



Pro Number
777-6663527-8

Ship Date
2020-02-26

Reference Number
MVDP5849370

Org DC
958 072

Freight Terms
Freight Charges Are Collect

P.O. Number
EX9R8EF

SCAC:

Consignee:
BED BATH BEYOND 2678 %
GILBERT CO
19 CROWS MILL RD
KEASBEY, NJ 08832

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

Special Instructions

Date: 2/26/2020 9:47:16 AM **Bill Of Lading** Page 1 of 5

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

SHIP TO: Bed Bath & Beyond #2678 Location #: KNJ-VDP
Address: c/o Gilbert Company
19 Crows Mill Road, KNJ-VDP
City/State/Zip: Keasbey, NJ 08832
CID#: MVDP5849370 FOB:

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

SPECIAL INSTRUCTIONS:
BB & B Vendor #: 028372
MVDP5849370

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

Appointment Time: _____ AM/PM
777-6663527-8 B/L AM/PM

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
EX2Q6CJ	37	138.44	Y	N
EX7P6CQ	2	7.60	Y	N
EX7R8AA	53	172.37	Y	N
EX7V2NR	13	85.17	Y	N
EX8T2NE	1	1.14	Y	N
EX8T2UL	18	87.31	Y	N
EX8W6YL	4	17.74	Y	N
EX8W8YT	14	80.80	Y	N
EX8Y8PF	5	13.41	Y	N
EX9A3JP	8	22.73	Y	N
EX9A4ME	11	26.81	Y	N
EX9B3JX	17	83.99	Y	N
EX9C3SA	14	65.41	Y	N

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14708(e)(1)(A) and (B).

SHIPPER SIGNATURE / DATE: *[Signature]* 2/26/20

Carrier Signature / Pickup Date: *[Signature]* 2/26/20

Central Transport Delivery Receipt

Firm: BED BATH BEYOND 2678 % GILBERT CO

By: *[Signature]*
Shipment received in good order

HUs Received: 3

Driver: CT-072135 (5313019R) Date: 3/6/2020

Arrive Time: 10:09 AM Depart Time: 10:09 AM

Pro Number **777-6663527-8**

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: _____

Date	# And Type of Container	# And Type of PCS	Exception Type
3/6/2020			
Log #			
Total Exceptions			

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051(2)(f).