

Date: 3/13/2020 1:43:18 PM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000431595	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Hub Group	
Name:	Macy's Home MMG Martinsburg DC	DC#:	MB
		Div.:	
Address:	333 Caperton Blvd	Trailer number:	hgju513486
		Seal number(s):	9605150
City/State/Zip:	Martinsburg, WV 25403	SCAC:	HUBG
SID#:		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:	Macy's c/o Hub Group	Prepaid:	<input type="checkbox"/>
Address:	2000 Clearwater Drive	Collect:	<input type="checkbox"/>
		3rd Party:	<input checked="" type="checkbox"/>
City/State/Zip:	Oak Brook, IL 60523	<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 50660963		1:00 AM	1:15 AM
		Driver Departure Time	1:55 AM

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
2105532	525	4982.29	Y N	06757163000430352	MB
Grand Total	525	4982.29			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
13	Pallet			650.00		Pallet		70
		525	ctns	4982.29		Comforters, Bedspreads	49017	200
13				5632.29		Grand Total		

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


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 DOT. <i>Wesley M. O. 3/13/20</i>	SHIPPER SIGNATURE <i>Adam Jones</i>
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces
	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. <i>Adam Jones 3/13</i>

Date: 3/13/2020 1:43:13 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430352	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757163000430352	
SHIP TO		CARRIER NAME: Hub Group	
Name: Macys Home Store Martinsburg Location #: MB DC Address: 333 Caperton Blvd City/State/Zip: Martinsburg, WV 25403 CID#: _____ Dept: 0792		Responsible Acct.No: _____ Trailer number: hglu513486 Seal number(s): 9605160	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: HUBG	
Name: Macy's c/o Hub Group Address: 2000 Clearwater Drive City/State/Zip: Oak Brook, IL 60523		Pro Number: _____ Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: _____ 3rd Party: <input checked="" type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 50660983 Packing List is Attached		Appointment Time: <input type="checkbox"/> AM <input type="checkbox"/> PM Actual Driver Arrival Time: _____ AM _____ PM Driver Departure Time: _____ AM _____ PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2105532	525	4982.29	Y N	
Grand Total	525	4982.29		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
13	Pallet			650.00		Pallet		
		525	ctns	4982.29		Comforters, Bedspreads	49017	200
13		525		5632.29		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">Shipper Signature _____</div>
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME STORE MARTINSBURG DC

Ship Date: 03/13/2020

SHIP FROM:

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

BILL TO:

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

SHIP TO:

MACYS HOME STORE MARTINSBURG DC
333 CAPERTON BLVD
MARTINSBURG, WV 25403
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2105532	N/A	MCC10-1428	086569247148	Sherpa Comforter	EA	1	84	84	84	84
2105532	N/A	MCC10-1429	086569247162	Sherpa Comforter	EA	1	97	97	97	97
2105532	N/A	MCC10-1431	086569247261	Sherpa Comforter	EA	1	99	99	99	99
2105532	N/A	MCC10-1442	086569247469	Sherpa Comforter	EA	1	51	51	51	51
2105532	N/A	MCC10-1443	086569247421	Sherpa Comforter	EA	1	95	95	95	95
2105532	N/A	MCC10-1446	086569247445	Sherpa Comforter	EA	1	84	84	84	84
2105532	MCC10588	MCC10-588	086569054302	Sherpa Comforter	EA	1	15	15	15	15

Total Weight: 4982.29
 Total Quantity Ordered: 525
 Total Cartons Ordered: 525
 Total Quantity Shipped: 525
 Total Cartons Shipped: 525

Date: 3/12/2020 8:28:53 AM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000431212	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Hub Group	
Name:	Maoy's Home MMG Martinsburg DC	DC#:	MB
		Div.:	
Address:	333 Caperton Blvd	Trailer number:	HGIU 633760
		Seal number(s):	9605174
City/State/Zip:	Martinsburg, WV 25403	SCAC:	HUBG
SID#:		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:	Macy's c/o Hub Group	Prepaid:	<input type="checkbox"/>
Address:	2000 Clearwater Drive	Collect:	<input type="checkbox"/>
		3rd Party:	<input checked="" type="checkbox"/>
City/State/Zip:	Oak Brook, IL 60523	<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 50660961		8:00 AM PM	7:30 AM PM
		Driver Departure Time	8:35 AM PM

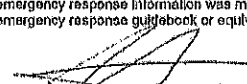
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
2105532	419	4847.88	Y	N	06757163000430369	MB	
2105532	435	4831.65	Y	N	06757163000430680	MB	
Grand Total	854	9679.53					

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 35D</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
26	Pallet			1300.00		Pallet		70
		854	ctns	9679.53		Comforters, Bedspreads	49017	200
26				10979.53		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).


RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT. <i>Also Mo 3-12-20</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 DOT emergency response guidebook or equivalent documentation in the vehicle.  3-12-20
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Date: 3/12/2020 8:28:45 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430680	
Name:	E & E COMPANY LTD	 (402)06757163000430680	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:		FOB: <input type="checkbox"/>	CARRIER NAME: Hub Group
SHIP TO		Responsible Acct.No:	
Name:	Macy's Home Store Martinsburg Location #: MB DC	Trailer number: HGIU 633760	
Address:	333 Caperton Blvd	Seal number(s): 9605174	
City/State/Zip:	Martinsburg, WV 25403	SCAC: HUBG	
CID#:		Pro Number:	
Dept:	0792	FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:	Macy's c/o Hub Group	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	
Address:	2000 Clearwater Drive	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
City/State/Zip:	Oak Brook, IL 60523	Appointment Time	Actual Driver Arrival Time
SPECIAL INSTRUCTIONS:		AM	AM
Load #: 50660961		PM	PM
Packing List is Attached		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2105532	435	4831.65	Y N	
Grand Total	435	4831.65		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
13	Pallet			650.00		Pallet		
		435	ctns	4831.65		Comforters, Bedspreads	49017	200
13		435		5481.65		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Shipper Signature

Customer: MACYS HOME STORE MARTINSBURG DC

Ship Date: 03/12/2020

SHIP FROM:

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

BILL TO:

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

SHIP TO:

MACYS HOME STORE MARTINSBURG DC
333 CAPERTON BLVD
MARTINSBURG, WV 25403
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2105532	N/A	MCC10-1436	086569247230	Sherpa Comforter	EA	1	60	60	60	60
2105532	N/A	MCC10-1444	086569247377	Sherpa Comforter	EA	1	173	173	173	173
2105532	N/A	MCC10-1447	086569247384	Sherpa Comforter	EA	1	202	202	202	202

Total Weight: 4831.65
 Total Quantity Ordered: 435
 Total Cartons Ordered: 435
 Total Quantity Shipped: 435
 Total Cartons Shipped: 435

Date: 3/12/2020 8:28:45 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430680	
Name:	E & E COMPANY LTD	 (402)06757163000430680	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:		FOB: <input type="checkbox"/>	CARRIER NAME: Hub Group
SHIP TO		Responsible Acct.No:	
Name:	Macy's Home Store Martinsburg Location #: MB DC	Trailer number: HGIU 633760	
Address:	333 Caperton Blvd	Seal number(s): 9605174	
City/State/Zip:	Martinsburg, WV 25403	SCAC: HUBG	
CID#:		Pro Number:	
Dept:	0792	FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:	Macy's c/o Hub Group	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: X	
Address:	2000 Clearwater Drive	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
City/State/Zip:	Oak Brook, IL 60523	Appointment Time	Actual Driver Arrival Time
SPECIAL INSTRUCTIONS: Load #: 50660961		AM	AM
Packing List is Attached		PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2105532	435	4831.65	Y N	
Grand Total	435	4831.65		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 309</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
13	Pallet			650.00		Pallet		
		435	ctns	4831.65		Comforters, Bedspreads	49017	200
13		435		5481.65		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME STORE MARTINSBURG DC

Ship Date: 03/12/2020

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

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

SHIP TO:
MACYS HOME STORE MARTINSBURG DC
333 CAPERTON BLVD
MARTINSBURG, WV 25403
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2105532	N/A	MCC10-1432	086569247315	Sherpa Comforter	EA	1	105	105	105	105
2105532	N/A	MCC10-1434	086569247285	Sherpa Comforter	EA	1	17	17	17	17
2105532	N/A	MCC10-1441	086569247360	Sherpa Comforter	EA	1	76	76	76	76
2105532	N/A	MCC10-1445	086569249401	Sherpa Comforter	EA	1	107	107	107	107
2105532	N/A	MCC10-1448	086569249418	Sherpa Comforter	EA	1	114	114	114	114

Total Weight: 4847.88
 Total Quantity Ordered: 419
 Total Cartons Ordered: 419
 Total Quantity Shipped: 419
 Total Cartons Shipped: 419

Date: 3/11/2020 11:24:36 AM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000430703		
Name:	E & E COMPANY LTD			
Address:	221 Hanson Way			
City/State/Zip:	Woodland, CA 95776			
SID#:		FOB: <input type="checkbox"/>		
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING		
Name:	Macys /Bloom Consolidation Center	DC#:		
		Div.		
Address:	14141 Alondra Boulevard	Trailer number:	L7624	
		Seal number(s):	9605108	
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC:	LEGS	
SID#:		Pro Number:	N/A	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:		
Name:		Prepaid:	<input type="checkbox"/>	
Address:		Collect:	<input checked="" type="checkbox"/>	
City/State/Zip:		3rd Party:	<input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 50662076		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING		
		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
		9:00 AM	11:30 AM	12:00 AM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
2183610	3	18.51	Y	N	06757163000430567	DV	
2183610	12	99.16	Y	N	06757163000430574	GN	
2183610	14	95.65	Y	N	06757163000430604	JP	
2183610	14	91.46	Y	N	06757163000430628	ST	
2183610	12	86.28	Y	N	06757163000430598	HU	
2097711	64	654.19	Y	N	06757163000430505	SW	
2105532	270	2887.34	Y	N	06757163000430659	CD	
2183610	7	44.26	Y	N	06757163000430581	HA	
2183610	25	180.23	Y	N	06757163000430611	SC	
2183610	11	66.62	Y	N	06757163000430635	SW	
2105532	267	2719.13	Y	N	06757163000430666	MB	
2183588	1	9.25	Y	N	06757163000430642	MB	
Grand Total	700	6952.08					

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 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/Placas	
		CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.	
		<i>Josmet</i> 3/11/20	

Date: 3/11/2020 11:24:36 AM

Master Bill Of Lading

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HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 366</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
27	Pallet			1350.00		Pallet		70
		601	ctns	6260.66		Comforters, Bedspreads	49017	200
		99	ctns	691.42		Shower curtain	49385	77.5
27				8302.08		Grand Total		

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

_____ per _____

COD Amount \$ _____

Fee Terms:

Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:


 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets sold to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIP FROM		Bill of Lading Number: 06757163000430628	
Name: E & E COMPANY LTD		 (402)06757163000430628	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: NEW LEGEND TRUCKING	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: L7624	
VENDOR:		Seal number(s): 9605108	
FOB: <input type="checkbox"/>		SCAC: LEGS	
SHIP TO		Pro Number: N/A	
Name: Macys Home Store Stone Mountain DC Location #: ST		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address: 4401 Sarr Parkway		Prepaid: Collect: X 3rd Party:	
City/State/Zip: Stone Mountain, GA 30083		<input type="checkbox"/> Master Bill of Lading: with attached	
CID#:		(check box) underlying Bills of Lading	
Dept: 0602 FOB: <input type="checkbox"/>		Appointment Time Actual Driver Arrival Time Driver Departure Time	
THIRD PARTY FREIGHT CHARGES BILL TO:		AM AM AM	
Name:		PM PM PM	
Address:		SPECIAL INSTRUCTIONS:	
City/State/Zip:		Load #: 50662076	
Packing List is Attached		Grand Total	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2183610	14	91.46	Y N	
Grand Total	14	91.46		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		14	ctns	91.46		Shower curtain	49385	77.5
1		14		141.46		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	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	SHIPPER SIGNATURE / DATE <small>This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>	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 DOT emergency response guidebook or equivalent documentation in the vehicle.</small>
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Customer: MACYS HOME STORE STONE MOUNTAIN DC

Ship Date: 03/11/2020

SHIP FROM:

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

BILL TO:


MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:

MACYS HOME STORE STONE MOUNTAIN
DC
4401 SARR PARKWAY
STONE MOUNTAIN, GA 30083
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	9	3	9	3
2183610	N/A	MCH70-1140	086569170392	Elm Waffle Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1141	086569170408	Elm Waffle Shower Curtain	EA	3	3	1	3	1
2183610	MCH70977	MCH70-977	086569111128	Paris Shower Curtain	EA	3	6	2	6	2
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	3	1	3	1
2183610	MCH70998	MCH70-998	086569111333	Delliah Shower Curtain	EA	3	6	2	6	2
2183610	N/A	SWV70-0007H	086569283391	Blossom Shower Curtain	EA	3	9	3	9	3

Total Weight: 91.46
 Total Quantity Ordered: 42
 Total Cartons Ordered: 14
 Total Quantity Shipped: 42
 Total Cartons Shipped: 14

SHIP FROM		Bill of Lading Number: 06757163000430505	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: PHONE: VENDOR:		 (402)06757163000430505	
SHIP TO Name: Macys Home Store South Windsor Location #: SW DC Address: 301 Governors Hwy City/State/Zip: South Windsor, CT 06074 CID#: Dept: 0792		CARRIER NAME: NEW LEGEND TRUCKING Responsible Acct.No: Traller number: L7624 Seal number(s): 9605108 SCAC: LEGS Pro Number: N/A	
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: X 3rd Party:	
SPECIAL INSTRUCTIONS: Load #: 50662076 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2097711	64	654.19	Y N	
Grand Total	64	654.19		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		64	ctns	654.19		Comforters, Bedspreads	49017	200
2		64		754.19		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME STORE SOUTH WINDSOR DC

Ship Date: 03/11/2020

SHIP FROM:

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

BILL TO:

MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:

MACYS HOME STORE SOUTH WINDSOR
DC
301 GOVERNORS HWY
SOUTH WINDSOR, CT 06074
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Cins Ordered	Qty Shipped	Cins Shipped
2097711	N/A	MCC10-1428	086569247148	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1429	086569247162	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1430	086569247193	Sherpa Comforter	EA	1	2	2	2	2
2097711	N/A	MCC10-1431	086569247261	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1432	086569247315	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1433	086569247223	Sherpa Comforter	EA	1	2	2	2	2
2097711	N/A	MCC10-1434	086569247285	Sherpa Comforter	EA	1	1	1	1	1
2097711	N/A	MCC10-1435	086569247339	Sherpa Comforter	EA	1	1	1	1	1
2097711	N/A	MCC10-1440	086569247414	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1441	086569247360	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1442	086569247469	Sherpa Comforter	EA	1	2	2	2	2
2097711	N/A	MCC10-1443	086569247421	Sherpa Comforter	EA	1	9	9	9	9
2097711	N/A	MCC10-1444	086569247377	Sherpa Comforter	EA	1	8	8	8	8
2097711	N/A	MCC10-1445	086569249401	Sherpa Comforter	EA	1	6	5	5	5
2097711	N/A	MCC10-1446	086569247445	Sherpa Comforter	EA	1	4	4	4	4
2097711	N/A	MCC10-1447	086569247384	Sherpa Comforter	EA	1	3	3	3	3
2097711	N/A	MCC10-1448	086569249418	Sherpa Comforter	EA	1	2	2	2	2
2097711	N/A	MCC10-586	086569054241	Sherpa Comforter	EA	1	4	4	4	4
2097711	N/A	MCC10-587	086569054272	Sherpa Comfor	EA	1	3	3	3	3

Total Weight: 654.19
 Total Quantity Ordered: 64
 Total Cartons Ordered: 64
 Total Quantity Shipped: 64
 Total Cartons Shipped: 64

Date: 3/11/2020 11:24:24 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430604	
Name:	E & E COMPANY LTD	 (402)06757163000430604	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:	FOB: <input type="checkbox"/>	CARRIER NAME: NEW LEGEND TRUCKING	
SHIP TO		Responsible Acct.No:	
Name:	Macys Home Store Joppa DC	Location #:	JP
Address:	3300 Fashion Way		
City/State/Zip:	Joppa, MD 21085		
CID#:			
Dept:	0602	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS: Load #: 50662076		Prepaid: <input type="checkbox"/> Collect: X 3rd Party: <input type="checkbox"/>	
Packing List Is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2183610	14	95.65	Y N	
Grand Total	14	95.65		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		14	ctns	95.65		Shower curtain	49385	77.5
1		14		145.65		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 _____"

GOD 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 rules, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

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

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

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Customer: MACYS HOME STORE JOPPA DC

Ship Date: 03/11/2020


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

BILL TO:
MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:
MACYS HOME STORE JOPPA DC
3300 FASHION WAY
JOPPA, MD 21085
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1140	086569170392	Elm Waffle Shower Curtain	EA	3	9	3	9	3
2183610	N/A	MCH70-1141	086569170408	Elm Waffle Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1493	086569263377	Victorla Shower Curtain	EA	3	3	1	3	1
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	3	1	3	1
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	3	1	3	1
2183610	MCH70998	MCH70-998	086569111333	Delliah Shower Curtain	EA	3	12	4	12	4
2183610	N/A	SWV70-0005H	086569263766	100% Polyester Woven Jacquard	EA	3	3	1	3	1

Total Weight: 95.65
 Total Quantity Ordered: 42
 Total Cartons Ordered: 14
 Total Quantity Shipped: 42
 Total Cartons Shipped: 14

SHIP FROM		Bill of Lading Number: 06757163000430659	
Name: E & E COMPANY LTD		 (402)06757163000430659	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: NEW LEGEND TRUCKING	
VENDOR:		Responsible Acct.No:	
SHIP TO		Trailer number: L7624	
Name: Macys Home Store Cheshire DC Location #: CD		Seal number(s): 9605108	
Address: 475 Knottler Drive		SCAC: LEGS	
City/State/Zip: Cheshire, CT 06410		Pro Number: N/A	
CID#:			
Dept: 0792			
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS:		Appointment Time	
Load #: 50662076		Actual Driver Arrival Time	
Packing List Is Attached		Driver Departure Time	
		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2105532	270	2887.34	Y N	
Grand Total	270	2887.34		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage 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
8	Pallet			400.00		Pallet		
		270	ctns	2887.34		Comforters, Bedspreads	49017	200
8		270		3287.34		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	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 DOT emergency response guidebook or equivalent documentation in the vehicle.

Customer: MACYS HOME STORE CHESHIRE DC

Ship Date: 03/11/2020


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

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

SHIP TO:
MACYS HOME STORE CHESHIRE DC
475 KNOTTER DRIVE
CHESHIRE, CT 06410
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Cins Ordered	Qty Shipped	Cins Shipped
2105532	N/A	MCC10-1428	086569247148	Sherpa Comforter	EA	1	12	12	12	12
2105532	N/A	MCC10-1429	086569247162	Sherpa Comforter	EA	1	20	20	20	20
2105532	N/A	MCC10-1430	086569247193	Sherpa Comforter	EA	1	7	7	7	7
2105532	N/A	MCC10-1431	086569247261	Sherpa Comforter	EA	1	13	13	13	13
2105532	N/A	MCC10-1432	086569247315	Sherpa Comforter	EA	1	17	17	17	17
2105532	N/A	MCC10-1433	086569247223	Sherpa Comforter	EA	1	9	9	9	9
2105532	N/A	MCC10-1434	086569247285	Sherpa Comforter	EA	1	5	5	5	5
2105532	N/A	MCC10-1435	086569247339	Sherpa Comforter	EA	1	4	4	4	4
2105532	N/A	MCC10-1436	086569247230	Sherpa Comforter	EA	1	7	7	7	7
2105532	N/A	MCC10-1440	086569247414	Sherpa Comforter	EA	1	9	9	9	9
2105532	N/A	MCC10-1441	086569247360	Sherpa Comforter	EA	1	13	13	13	13
2105532	N/A	MCC10-1442	086569247469	Sherpa Comforter	EA	1	8	8	8	8
2105532	N/A	MCC10-1443	086569247421	Sherpa Comforter	EA	1	12	12	12	12
2105532	N/A	MCC10-1444	086569247377	Sherpa Comforter	EA	1	23	23	23	23
2105532	N/A	MCC10-1445	086569249401	Sherpa Comforter	EA	1	14	14	14	14
2105532	N/A	MCC10-1446	086569247446	Sherpa Comforter	EA	1	12	12	12	12
2105532	N/A	MCC10-1447	086569247384	Sherpa Comforter	EA	1	30	30	30	30
2105532	N/A	MCC10-1448	086569249418	Sherpa Comforter	EA	1	21	21	21	21
2105532	MCC10586	MCC10-586	086569054241	Sherpa Comforter	EA	1	9	9	9	9
2105532	MCC10587	MCC10-587	086569054272	Sherpa Comforter	EA	1	15	15	15	15
2105532	MCC10588	MCC10-588	086569054302	Sherpa Comforter	EA	1	10	10	10	10

Total Weight: 2887.34
 Total Quantity Ordered: 270
 Total Cartons Ordered: 270
 Total Quantity Shipped: 270
 Total Cartons Shipped: 270

SHIP FROM		Bill of Lading Number: 06757163000430581	
Name: E & E COMPANY LTD	Address: 221 Hanson Way	 (402)06757163000430581	
City/State/Zip: Woodland, CA 95776	SID#:		
PHONE:	VENDOR:	FOB: <input type="checkbox"/>	CARRIER NAME: NEW LEGEND TRUCKING
SHIP TO		Responsible Acct.No:	
Name: Macys Home Store Hayward DC	Location #: HA	Trailer number: L7624	
Address: 28701 Hall Road	City/State/Zip: Hayward, CA 94545	Seal number(s): 9605108	
CID#:	Dept: 0602	SCAC: LEGS	
	FOB: <input type="checkbox"/>	Pro Number: N/A	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:	Address:	Prepaid: <input type="checkbox"/>	Collect: X
City/State/Zip:		3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 50662076		Master Bill of Lading: with attached underlying Bills of Lading	
Packing List Is Attached		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2183610	7	44.26	Y N	
Grand Total	7	44.26		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		7	ctns	44.26		Shower curtain	49385	77.5
1		7		94.26		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 _____"

GOD Amount: _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

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

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

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

Shipper Signature _____

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded:	Freight Counted:	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
	<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	

Customer: MACYS HOME STORE HAYWARD DC

Ship Date: 03/11/2020

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

BILL TO:
MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:
MACYS HOME STORE HAYWARD DC
28701 HALL ROAD
HAYWARD, CA 94545
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1141	086569170408	Elm Waffle Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1143	086569170446	Johnston Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1493	086569263377	Victoria Shower Curtain	EA	3	3	1	3	1
2183610	MCH70998	MCH70-998	086569111333	Dellah Shower Curtain	EA	3	3	1	3	1
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight: 44.26
 Total Quantity Ordered: 21
 Total Cartons Ordered: 7
 Total Quantity Shipped: 21
 Total Cartons Shipped: 7

Date: 3/11/2020 11:24:10 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430587										
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757163000430567										
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING										
Name: Macys Home Store Denver DC Location #: DV Address: 510 East 51st Avenue City/State/Zip: Denver, CO 80216 CID#: _____ Dept: 0602		Responsible Acct.No: _____ Trailer number: L7624 Seal number(s): 9805108 SCAC: LEGS Pro Number: N/A										
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)										
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____										
SPECIAL INSTRUCTIONS: Load #: 60662076 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> </tr> <tr> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
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
2183610	3	18.51	Y N	
Grand Total	3	18.51		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		3	ctns	18.51		Shower curtain	49385	77.5
1		3		68.51		Grand Total		

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

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">Shipper Signature _____</div>		
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	<table style="width:100%;"> <tr> <td style="width:50%;"> Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver </td> <td style="width:50%;"> Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold to contain <input type="checkbox"/> By Driver/Pieces </td> </tr> </table>	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
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold to contain <input type="checkbox"/> By Driver/Pieces		
	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.		

Customer: MACYS HOME STORE DENVER DC

Ship Date: 03/11/2020


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

BILL TO:
MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:
MACYS HOME STORE DENVER DC
510 EAST 51ST AVENUE
DENVER, CO 80216
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	6	2	6	2
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight: 18.51
 Total Quantity Ordered: 9
 Total Cartons Ordered: 3
 Total Quantity Shipped: 9
 Total Cartons Shipped: 3

SHIP FROM		Bill of Lading Number: 06757163000430666	
Name: E & E COMPANY LTD		 (402)06757163000430666	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: NEW LEGEND TRUCKING	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: L7624	
VENDOR:		Seal number(s): 9605108	
FOB: <input type="checkbox"/>		SCAC: LEGS	
SHIP TO		Pro Number: N/A	
Name: Macys Home Store Martinsburg Location #: MB			
Address: 333 Caperton Blvd			
City/State/Zip: Martinsburg, WV 25403			
CID#:			
Dept: 0792		FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS:		Actual Driver Arrival Time	
Load #: 60662076		Driver Departure Time	
Packing List Is Attached		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2105532	267	2719.13	Y N	
Grand Total	267	2719.13		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage 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
8	Pallet			400.00		Pallet		
		267	ctns	2719.13		Comforters, Bedspreads	49017	200
8		267		3119.13		Grand Total		

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

COD Amount: _____

Fee Terms: Collect: 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 <small>This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>	Trailer Loaded:	Freight Counted:	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 DOT emergency response guidebook or equivalent documentation in the vehicle.</small>
	<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	

Customer: MACYS HOME STORE MARTINSBURG DC

Ship Date: 03/11/2020

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

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

SHIP TO:
MACYS HOME STORE MARTINSBURG DC
333 CAPERTON BLVD
MARTINSBURG, WV 25403
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2105532	N/A	MCC10-1430	086569247193	Sherpa Comforter	EA	1	23	23	23	23
2105532	N/A	MCC10-1433	086569247223	Sherpa Comforter	EA	1	41	41	41	41
2105532	N/A	MCC10-1440	086569247414	Sherpa Comforter	EA	1	64	64	64	64
2105532	MCC10586	MCC10-586	086569054241	Sherpa Comforter	EA	1	59	59	59	59
2105532	MCC10587	MCC10-587	086569054272	Sherpa Comfor	EA	1	80	80	80	80

Total Weight: 2719.13
 Total Quantity Ordered: 267
 Total Cartons Ordered: 267
 Total Quantity Shipped: 267
 Total Cartons Shipped: 267

Date: 3/11/2020 11:24:01 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000430611	
Name: E & E COMPANY LTD		 (402)06757163000430611	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: NEW LEGEND TRUCKING	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: L7824	
VENDOR:		Seal number(s): 0605108	
FOB: <input type="checkbox"/>		SCAC: LEGS	
SHIP TO		Pro Number: N/A	
Name: Macys Home Store Secaucus DC Location #: SC		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address: 500 Meadowlands Parkway		Prepaid: <input type="checkbox"/> Collect: X 3rd Party: <input type="checkbox"/>	
City/State/Zip: Secaucus, NJ 07094		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
CID#:		Appointment Time	
Dept: 0602		Actual Driver Arrival Time	
FOB: <input type="checkbox"/>		Driver Departure Time	
THIRD PARTY FREIGHT CHARGES BILL TO:		AM AM AM	
Name:		PM PM PM	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 50662076			
Packing List Is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2183610	25	180.23	Y N	
Grand Total	25	180.23		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		25	ctns	180.23		Shower curtain	49385	77.5
1		25		230.23		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
	_____ Shipper Signature		

Customer: MACYS HOME STORE SECAUCUS DC

Shp Date: 03/11/2020

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


BILL TO:
MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:
MACYS HOME STORE SECAUCUS DC
500 MEADOWLANDS PARKWAY
SECAUCUS, NJ 07094
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1140	086569170392	Elm Waffle Shower Curtain	EA	3	15	5	15	5
2183610	N/A	MCH70-1141	086569170408	Elm Waffle Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1142	086569170422	Durant Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1143	086569170446	Johnston Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1491	086569255518	La Dolce Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1493	086569263377	Victoria Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1495	086569263384	Sorrento Shower Curtain	EA	3	3	1	3	1
2183610	MCH70977	MCH70-977	086569111128	Paris Shower Curtain	EA	3	3	1	3	1
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	6	2	6	2
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	6	2	6	2
2183610	MCH70998	MCH70-998	086569111333	Dellah Shower Curtain	EA	3	3	1	3	1
2183610	N/A	SWV70-0005H	086569263766	100% Polyester Woven Jacquard	EA	3	6	2	6	2
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight: 180.23
 Total Quantity Ordered: 75
 Total Cartons Ordered: 25
 Total Quantity Shipped: 75
 Total Cartons Shipped: 25

Bill Of Lading

SHIP FROM		SHIP TO								
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____	Bill of Lading Number: 06757163000430642  (402)06757163000430642									
Name: Macys Home Store Martinsburg Location #: MB DC Address: 333 Caperton Blvd City/State/Zip: Martinsburg, WV 25403 CID#: _____ Dept: 0602	CARRIER NAME: NEW LEGEND TRUCKING Responsible Acct.No: _____ Trailer number: L7624 Seal number(s): 9605108 SCAC: LEGS Pro Number: N/A									
Name: _____ Address: _____ City/State/Zip: _____	Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____ <input type="checkbox"/> Master Bill of Lading; with attached underlying Bills of Lading									
SPECIAL INSTRUCTIONS: Load #: 50682076 Packing List is Attached	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">Appointment Time</th> <th style="width: 33%;">Actual Driver Arrival Time</th> <th style="width: 33%;">Driver Departure Time</th> </tr> <tr> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> </tr> <tr> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
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
2183588	1	9.25	Y N	
Grand Total	1	9.25		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		1	ctns	9.25		Shower curtain	49385	77.5
1		1		59.25		Grand Total		

<p>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"</p>	<p>COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/></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>RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;">Shipper Signature _____</p>
<p>SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</p>	<p>Trailer Loaded: <input 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/Places</p>
<p>CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.</p>	

Customer: MACYS HOME STORE MARTINSBURG DC

Ship Date: 03/11/2020

SHIP FROM:

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

BILL TO:

MAGYS.COM (DC)
2101 EAST KEMPER ROAD
CINCINNATI, OH 45241
US

SHIP TO:

MACYS HOME STORE MARTINSBURG DC
333 CAPERTON BLVD
MARTINSBURG, WV 25403
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183588	N/A	MCC70-1129	086569170408	Elm Waffle Shower Curtain	EA	3	3	1	3	1

Total Weight: 9.25

Total Quantity Ordered: 3

Total Cartons Ordered: 1

Total Quantity Shipped: 3

Total Cartons Shipped: 1

Date: 3/11/2020 11:23:52 AM

Bill Of Lading

Page 1 of 1

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
2183610	12	86.28	Y N	
Grand Total	12	86.28		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMPC item 300</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		12	ctns	86.28		Shower curtain	49385	77.5
1		12		136.28		Grand Total		

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

per _____

COD Amount: _____

Fee Terms:

Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature _____

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets sold to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Customer: MACYS HOME STORE HOUSTON DC

Ship Date: 03/11/2020

SHIP FROM:

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

BILL TO:


MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:

MACYS HOME STORE HOUSTON DC
2103 ERNESTINE
HOUSTON, TX 77023
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1140	086569170392	Elm Waffle Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1493	086569263377	Victoria Shower Curtain	EA	3	6	2	6	2
2183610	MCH70977	MCH70-977	086569111128	Paris Shower Curtain	EA	3	3	1	3	1
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	3	1	3	1
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	6	2	6	2
2183610	MCH70998	MCH70-998	086569111333	Delliah Shower Curtain	EA	3	6	2	6	2
2183610	N/A	SWV70-0005H	086569263766	100% Polyester Woven Jacquard	EA	3	3	1	3	1
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight: 86.28
 Total Quantity Ordered: 36
 Total Cartons Ordered: 12
 Total Quantity Shipped: 36
 Total Cartons Shipped: 12

SHIP FROM		Bill of Lading Number: 08757163000430574										
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)08757163000430574										
SHIP TO		CARRIER NAME: NEW LEGEND TRUCKING										
Name: Macys Home Store Gandy DC Location #: GN Address: 4130 Gandy Blvd. City/State/Zip: Tampa, FL 33611 CID#: _____ Dept: 0602		Responsible Acct.No: _____ Trailer number: L7624 Seal number(s): 9805108 SCAC: LEGS Pro Number: N/A										
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)										
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: _____ Collect: X 3rd Party: _____ <input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading										
SPECIAL INSTRUCTIONS: Load #: 50662076 Packing List is Attached		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> </tr> <tr> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
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
2183610	12	99.16	Y N	
Grand Total	12	99.16		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 500</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		12	ctns	99.16		Shower curtain	49385	77.5
1		12		149.16		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).			
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">Shipper Signature</div>		
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	<table style="width:100%;"> <tr> <td style="width:50%;"> Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver </td> <td style="width:50%;"> Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces </td> </tr> </table>	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
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		
CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.			

Customer: MACYS HOME STORE GANDY DC

Shp Date: 03/11/2020

SHIP FROM:

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

BILL TO:

MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:

MACYS HOME STORE GANDY DC
4130 GANDY BLVD.
TAMPA, FL 33611
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1140	086569170392	Elm Waffle Shower Curtain	EA	3	6	2	6	2
2183610	N/A	MCH70-1141	086569170408	Elm Waffle Shower Curtain	EA	3	6	2	6	2
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	6	2	6	2
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	9	3	9	3
2183610	N/A	SWV70-0005H	086569263766	100% Polyester Woven Jacquard	EA	3	3	1	3	1
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight:	99.16
Total Quantity Ordered:	36
Total Cartons Ordered:	12
Total Quantity Shipped:	36
Total Cartons Shipped:	12

Date: 3/11/2020 11:23:44 AM

Bill Of Lading

Page 1 of 1

SHIP FROM				SHIP TO					
Name: E & E COMPANY LTD				Name: Macys Home Store South Windsor Location #: SW DC					
Address: 221 Hanson Way				Address: 301 Governors Hwy					
City/State/Zip: Woodland, CA 95778				City/State/Zip: South Windsor, CT 06074					
SID#:				CID#:					
PHONE:				Dept: 0602					
VENDOR:				FOB: <input type="checkbox"/>					
Bill of Lading Number: 06757163000430635				CARRIER NAME: NEW LEGEND TRUCKING					
				Responsible Acct.No:					
(402)06757163000430635				Trailer number: L7624					
Seal number(s): 9805108				SCAC: LEGS					
Pro Number: N/A				Freight Charge Terms: (freight charges are prepaid unless marked otherwise)					
Name:				Prepaid: <input type="checkbox"/>					
Address:				Collect: X					
City/State/Zip:				3rd Party: <input type="checkbox"/>					
SPECIAL INSTRUCTIONS: Load #: 50682076				Master Bill of Lading: with attached underlying Bills of Lading					
Packaging List is Attached				Appointment Time		Actual Driver Arrival Time		Driver Departure Time	
				AM		AM		AM	
				PM		PM		PM	
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER			# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO		
2183610			11	66.62	Y	N			
Grand Total			11	66.62					
CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(c) of NMFC Item 300</small>	PACKAGE		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
1	Pallet			50.00		Pallet			
		11	ctns	66.62		Shower curtain	49385	77.5	
1		11		116.62		Grand Total			

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"		COD Amount: _____	
		Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>	
		Customer check acceptable: <input type="checkbox"/>	
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 <small>This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>		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 DOT emergency response guidebook or equivalent documentation in the vehicle.</small>	
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	

Customer: MACYS HOME STORE SOUTH WINDSOR DC

Ship Date: 03/11/2020

SHIP FROM:

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

BILL TO:

MACY'S HOME STORE
2101 EAST KEMPER ROAD
CINCINNATI, OH 45201
US

SHIP TO:

MACYS HOME STORE SOUTH WINDSOR
DC
301 GOVERNORS HWY
SOUTH WINDSOR, CT 06074
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2183610	MCH701001	MCH70-1001	086569111364	Serene Shower Curtain	EA	3	3	1	3	1
2183610	N/A	MCH70-1143	086569170446	Johnston Shower Curtain	EA	3	3	1	3	1
2183610	MCH70977	MCH70-977	086569111128	Paris Shower Curtain	EA	3	3	1	3	1
2183610	MCH70988	MCH70-988	086569111234	Spa Waffle Shower Curtain	EA	3	9	3	9	3
2183610	MCH70994	MCH70-994	086569111296	Sorrel Shower Curtain	EA	3	3	1	3	1
2183610	N/A	SWV70-0005H	086569263766	100% Polyester Woven Jacquard	EA	3	9	3	9	3
2183610	N/A	SWV70-0007H	086569263391	Blossom Shower Curtain	EA	3	3	1	3	1

Total Weight: 66.62
Total Quantity Ordered: 33
Total Cartons Ordered: 11
Total Quantity Shipped: 33
Total Cartons Shipped: 11