

Wholesale Order Changes Report

Customer PO No. Start:	<input type="text" value="6808528754"/>	Customer PO No. End:	<input type="text" value="6808528754"/>	Date Type:	<input type="text"/>
E&E SO No. Start:	<input type="text"/>	E&E SO No. End:	<input type="text"/>	Start Date:	<input type="text"/>
Customer:	<input type="text"/>	Location:	<input type="text"/>	End Date:	<input type="text"/>
Dept. No.:	<input type="text"/>	Batch No.:	<input type="text"/>	Item No.:	<input type="text"/>
Routing PO No.:	<input type="text"/>	Multiple Cust. PO No.:	<input type="text"/>		
User Operation:	<input type="text"/>	Remark:	<input type="text"/>		

Items:9 Page number:1/1 Paginal:100 items

Search All

Customer PO No.	E&E SO No.	Customer	EDI Order Type	Dept. No.	Ship To	Create Date	Shipping Date	Cancel After Date	In DC Date	Item No.	Description	Pattern	UPC	Cust. Item No.	Cust Line No.	Location	Batch No.	Routing PO No.	Case Pack Qty	Qty Ordered	Qty To Ship	Updated Date	Updated By	Operation Type
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS9844409622-29	Q Trinity MS Bedding Set	Trinity	086569114563	570976661	8	SV4	B20220120184324		1	261	0	01/20/2022 23:01:02	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS9844409622-28	F Trinity MS Bedding Set	Trinity	086569114556	570976660	7	SV4	B20220120184324		1	106	0	01/20/2022 23:00:52	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS5144409622-25	Q Triangle Comforter Set	Triangle	08656962658	596083743	17	SV4	B20220120184324		1	34	0	01/20/2022 23:00:16	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS5144409622-24	F Triangle Comforter Set	Triangle	08656962474	596066253	13	SV4	B20220120184324		1	106	0	01/20/2022 23:00:04	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS5144409622-23	T/T XL Triangle Comforter Set	Triangle	08656962467	596074672	16	SV4	B20220120184324		1	251	0	01/20/2022 22:59:55	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS5144409622-20	F Triangle Comforter Set	Triangle	08656962399	596066282	14	SV4	B20220120184324		1	55	0	01/20/2022 22:59:40	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS5144409622-19	T/T XL Triangle Comforter Set	Triangle	08656962696	596074669	15	SV4	B20220120184324		1	33	0	01/20/2022 22:59:31	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS35-001-822-04	T/TXL Grace Print BNB	Grace	675716630485	554708302	2	SV4	B20220120184324		1	129	0	01/20/2022 22:59:16	yanxiaoying@scmhome.com	Zero out
6808528754	6437548	WALMART01	0020	00022	7853	01/20/2022	01/26/2022		02/15/2022	MS35-001-822-01	T/TXL Monique BNB	Monique	675716630454	554708311	3	SV4	B20220120184324		1	17	0	01/20/2022 22:58:58	yanxiaoying@scmhome.com	Zero out

Date: 3/30/2022 9:43:16 AM

Master Bill Of Lading

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SHIP FROM		Master Bill of Lading Number: 06757169000163368
Name:	E & E COMPANY LTD	
Address:	602 Expansion Blvd	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:		FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME: WAL-MART FLEET
Name:	Wal-Mart Regional DC - 7853	DC#: 7853
		Div.
Address:	5100 North Ridge Trail	Trailer number: 169000
	7853	Seal number(s): 8312997
City/State/Zip:	Davenport, FL 33897	SCAC: WALM
SID#:		Pro Number:
		FOB: <input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED
City/State/Zip:		(check box) UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time: 0930 AM
Load #: 95110442		Actual Driver Arrival Time: 0833 AM
		Driver Departure Time: 0913 AM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
6808529088	18	219.77	Y N	06757169000163351	7853	
6808528753	48	525.48	Y N	06757169000159293	7853	
6808528754	97	665.05	Y N	06757169000159309	7853	
Grand Total	163	1410.30				

CARRIER INFORMATION							
HANDLING UNIT	PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
	QTY	TYPE				QTY	TYPE
4	Pallet		200.00		Pallet		70
		163	ctns	1410.30	Comforters, Bedspreads	49017	200
4			1610.30		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.	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 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>[Signature]</i> Total Pallets: 4			<i>[Signature]</i>

Order No.: 6437548 Order Date: 01/20/2022 Customer: WALMART01 Customer PO No.: 6808528754
PO Type No.: 0020 Location No.: 7853 Dept. No.: 00022

SHIP FROM:
E & E COMPANY LTD
602 EXPANSION BLVD
PORT WENTWORTH, GA 31407

BILL TO:
WAL-MART.COM (DC)
1108 SE 10TH STREET
ATTN: A/P DEPT.
BENTONVILLE, AR 72716

SHIP TO:
WAL-MART REGIONAL DC - 7853
5100 NORTH RIDGE TRAIL
DAVENPORT, FL 33897

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
555101458	MS16-008-007-12	675716735418	K Solid Comforter	EA	1	13	13	13	13
552842296	MS44-001-009-30	675716523763	T/TXL MS Senna BNB	EA	1	16	16	16	16
577082887	MS9944409622-20	086569318534	T/TXL Black FlorComforter Set	EA	1	18	18	18	18
583501553	YZ8044409622-52	086569359247	T Nova Comforter Mini Set	EA	1	18	18	18	18
567161764	YZ8844409622-03	086569007483	T/TXL Tassel Comforter Mini Se	EA	1	32	32	32	32

Total Quantity Ordered: 97
Total Ordered: 97
Total Quantity Shipped: 97
Total Cartons Shipped: 97

Date: 3/11/2022 3:29:43 PM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757169000154106	
Name:	E & E COMPANY LTD	Address:	602 Expansion Blvd
City/State/Zip:	Port Wentworth, GA 31407	SID#:	FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME: WAL-MART FLEET	
Name:	Wal-Mart Regional DC - 7853	DC#:	7853
Address:	5100 North Ridge Trail 7853	Trailer number:	151248
City/State/Zip:	Davenport, FL 33897	Seal number(s):	1611040
SID#:	FOB: <input type="checkbox"/>	SCAC:	WALM
		Pro Number:	

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:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
Load #: 94302654		<input checked="" type="checkbox"/> UNDERLYING BILLS OF LANDING	
		Appointment Time	Actual Driver Arrival Time
		Preload AM	8:20 AM
			8:25 AM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
6808528952	412	4286.85	Y	N	06757169000154090	7853
6808528753	565	5917.69	Y	N	06757169000149980	7853
6808528754	99	767.91	Y	N	06757169000149997	7853
6808528772	379	3423.07	Y	N	06757169000150009	7853
Grand Total	1455	14395.52				

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 369</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
30	Pallet			1500.00		Pallet		70
		1455	ctns	14395.52		Comforters, Bedspreads	49017	200
30				15895.52		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 DOT. Total Pallets: <u>30</u> <u>M. 03.17.22</u>	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. <u>[Signature]</u> <u>3/17/22</u>
	<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	

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SHIP TO:
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5100 NORTH RIDGE TRAIL
DAVENPORT, FL 33897

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
555101458	MS16-008-007-12	675716735418	K Solid Comforter	EA	1	22	22	22	22
570976659	MS9844409622-27	086569114549	T/TXL Trinity MS Bedding Set	EA	1	46	46	46	46
577082887	MS9944409622-20	086569318534	T/TXL Black FlorComforter Set	EA	1	16	16	16	16
583501555	YZ8044409622-54	086569359261	T Sophia Comforter Mini Set	EA	1	6	6	6	6
583501561	YZ8044409622-55	086569359285	F/Q Sophia Comforter Mini Set	EA	1	9	9	9	9

Total Quantity Ordered: 99
 Total Ordered: 99
 Total Quantity Shipped: 99
 Total Cartons Shipped: 99