

Date: 3/30/2020 12:40:46 PM

# Master Bill Of Lading

<b>SHIP FROM</b>				Master Bill of Lading Number: 06757164000204509						
Name: E & E COMPANY LTD										
Address: 1680 Tide Court										
City/State/Zip: Woodland, CA 95776										
SID#: _____ FOB: <input type="checkbox"/>										
<b>SHIP TO</b>				<b>CARRIER NAME: WAL-MART FLEET</b>						
Name: Wal-Mart Centerpoint 6912		DC#: 6912		Trailer number: 134856						
		Div.		Seal number(s): 3713540						
Address: 600 Live Oak Ave				SCAC: WALM						
6912				Pro Number:						
City/State/Zip: Irwindale, CA 91706										
SID#: _____		FOB: <input type="checkbox"/>								
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>				<b>Freight Charge Terms:</b>						
Name:				Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>						
Address:				<input checked="" type="checkbox"/> <b>MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING</b> (check box)						
City/State/Zip:										
<b>SPECIAL INSTRUCTIONS:</b>				Appointment Time		Actual Driver Arrival Time		Driver Departure Time		
Load #: 76346043				12:00 <sup>AM</sup> <sub>PM</sub>		11:00 <sup>AM</sup> <sub>PM</sub>		12:50 <sup>AM</sup> <sub>PM</sub>		
<b>CUSTOMER ORDER INFORMATION</b>										
<b>CUSTOMER ORDER NUMBER</b>			<b># PKGS CTN</b>	<b>WEIGHT LBS</b>	<b>PALLET/SLIP (CIRCLE ONE)</b>		<b>ADDITIONAL SHIPPER INFO</b>			
							<b>BOL#</b>	<b>DC#</b>	<b>Supplier#</b>	
5452729424			154	1327.38	Y N		06757164000204486	6031G		
3358844908			462	4336.06	Y N		06757164000204363	6036G		
<b>Grand Total</b>			<b>616</b>	<b>5663.44</b>						
<b>CARRIER INFORMATION</b>										
<b>HANDLING UNIT</b>		<b>PACKAGE</b>		<b>WEIGHT LBS</b>	<b>H.M. (X)</b>	<b>COMMODITY DESCRIPTION</b>			<b>LTL ONLY</b>	
						Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360			<b>NMFC #</b>	<b>CLASS</b>
<b>QTY</b>	<b>TYPE</b>	<b>QTY</b>	<b>TYPE</b>							
616	ctns			5663.44		Comforters, Bedspreads			49017	200
616				5663.44		<b>Grand Total</b>				

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 _____	<b>COD Amount \$</b> _____ <b>Fee Terms:</b> 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;"><b>Shipper Signature</b></div>
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<b>SHIPPER SIGNATURE / DATE</b> 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 Pallet: 8 <i>[Signature]</i> <div style="text-align: right; font-size: 1.2em;">3/30/20</div>	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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.  <div style="text-align: right; font-size: 1.2em;"> <i>[Signature]</i> 3/30/20                      16590                 </div>
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**SHIP FROM**

Name: E & E COMPANY LTD  
 Address: 1680 Tide Court  
 City/State/Zip: Woodland, CA 95776  
 SID#: \_\_\_\_\_ FOB:

Bill of Lading Number: 06757164000204486




(402)06757164000204486

**SHIP TO**

Name: Wal-Mart DC 6031G-GENERAL Location #: 6031G  
 Address: 23701 West Southern Avenue  
 6031G  
 City/State/Zip: Buckeye, AZ 85328  
 CID#: \_\_\_\_\_ FOB:   
 Dept: 00022

**CARRIER NAME:** WAL-MART FLEET  
 Trailer number: 134856  
 Seal number(s): 3713540  
**SCAC:** WALM  
**Pro Number:**



**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

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

Prepaid  Collect  3rd Party

**SPECIAL INSTRUCTIONS:**  
 Load #: 76346043

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

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

CUSTOMER ORDER INFORMATION										
CUSTOMER ORDER NUMBER	# PKGS	Pkts Count	WEIGHT	PALLET/SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
5452729424	154	0	1327.38	Y	N	04/03/2020	6031G	0003	00022	
<b>GRAND TOTAL</b>	154	0	1327.38							

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>	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
154	ctns			1327.38		Comforters, Bedspreads	49017	200	
154				1327.38		<b>GRAND TOTAL</b>			

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

**COD Amount:** \$ \_\_\_\_\_

**Fee Terms:** Collect:  Prepaid:   
 Customer check acceptable:

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

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

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

**Shipper Signature**

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

**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. Property described above is received in good order, except as noted.

**SHIP FROM**  
 Name: E & E COMPANY LTD  
 Address: 1680 Tide Court  
 City/State/Zip: Woodland, CA 95776  
 SID#: \_\_\_\_\_ FOB:

Bill of Lading Number: 06757164000204363



(402)06757164000204363

**SHIP TO**  
 Name: Wal-Mart DC 6036G-GENERAL Location #: 6036G  
 Address: 8660 South US Hwy 79  
 6036G  
 City/State/Zip: Palestine, TX 75803  
 CID#: \_\_\_\_\_ FOB:   
 Dept: 00022

**CARRIER NAME:** WAL-MART FLEET

Trailer number: 134856

Seal number(s): 3713540

**SCAC:** WALM

**Pro Number:**



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

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

Prepaid Collect  3rd Party

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

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

**SPECIAL INSTRUCTIONS:**  
 Load #: 76346043

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	Pfts Count	WEIGHT	PALLET/SLIP (CIRCLE ONE)	Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
3358844908	462	8	4336.06	Y N	04/06/2020	6036G	0003	00022	
<b>GRAND TOTAL</b>	462	8	4336.06						

**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>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
462	ctns			4336.06		Comforters, Bedspreads	49017	200
462				4336.06		<b>GRAND TOTAL</b>		

Where the rate is dependent on value, shippers are required to elated 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

**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 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. Property described above is received in good order, except as noted.