

Date: 1/30/2023 11:29:49 AM

# Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757168000876858
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: FedEx
Name:	Wal-Mart Regional DC - 7767 DC#: 7767	
Address:	15101 N Beach St 7767	
City/State/Zip:	Fort Worth, TX 76177	
SID#:	FOB: <input type="checkbox"/>	Trailer number: 953079 Seal number(s): 0000
		SCAC: Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:
Name:	Address:	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM
Load #: 24976187		<i>Delivered</i>

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
2658732312	22	261.73	Y	N	06757168000876797	7767
2658732323	11	129.97	Y	N	06757168000876827	7767
<b>Grand Total</b>	<b>33</b>	<b>391.70</b>				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodity 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(a) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		70
		33	ctns	391.70		Comforters, Bedspreads	49017	200
2				491.70		<b>Grand Total</b>		

When 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

<b>SHIPPER SIGNATURE / DATE</b> <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> Total Pallets: <i>2</i>	<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 said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> <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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Wholesale Shipment Mgt

Shipment No.:	<input type="text"/>	BOL No.:	<input type="text"/>	Status:	<input type="text"/>
Customer:	<input type="text"/>	Business Type:	<input type="text"/>	Location:	<input type="text"/>
Carrier:	<input type="text"/>	Ship Method:	<input type="text"/>	Ship Date Start:	<input type="text"/>
Customer PO No.:	2658732323	E&E SO No.:	<input type="text"/>	Ship Date End:	<input type="text"/>
Routing No.:	<input type="text"/>	Carton No.:	<input type="text"/>	Batch No.:	<input type="text"/>
Pro Number:	<input type="text"/>	Trailer Number:	<input type="text"/>	Seal Number:	<input type="text"/>
Load Number:	<input type="text"/>	Assigned:	<input type="text"/>	Assigned To:	<input type="text"/>
Ship To:	<input type="text"/>	ASN Sent:	<input type="text"/>	MBOL Created:	<input type="text"/>
Staged:	<input type="text"/>	Invoice No.:	<input type="text"/>	MBOL:	<input type="text"/>
BOL Printed:	<input type="text"/>	Freight Term :	<input type="text"/>	Stage Bin:	<input type="text"/>
Closed:	No <input type="text"/>	Dealer:	<input type="text"/>		

- New
- Stage Bin
- Assign
- Delete
- Packing List
- BOL
- MBOL
- Load
- Unload
- Complete
- Attached
- FTC
- CI
- SLI
- VPCD
- History

Items:1 Page number:1/1 Paginal:50 items

Shipment No.	BOL No.	MBOL	Status	Customer	Location	Ship To	Total Ctns	Ctns Palletized	Ctns With Tracking No.	Total Pts	Ship Date	Cust. PO No.	Carrier	Ship Method	Freight Term	Pro Number	Trailer Number	Seal Number	Load Number	Routing No.	BOL Printed	Stage Bin	Assigned To	ASN Sent	ASN Sent Date
<input type="checkbox"/> 800087682	06757168000876827	06757168000876858	Completed	WALMART01	SV3	7767	11	11	11	1	01/30/2023	2658732323	FedEx	FedEx Ground	3rd Party Billing		953079	0000	24976187	R202301130317249	Yes	K35-02A	Gerardo Rivera	Yes	01/30/2023 07:52:52