

Date: 7/18/2022 3:01:41 PM

Master Bill Of Lading

Page 1 of 2

SHIP FROM		Master Bill of Lading Number: 06757168000752442	
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: WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.:	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	172584
		Seal number(s):	1586794
City/State/Zip:	Conley, GA 30288	SCAC:	WALM
SID#:		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input 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	Actual Driver Arrival Time
Load #: 97846899		0930 AM	1319 PM
			Driver Departure Time
			1501 PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3058524920	168	2014.96	Y N	06757168000752367	6010R	
9275162428	252	2624.29	Y N	06757168000752428	6039A	
4108524916	172	2040.96	Y N	06757168000752381	6066R	
4074463132	199	2017.78	Y N	06757168000752374	6017A	
4158524800	72	932.72	Y N	06757168000752398	6018R	
9325162439	255	3399.10	Y N	06757168000752435	7038A	
5009388502	1	5.95	Y N	06757168000752404	6020A	
7859168386	11	65.45	Y N	06757168000752411	6024A	
2124552892	282	3490.26	Y N	06757168000752350	6092A	
Grand Total	1412	16591.47				

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 load port/for with ordinary care. See Section 2(a) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1314	ctns			16292.11		Comforters, Bedspreads	49017	200
86	ctns			227.96		Sheet Set & Pillowcase	49390 Sub 4	175

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: 24 <i>[Signature]</i> 7-18-22	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 placards for equivalent documentation in the vehicle. <i>[Signature]</i> 7-18-22
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Date: 7/18/2022 3:01:13 PM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757168000752411
Name:	E & E COMPANY LTD	 (402)06757168000752411
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: WAL-MART FLEET
Name:	Wal-Mart DC 6024A - ASM DIS Location #: 6024A	Trailer number: 172584
Address:	3920 Southwest Blvd. 6024A	Seal number(s): 1586794
City/State/Zip:	Grove City, OH 43123	SCAC: WALM
CID#:	FOB: <input type="checkbox"/>	Pro Number:
Dept:	00020	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i>
Name:		Prepaid Collect <input checked="" type="checkbox"/> 3rd Party
Address:		
City/State/Zip:		

SPECIAL INSTRUCTIONS: Load #: 97846899	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading
	Appointment Time Actual Driver Arrival Time Driver Departure Time
	AM PM AM PM AM PM

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS	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
7859168386	11	0	65.45	Y N	07/20/2022	6024A	0033	00020	
GRAND TOTAL	11	0	65.45						

HANDLING UNIT						PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be marked and packaged so to ensure safe transportation with ordinary care. See Section 2(a) of NMFCA Item 318.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #	CLASS							
11	ctns			65.45		Shower curtain	49385	77.5				
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: \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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).

<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:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</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. Property described above is received in good order, except as noted.</p>

Order No.: 6756227 **Order Date:** 07/10/2022 **Customer:** WALMART **Customer PO No.:** 7859168386
PO Type No.: 0033 **Location No.:** 6024A **Dept. No.:** 00020

SHIP FROM:
E & E COMPANY LTD
311 INTERNATIONAL TRADE PKWY
PORT WENTWORTH, GA 31407

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

SHIP TO:
WAL-MART DC 6024A - ASM DIS
3920 SOUTHWEST BLVD.
GROVE CITY, OH 43123

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
578506708	BH8044409620-01	086569352255	BHG Spa Waffle Weave Shower Cu	EA	3	33	11	33	11

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