

Date: 9/21/2022 3:11:45 PM

Master Bill Of Lading

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SHIP FROM		Master Bill of Lading Number: 06757168000799249	
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:	175834
City/State/Zip:	Conley, GA 30288	Seal number(s):	1586343
SID#:		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 <input type="checkbox"/> UNDERLYING BILLS OF LANDING	
Load #: 62693286		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
4558525562	36	472.92	Y N	06757168000799188	6040R	
1424703418	273	2841.14	Y N	06757168000799201	6030G	
9325162910	266	3105.04	Y N	06757168000799195	7038A	
9773285289	85	1012.70	Y N	06757168000799232	7035G	
5574883114	251	2653.96	Y N	06757168000799218	6040G	
9324973071	246	2603.14	Y N	06757168000799225	6070G	
Grand Total	1167	12688.90				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodity description requiring special or additional care or attention in handling or stowage must be on marked and packaged as to or in a safe transportation with ordinary care. See Section 2(a) of NMFC Item 309.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1107	ctns			12564.25		Comforters, Bedspreads	49017	200
60	ctns			124.65		Sheet Set & Pillowcase	49390 Sub 4	175
1167				12688.90		Grand Total		

<small>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 _____.</small>	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).

<small>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.</small>	<small>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>
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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 transport according to the applicable regulations of the DOT.</small> Total Pallet: 28 <i>[Signature]</i> 9/22/22	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 sold to contain <input type="checkbox"/> By Driver/Pieces	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> <i>[Signature]</i> 9/22/22
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Order No.: 6805059 **Order Date:** 09/15/2022 **Customer:** WALMART **Customer PO No.:** 9773295289
PO Type No.: 0003 **Location No.:** 7035G **Dept. No.:** 00022

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 7035G GENERAL
18245 NW 115 AVENUE
ALACHUA, FL 32615

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
578669798	MS8044409622-47	086569351357	F/Q Ruched Comforter	EA	2	190	95	190	95

Total Quantity Ordered: 190
Total Ordered: 95
Total Quantity Shipped: 190
Total Cartons Shipped: 95