

Date: 1/13/2023 2:29:54 PM

Master Bill Of Lading

Page 1 of 3

SHIP FROM		Master Bill of Lading Number: 06757168000867382	
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	Trailer number:	139005
	7101	Seal number(s):	36585996
City/State/Zip:	Conley, GA 30288	SCAC: WALM	
SID#:	FOB: <input type="checkbox"/>	Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 85472333		Preload AM	AM
			PM
			PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
5309388886	4	12.76	Y	N	06757168000866835	6018A	
5359389321	4	22.00	Y	N	06757168000866842	6070A	
7113969045	1	5.50	Y	N	06757168000866866	6017A	
4158525205	12	195.00	Y	N	06757168000866798	6018R	
3458525951	40	614.16	Y	N	06757168000866750	6017R	
7859169268	11	49.39	Y	N	06757168000866873	6024A	
3658525038	56	825.52	Y	N	06757168000866767	6048R	
9325163760	100	1232.66	Y	N	06757168000867009	7038A	
4074464584	129	1661.42	Y	N	06757168000866774	6017A	
3108525799	88	1206.88	Y	N	06757168000866743	6070R	
3458525952	76	1103.80	Y	N	06757168000866934	6017R	
7113969047	7	29.26	Y	N	06757168000866965	6017A	
9324973983	137	1703.34	Y	N	06757168000866897	6070A	
3008526158	84	1197.64	Y	N	06757168000866927	6024R	

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

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: <i>116/23</i>	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 guidebook or equivalent documentation in the vehicle. <i>[Signature]</i> 1-16-23
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Date: 1/13/2023 2:29:54 PM **Master Bill Of Lading** Page 2 of 3

SHIP FROM		Master Bill of Lading Number: 0675716800867382	
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:	139005
City/State/Zip:	Conley, GA 30288	Seal number(s):	36585996
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"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 65472333		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#
3008526156	44	604.12	Y	N	06757168000866736	6024R
4074464589	113	1186.89	Y	N	06757168000866941	6017A
4358526084	68	973.48	Y	N	06757168000866804	7038R
4409388902	5	18.26	Y	N	06757168000866811	6048A
7859169270	8	27.83	Y	N	06757168000866996	6024A
8775433527	68	730.69	Y	N	06757168000866880	6018A
9325163754	121	1785.31	Y	N	06757168000866903	7038A
6475643293	185	2483.48	Y	N	06757168000866859	6048A
7159169171	1	5.50	Y	N	06757168000866989	7038A
2374294778	172	2184.45	Y	N	06757168000866729	6024A
2374294782	134	1357.77	Y	N	06757168000866910	6024A
4358526087	120	1685.92	Y	N	06757168000866958	7038R
Grand Total	1788	22903.03				

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.

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.

Shipper Signature _____

Total Pallet: 47

Wholesale Order Changes Report

Customer PO No. Start: 2374294778 Customer PO No. End: 2374294778 Date Type:

E&E SO No. Start: E&E SO No. End: Start Date:

Customer: Location: End Date:

Dept. No.: Batch No.: Item No.:

Routing PO No.: Multiple Cust. PO No.:

User Operation: Remark:

Items: 2 Page number: 1/1 Paginal: 100 Items <<<

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
2374294778	6888132	WALMART	0033	00022	6024A	01/07/2023	01/12/2023		01/16/2023	BH8144409622-K	Pintuck Comforter Set	Pintuck	086569509451	587366286	19	SV3	B20230108175228		1	32	0	01/08/2023 19:31:41	yanxiaoying@scmhome.com	Zero out