

Date: 12/9/2022 2:58:27 PM

**Master Bill Of Lading**

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168000845632	
Name:	E & E COMPANY LTD		
Address:	311 International Trade Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:	FOB: <input type="checkbox"/>		
<b>SHIP TO</b>		CARRIER NAME: WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#: 7101	
Address:	1200 Mason Dixon Ln	Trailer number:	182242
City/State/Zip:	Conley, GA 30288	Seal number(s):	36585943
SID#:	FOB: <input type="checkbox"/>	SCAC:	WALM
		Pro Number:	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		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 (check box)	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time	Actual Driver Arrival Time
Load #: 64643639		11:00 AM	1:40 PM
		Driver Departure Time	1:58 PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
4409388735	4	12.76	Y N	06757168000845465	6048A	
5059388887	1	5.94	Y N	06757168000845595	6092A	
2859319050	3	11.88	Y N	06757168000845502	6094A	
4409388733	1	5.50	Y N	06757168000845571	6048A	
4359388734	2	8.69	Y N	06757168000845540	6027A	
4213325941	24	348.72	Y N	06757168000845601	6092R	
4359388736	4	17.82	Y N	06757168000845441	6027A	
5059388891	8	25.52	Y N	06757168000845410	6092A	
3658524952	48	697.44	Y N	06757168000845472	6048R	
4658525255	48	697.44	Y N	06757168000845625	6094R	
9325043599	65	725.02	Y N	06757168000845526	6094A	
6475643045	111	1240.78	Y N	06757168000845564	6048A	
6475643051	131	1549.94	Y N	06757168000845403	6048A	
4608525467	72	1023.28	Y N	06757168000845458	6027R	

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

<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 Pallets: <i>12/9/22</i>	<b>Trailer Loaded:</b> <input 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. <i>[Signature]</i> 12-9-22
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### Master Bill Of Lading

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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168000845632	
Name: <b>E &amp; E COMPANY LTD</b> Address: <b>311 International Trade Pkwy</b> City/State/Zip: <b>Port Wentworth, GA 31407</b> SID#: _____ FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		<b>CARRIER NAME: WAL-MART FLEET</b>	
Name: <b>Consolidation Dock 7101</b> DC#: <b>7101</b> Div. _____ Address: <b>1200 Mason Dixon Ln</b> <b>7101</b> City/State/Zip: <b>Conley, GA 30288</b> SID#: _____ FOB: <input type="checkbox"/>		Trailer number: <b>182242</b> Seal number(s): <b>36585943</b> SCAC: <b>WALM</b> Pro Number: _____	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/> <input checked="" type="checkbox"/> <b>MASTER BILL OF LANDING: WITH ATTACHED</b> (check box) <b>UNDERLYING BILLS OF LANDING</b>	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time AM PM    Actual Driver Arrival Time AM PM    Driver Departure Time AM PM	
Load #: 64643639			

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO		
				BOL#	DC#	Supplier#
3658524949	136	1988.40	Y N	06757168000845588	6048R	
4213325947	76	1118.60	Y N	06757168000845496	6092R	
4658525280	76	1118.60	Y N	06757168000845519	6094R	
4074583938	140	1401.43	Y N	06757168000845434	6027A	
4074583933	114	1439.31	Y N	06757168000845533	6027A	
4608525463	100	1465.32	Y N	06757168000845557	6027R	
9325043607	173	1509.23	Y N	06757168000845427	6094A	
2124554014	229	2374.44	Y N	06757168000845489	6092A	
2859319048	3	9.57	Y N	06757168000845618	6094A	
<b>Grand Total</b>		1569	18791.63			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities 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 349</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
245	ctns			613.72		Sheet Set & Pillowcase	49390 Sub 4	175
26	ctns			97.68		Shower curtain	49385	77.5

<p><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></p>	<p><b>COD Amount \$</b> _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>                  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><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></p>	<p><small>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small></p>
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<p><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></p> <p>Total Pallet: 38</p>	<p><b>Trailer Loaded:</b>  <input type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p>	<p><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</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b>  <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies an agency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.</small></p>
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Order No.: 6864831      Order Date: 12/04/2022      Customer: WALMART      Customer PO No.: 9325043607  
 PO Type No.: 0033      Location No.: 6094A      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 6094A-ASM DIS  
 5801 SW REGIONAL AIRPORT BLVD.  
 BENTONVILLE, AR 72712

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
578275793	BH8044409622-10	086569356277	K Embroidered Velvet Quilt	EA	2	2	1	2	1
578275794	BH8044409622-25	086569356109	F/Q Paisley Medallion Quilt	EA	2	2	1	2	1
578275804	BH8044409622-26	086569356116	K Paisley Medallion Quilt	EA	2	4	2	4	2
578275796	BH8044409622-27	086569356123	STD Paisley Medallion Sham	EA	2	4	2	4	2
578275808	BH8044409622-28	086569356130	K Paisley Medallion Sham	EA	2	2	1	2	1
587374662	BH8144409622-03	086569509420	F/Q Pintuck Comforter Set	EA	1	2	2	2	2
587366129	BH8144409622-05	086569509444	F/Q Pintuck Comforter Set	EA	1	2	2	2	2
583249710	BH9044409622-03	086569396341	F/Q Comforter Mini Set	EA	1	11	11	11	11
583249712	BH9044409622-04	086569396358	K Comforter Mini Set	EA	1	9	9	9	9
587373649	MS8144409622-09	086569491329	Travel Pillow Cover	EA	9	27	3	27	3
587373706	MS8144409622-10	086569491336	Travel Pillow Cover	EA	9	63	7	63	7

**Total Quantity Ordered: 732**  
**Total Ordered: 173**  
**Total Quantity Shipped: 732**  
**Total Cartons Shipped: 173**