

Date: 12/15/2022 2:56:11 PM

Master Bill Of Lading

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SHIP FROM		Master Bill of Lading Number: 06757168000852418
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: AAA Cooper Transportation
Name:	Wal-Mart CLT1 Troutman NC - FC 3859	DC#: 3859 Div.
Address:	386 Murdock Rd 3859	Trailer number: 560270 Seal number(s):
City/State/Zip:	Troutman, NC 28166	SCAC: AACT Pro Number: 5154910
SID#:		FOB: <input type="checkbox"/>

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: Load #: 24241504		Appointment Time AM PM	Actual Driver Arrival Time AM PM
		Driver Departure Time AM PM	

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
2024950955	13	110.31	Y	N	06757168000851329	3859
2024950954	13	186.86	Y	N	06757168000851336	3859
Grand Total	26	297.17				

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 prepared 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
		26	ctns	297.17		Comforters, Bedspreads	49017	200
2				397.17		Grand Total		

<p>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 _____</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).

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 rules, classifications and rates 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.

<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>Total Pallets: 2</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.</p> <p style="text-align: right;">Shipper Signature</p>
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pro search

PRO#

PRO Track Results

PRO	BOL	PO
51544910	24241504	2024950955
Shipper		Consignee
Origin Service Center : SAVANNAH		Destination Service Center : HICKORY
Origin Service Center Phone # : (912) 966-2712		Destination Service Center Phone # : (828) 468-3000
Delivery Information		Shipment Information
Pickup Date : 12/15/2022		Shipment Type : Collect
Delivery Date Time : 12/28/2022 08:51		Pkgs : 2
Delivery Status : Delivered		Weight : 397
Signed For : S Smith		

*****PACKING LIST*****
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Order No.: 6856399 Order Date: 12/01/2022 Customer: WALMART01 Customer PO No.: 2024950955
 PO Type No.: 0020 Location No.: 3859 Dept. No.: 00022

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

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

SHIP TO:
WAL-MART CLT1 TROUTMAN NC - FC 3859
386 MURDOCK RD
TROUTMAN, NC 28166

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
596074669	MS5144409622-19	086569692696	T/T XL Triangle Comforter Set	EA	1	2	2	2	2
596083743	MS5144409622-25	086569692658	Q Triangle Comforter Set	EA	1	7	7	7	7
563778001	MS5701030822-21	675716947934	T/TXL Triangle Comforter Set	EA	1	4	4	4	4

Total Quantity Ordered: 13
Total Ordered: 13
Total Quantity Shipped: 13
Total Cartons Shipped: 13