

SHIP FROM
 Name: **E & E COMPANY LTD**
 Address: **311 International Trade Pkwy**
 City/State/Zip: **Port Wentworth, GA 31407**
 SID#: _____ FOB:

Master Bill of Lading Number: 06757168000890489

SHIP TO
 Name: **Wal-Mart Fort Worth TX FC - VS2217** DC#: 2217 Div.
 Address: **5300 Westport Pkwy 2148**
 City/State/Zip: **Fort Worth, TX 76177**
 SID#: _____ FOB:

CARRIER NAME: FedEx
 Trailer number: 563326
 Seal number(s): 0000
SCAC:
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name:
 Address:
 City/State/Zip:

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LADING: WITH ATTACHED UNDERLYING BILLS OF LANDING
 Appointment Time: *Preload* 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#
2672993415	4	34.52	Y	N	06757168000890472	2148	
2672993411	23	275.89	Y	N	06757168000890465	2148	
Grand Total	27	310.41					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		70
		27	ctns	310.41		Comforters, Bedspreads	49017	200
2				410.41		Grand Total		

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: *2*

Trailer Loaded: Freight Counted:
 By Shipper By Shipper
 By Driver 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.

Wholesale Order Changes Report

Customer PO No. Start:	2672993415	Customer PO No. End:	2672993415	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:1 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
2672993415	6906048	WALMART01	0020	00022	2148	01/26/2023	02/01/2023		02/16/2023	M55144409622-21	Q Triangle Comforter Set	Triangle	086569692443	596065132	1	SV3	820230126210248	1	1		01/26/2023 21:41:55	yanxiaoying@scmhome.com	Zero out	