



<p align="center">SHIP FROM</p> <p>Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ FOB: <input type="checkbox"/></p>	<p>Bill of Lading Number: 06757163000778478</p>  (402)06757163000778478
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<p align="center">SHIP TO</p> <p>Name: Wal-Mart Regional DC - 7853 Location #: 7853 Address: 5100 North Ridge Trail 7853 City/State/Zip: Davenport, FL 33897 CID#: _____ FOB: <input type="checkbox"/> Dept: 00022</p>	<p>CARRIER NAME: FedEx</p> <p>Trailer number: Seal number(s): SCAC: FDEG Pro Number:</p> 
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<p align="center">THIRD PARTY FREIGHT CHARGES BILL TO:</p> <p>Name: Address: City/State/Zip:</p>	<p>Freight Charge Terms: (freight charges are prepaid unless marked otherwise)</p> <p>Prepaid Collect 3rd Party X</p>
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<p>SPECIAL INSTRUCTIONS: Load #: 25748140</p>	<p><input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td align="center">AM</td> <td align="center">AM</td> <td align="center">AM</td> </tr> <tr> <td align="center">PM</td> <td align="center">PM</td> <td align="center">PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time								
AM	AM	AM								
PM	PM	PM								

CUSTOMER ORDER INFORMATION										
CUSTOMER ORDER NUMBER	# PKGS	Pkts Count	WEIGHT	PALLET/SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
4328870524	2	1	16.82	Y	N	03/14/2023	07853	0020	00022	
GRAND TOTAL	2	1	16.82							

CARRIER INFORMATION										
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY			
QTY	TYPE	QTY	TYPE				NMFC #	CLASS		
1	Pallet			35.00		Pallet				
		2	ctns	16.82		Comforters, Bedspreads	49017	200		
1		2		51.82		GRAND TOTAL				

<p>Where the rate is dependent on value, shippers are required to stated 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 align="center">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>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p align="right">Shipper Signature</p>
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<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>Trailer Loaded: Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <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. <i>Property described above is received in good order, except as noted.</i></p>
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BOL #: 06757163000778478 Customer: WALMART01

Carrier: FedEx Ship Date: 03/07/2023

Trailer Number: Load Number: 25748140

Pro Number: Seal Number:

Door No: D208 Total Ctns/Units: 2/2

Total Cube: 3.48 Total Weight(LB): 16.82

Ship From: E & E COMPANY LTD- 444096
221 Hanson Way
Woodland, CA 95776

Ship To: Wal-Mart Regional DC - 7853
5100 North Ridge Trail
Davenport, FL 33897



06757163000778478

<u>Customer PO No.</u>	<u>E&E SO No.</u>	<u>Mark for Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Case Pack Qty</u>	<u>Carton ID</u>	<u>Carton Weigth(LB)</u>	<u>Carton Cube</u>	<u>Tracking #</u>
4328870524	6946251		MS514440 9622-24	086569692474 596066253 F Triangle Comforter Set	1	000067571 668920368 48	8.41	1.74	395307506367
4328870524	6946251		MS514440 9622-24	086569692474 596066253 F Triangle Comforter Set	1	000067571 668920368 55	8.41	1.74	395307506080

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