


Date: 3/6/2023 2:04:59 PM **Bill of Lading** Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757168000904735								
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>		 (402)06757168000904735								
SHIP TO		CARRIER NAME: FedEx								
Name: Wal-Mart Regional DC - 7767 Location #: 7767 Address: 15101 N Beach St 7767 City/State/Zip: Fort Worth, TX 76177 CID#: _____ FOB: <input type="checkbox"/> Dept: 00022		Trailer number: 569598 Seal number(s): 0000 SCAC: FDEG Pro Number: _____								
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid Collect 3rd Party X <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading								
Name: _____ Address: _____ City/State/Zip: _____		Appointment Time: <u>Preload</u> AM PM Actual Driver Arrival Time: AM PM Driver Departure Time: AM PM								
SPECIAL INSTRUCTIONS: Load #: 25724200										
CUSTOMER ORDER INFORMATION										
CUSTOMER ORDER NUMBER	# PKGS	Pits 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	
2658732391	22	0	256.92	Y N	03/08/2023	07767	0020	00022		
GRAND TOTAL	22	0	256.92							
CARRIER INFORMATION										
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION			LTL ONLY	
QTY	TYPE	QTY	TYPE			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 109 of NMFC Item 300.			NMFC #	CLASS
1	Pallet			35.00		Pallet				
		22	ctns	256.92		Comforters, Bedspreads			49017	200
1		22		291.92		GRAND TOTAL				
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 _____					COD Amount: \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>					
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: <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. Property described above is received in good order, except as noted.	

Wholesale Order Changes Report

Customer PO No. Start:	2658732391	Customer PO No. End:	2658732391	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
2658732391	6946685	WALMART01	0020	00022	7767	02/16/2023	02/21/2023		03/08/2023	MS8144409622-02	Princeton Comforter Set	Princeton	086569287922	576499520	3	SV3	B20230216204950		1	4	0	02/16/2023 22:03:16	yanxiaoying@scmhome.com	Zero out
2658732391	6946685	WALMART01	0020	00022	7767	02/16/2023	02/21/2023		03/08/2023	MS9744409622-77	K Victoria 7pc Comforter Set	Victoria	675716968588	564812558	2	SV3	B20230216204950		1	17	0	02/16/2023 21:38:53	yanxiaoying@scmhome.com	Zero out