

Date: 6/16/2023 10:58:21 AM

Bill Of Lading

SHIP FROM

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

Bill of Lading Number: 06757168000965613



SHIP TO

Name: Wal-Mart Regional DC - 4008 Location #: 4008
 Address: 1015 Hixson Blvd
 4008
 City/State/Zip: Lebanon, TN 37090
 CID#: _____ FOB:
 Dept: 00020

CARRIER NAME: FedEx
 Trailer number: T565885
 Seal number(s): 0000
SCAC: FDEG
Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid Collect 3rd Party X
 Master Bill of Lading: with attached underlying Bills of Lading (check box)

SPECIAL INSTRUCTIONS:
 Load #: 27703404

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
2329370204	1	0	5.94	Y N	06/21/2023	04008	0020	00020	
GRAND TOTAL	1	0	5.94						

CARRIER INFORMATION

HANDLING UNIT	PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodity requiring special or additional care or attention in handling or stowage must be so marked and packaged to insure safe transportation in ordinary use. See Section 2(a) of BLMF here 201.</small>	LTL ONLY	
	QTY	TYPE				NMFC #	CLASS
1		Pallet	35.00		Pallet		
	1	ctns	5.94		Shower curtain	49385	77.5
GRAND TOTAL	1		40.94				

When the rate is designated as Val, the shipper is required to complete this section and declare the value of the property as follows:
 *This agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

COB 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

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.
 _____ 6-16-23

Trailer Loaded: By Shipper By Driver
Freight Counted: By Shipper By Driver/pallets sold 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 Property described above is received in good order, except as noted.

Order No.: 7012143 Order Date: 06/08/2023 Customer: WALMART01 Customer PO No.: 2329370204
PO Type No.: 0020 Location No.: 4008 Dept. No.: 00020

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 REGIONAL DC - 4008
1015 HIXSON BLVD
LEBANON, TN 37090

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
578506708	BH5044409620-01	080569352205	BHG Spa Waffle Weave Shower Cu	EA	3	3	1	3	1

Total Quantity Ordered: 3
Total Ordered: 1
Total Quantity Shipped: 3
Total Cartons Shipped: 1