

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001045468	
Name: <b>E &amp; E COMPANY LTD</b>			
Address: <b>311 International Trade Pkwy</b>			
City/State/Zip: <b>Port Wentworth, GA 31407</b>			
SID#: _____ FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		<b>CARRIER NAME: WAL-MART FLEET</b>	
Name: <b>Consolidation Dock 7101</b> DC#: <b>7101</b>		Trailer number: <b>183654</b>	
Address: <b>1200 Mason Dixon Ln</b> Div.		Seal number(s): <b>5626197</b>	
City/State/Zip: <b>Conley, GA 30288</b>		SCAC: <b>WALM</b>	
SID#: _____ FOB: <input type="checkbox"/>		Pro Number: <b>0</b>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address: _____		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
City/State/Zip: _____		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time	
Load #: 72506883		Actual Driver Arrival Time	
		Driver Departure Time	
		0900 AM 0919 AM 1041 PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
			Y	N		DC#	Supplier#
1079700917	4	12.76	Y	N	06757168001045222	6020A	
9325166242	10	151.90	Y	N	06757168001045420	7038G	
4324946449	2	35.24	Y	N	06757168001045307	6020G	
2374297850	8	121.52	Y	N	06757168001045253	6024G	
4829850768	7	22.33	Y	N	06757168001045321	6024A	
5574886798	4	70.48	Y	N	06757168001045345	6040G	
9279970656	18	57.42	Y	N	06757168001045413	7038A	
6475645615	10	176.20	Y	N	06757168001045383	6048G	
8080160479	8	25.52	Y	N	06757168001045406	6040A	
2374297852	117	1355.53	Y	N	06757168001045260	6024G	
2374297868	140	2163.21	Y	N	06757168001045277	6024A	
4324946435	6	91.14	Y	N	06757168001045284	6020G	
4324946452	122	2072.19	Y	N	06757168001045314	6020A	
6475645602	12	182.28	Y	N	06757168001045369	6048G	

<p>When the value 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><b>COD Amount \$</b></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 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.

<p><b>SHIPPER SIGNATURE / DATE</b></p> <p>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 Pallet: 48 <i>Kw 10/25/23</i></p>	<p>Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b></p> <p>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><i>John Paul 20206 10/25/23</i></p>
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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001045468
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:		FOB: <input type="checkbox"/>

<b>SHIP TO</b>		<b>CARRIER NAME:</b> WAL-MART FLEET
Name:	Consolidation Dock 7101	Trailer number: 183654
	DC#: 7101	Seal number(s): 5628197
	Div.	
Address:	1200 Mason Dixon Ln 7101	SCAC: WALM
City/State/Zip:	Conley, GA 30288	Pro Number: 0
SID#:		FOB: <input type="checkbox"/>

<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> <b>MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING</b> (check box)	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time	Actual Driver Arrival Time
Load #: 72506883		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
6475645619	58	988.23	Y N	06757168001045390	6048A	
9325166243	98	1135.57	Y N	06757168001045437	7038G	
5574886801	174	2504.46	Y N	06757168001045352	6040A	
9325166254	2	35.24	Y N	06757168001045444	7038G	
1530240391	5	15.95	Y N	06757168001045246	6048A	
4324946436	78	914.00	Y N	06757168001045291	6020G	
6475645603	93	1088.26	Y N	06757168001045376	6048G	
1424707128	101	1166.24	Y N	06757168001045239	6030G	
5574886783	113	1310.97	Y N	06757168001045338	6040G	
9325166256	444	6408.47	Y N	06757168001045451	7038A	
<b>Grand Total</b>	1634	22105.11				

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 packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 309</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #	CLASS						
42	ctns			133.98		Shower curtain	49385	77.5			

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 _____	<b>COD Amount \$</b> Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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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 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.

<b>SHIPPER SIGNATURE / DATE</b> 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 Pallet: 48	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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.
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<b>Order No.:</b> 7076621	<b>Order Date:</b> 10/16/2023	<b>Customer:</b> WALMART	<b>Customer PO No.:</b> 6475645603
<b>PO Type No.:</b> 0003	<b>Location No.:</b> 6048G	<b>Dept. No.:</b> 00022	

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<b>SHIP FROM:</b> E & E COMPANY LTD 311 INTERNATIONAL TRADE PKWY PORT WENTWORTH, GA 31407	<b>BILL TO:</b> WAL-MART STORE 1108 SE 10TH STREET ATTN: A/P DEPT. BENTONVILLE, AR 72716	<b>SHIP TO:</b> WAL-MART DC 6048G-GENERAL 3160 HWY 743 OPELOUSAS, LA 70570
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Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
587374662	BH8144409622-03	086569509420	F/Q Pintuck Comforter Set	EA	1	13	13	13	13
587366129	BH8144409622-05	086569509444	F/Q Pintuck Comforter Set	EA	1	14	14	14	14
587366286	BH8144409622-06	086569509451	K Pintuck Comforter Set	EA	1	21	21	21	21
583249713	BH9044409622-05	086569396365	F/Q Comforter Mini Set	EA	1	18	18	18	18
655161464	MS9944409622-08	086569287991	Swiss Cross Comforter Set	EA	1	9	9	9	9
577082889	MS9944409622-29	086569318626	F Jade Comforter Set	EA	1	18	18	18	18

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<b>Total Quantity Ordered:</b>	<b>93</b>
<b>Total Ordered:</b>	<b>93</b>
<b>Total Quantity Shipped:</b>	<b>93</b>
<b>Total Cartons Shipped:</b>	<b>93</b>