

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Master Bill of Lading Number: 06757163000850624

SHIP TO
 Name: Wal-Mart DC 6031A-ASM DIS DC#: 6031A
 Div.
 Address: 23702 West Southern Avenue
 6031A
 City/State/Zip: Buckeye, AZ 85326
 SID#: _____ FOB:

CARRIER NAME: Pepsi Logistics Company
 Trailer number: 96556
 Seal number(s): 8068757
 SCAC: PLCY
 Pro Number:

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

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:
 Load #: 31176072

Appointment Time: 9:00 AM
 Actual Driver Arrival Time: 7:50 PM
 Driver Departure Time: 9:15 AM

| CUSTOMER ORDER INFORMATION | | | | | | | |
|----------------------------|-------------|-----------------|--------------------------|---|-------------------|-----------------------------|-----------|
| CUSTOMER ORDER NUMBER | # PKGS CTN | WEIGHT LBS | PALLET/SLIP (CIRCLE ONE) | | BOL# | ADDITIONAL SHIPPER INFO DC# | Supplier# |
| 7134621043 | 2 | 6.38 | Y | N | 06757163000850600 | 6031A | |
| 6874487901 | 1574 | 17501.17 | Y | N | 06757163000850617 | 6031A | |
| Grand Total | 1576 | 17507.55 | | | | | |

| 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 360</small> | LTL ONLY | |
|---------------|--------|------|------|----------|-------|------------------------|---------|------|------------|----------|--|----------|--|
| QTY | TYPE | QTY | TYPE | NMFC # | CLASS | | | | | | | | |
| 30 | Pallet | | | 1500.00 | | Pallet | | 70 | | | | | |
| | | 2 | ctns | 6.38 | | Shower curtain | 49385 | 77.5 | | | | | |
| | | 1574 | ctns | 17501.17 | | Comforters, Bedspreads | 49017 | 200 | | | | | |
| 30 | | | | 19007.55 | | 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

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 Pallet: 30
 12/20/23

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 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.
 12-20-23

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000850617

 (402)06757163000850617

SHIP TO
 Name: Wal-Mart DC 6031A-ASM DIS Location #: 6031A
 Address: 23702 West Southern Avenue
 6031A
 City/State/Zip: Buckeye, AZ 85326
 CID#: _____ FOB:
 Dept: 00022

CARRIER NAME: Pepsi Logistics Company
 Trailer number: 96556
 Seal number(s): 8068757
SCAC: PLCY
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
 Master Bill of Lading: with attached underlying Bills of Lading

| | | |
|------------------|----------------------------|-----------------------|
| Appointment Time | Actual Driver Arrival Time | Driver Departure Time |
| AM | AM | AM |
| PM | PM | PM |

SPECIAL INSTRUCTIONS:
 Load #: 31176072

| 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 |
| 6874487901 | 1574 | 29 | 17501.17 | Y | N | 12/20/2023 | 6031A | 0033 | 00022 | |
| GRAND TOTAL | 1574 | 29 | 17501.17 | | | | | | | |

| 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 | | |
| 29 | Pallet | | | 1450.00 | | Pallet | | | | |
| | | 1574 | ctns | 17501.17 | | Comforters, Bedspreads | 49017 | 200 | | |
| 29 | | 1574 | | 18951.17 | | GRAND TOTAL | | | | |

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 _____

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 _____

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:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 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. Property described above is received in good order, except as noted.

Date: 12/20/2023 9:03:43 AM

Bill Of Lading

Page 1 of 1

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:

FOB:

Bill of Lading Number: 06757163000850600



(402)06757163000850600

SHIP TO

Name: Wal-Mart DC 6031A-ASM DIS Location #: 6031A
 Address: 23702 West Southern Avenue
 6031A
 City/State/Zip: Buckeye, AZ 85326
 CID#:
 Dept: 00020

FOB:

CARRIER NAME: Pepsi Logistics Company

Trailer number: 96556
 Seal number(s): 8068757

SCAC: PLCY

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

Master Bill of Lading: with attached underlying Bills of Lading (check box)

| Appointment Time | Actual Driver Arrival Time | Driver Departure Time |
|------------------|----------------------------|-----------------------|
| AM | AM | AM |
| PM | PM | PM |

SPECIAL INSTRUCTIONS:
 Load #: 31176072

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 |
|-----------------------|----------|------------|-------------|---------------------------|---|----------------------|----------------------------|------------------------|----------------------|-------------------------|
| 7134621043 | 2 | 1 | 6.38 | Y | N | 12/20/2023 | 6031A | 0033 | 00020 | |
| GRAND TOTAL | 2 | 1 | 6.38 | | | | | | | |

CARRIER INFORMATION

| HANDLING UNIT | | PACKAGE | | WEIGHT | H.M. (X) | COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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 | | | 50.00 | | Pallet | | |
| | | 2 | ctns | 6.38 | | Shower curtain | 49385 | 77.5 |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 1 | | 2 | | 56.38 | | GRAND TOTAL | | |

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 _____

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

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:

By Shipper
 By Driver

Freight Counted:

By Shipper
 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. *Property described above is received in good order, except as noted.*