

Date: 4/23/2024 11:57:15 AM

Master Bill Of Lading

Page 1 of 4

SHIP FROM		Master Bill of Lading Number: 06757168001155334
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:		FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME: WAL-MART FLEET
Name:	Consolidation Dock 7101	DC#: 7101
		Div.
Address:	1200 Mason Dixon Ln 7101	Trailer number: 191304
		Seal number(s): 5627961
City/State/Zip:	Conley, GA 30288	SCAC: WALM
SID#:		Pro Number:
		FOB: <input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 77125523		0900 AM	0916 AM
			Driver Departure Time
			1220 PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
1079607821	28	244.16	Y	N	06757168001152098	7035G	
1079607823	28	244.16	Y	N	06757168001152104	7035G	
1880493499	16	139.52	Y	N	06757168001152111	7045G	
1880493501	16	139.52	Y	N	06757168001152128	7045G	
1880543233	60	523.20	Y	N	06757168001152135	6018G	
1880543235	60	523.20	Y	N	06757168001152142	6018G	
3030374035	92	802.24	Y	N	06757168001152159	6043G	
3030374038	92	802.24	Y	N	06757168001152166	6043G	
3130373939	56	488.32	Y	N	06757168001152173	6039G	
3130373942	56	488.32	Y	N	06757168001152180	6039G	
3131042372	40	348.80	Y	N	06757168001152197	6048G	
3131042374	40	348.80	Y	N	06757168001152203	6048G	
3730294474	64	558.08	Y	N	06757168001152210	6006G	
3730294475	64	558.08	Y	N	06757168001152227	6006G	

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: <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.
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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 Pallets: 51 <i>Kew 4-23-24</i>	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. <i>SWT John Demmitt 3998</i>
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SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____ FOB:

Master Bill of Lading Number: 06757168001155334

SHIP TO
 Name: Consolidation Dock 7101 DC#: 7101
 Div. _____
 Address: 1200 Mason Dixon Ln
 7101
 City/State/Zip: Conley, GA 30288
 SID#: _____ FOB:

CARRIER NAME: WAL-MART FLEET
 Trailer number: 191304
 Seal number(s): 5627961
 SCAC: WALM
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____
 SPECIAL INSTRUCTIONS:
 Load #: 77125523

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LANDING: WITH ATTACHED
 (check box) UNDERLYING BILLS OF LANDING
 Appointment Time AM PM Actual Driver Arrival Time 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#
6630095376	32	279.04	Y	N	06757168001152340	6054G	
6630095666	32	151.68	Y	N	06757168001152029	6054G	
7829966273	48	418.56	Y	N	06757168001152357	6068G	
7829966276	48	418.56	Y	N	06757168001152364	6068G	
7829966590	48	227.52	Y	N	06757168001152036	6068G	
7980155246	60	523.20	Y	N	06757168001152371	6017G	
7980155247	60	523.20	Y	N	06757168001152388	6017G	
7980155554	72	341.28	Y	N	06757168001152043	6017G	
8230383830	44	383.68	Y	N	06757168001152395	6010G	
8230383831	44	383.68	Y	N	06757168001152401	6010G	
8230384125	56	265.44	Y	N	06757168001152050	6010G	
8880833068	24	209.28	Y	N	06757168001152418	6011G	
8880833070	24	209.28	Y	N	06757168001152425	6011G	
8880833380	32	151.68	Y	N	06757168001152067	6011G	

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: 51

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.

Order No.: 70313073 **Order Date:** 04/10/2024 **Customer:** WALMARTWHS **Customer PO No.:** 7829966590
PO Type No.: 0003 **Location No.:** 6068G **Dept. No.:** 00014

SHIP FROM:
E & E COMPANY LTD
311 INTERNATIONAL TRADE PKWY
PORT WENTWORTH, GA 31407

BILL TO:
WAL-MART STORE 111 WHS
1108 SE 10TH STREET
ATTN: A/P DEPT.
BENTONVILLE, AR 72716

SHIP TO:
WAL-MART DC 6068G-GENERAL
2120 N. STEMMONS ST
SANGER, TX 76266

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666855825	SD170-0003	022164359855	Ice Cream Mixer	EA	1	24	24	24	24
666855826	SD170-0017	022164367485	Snow Cone Kit Set	EA	6	144	24	144	24

Total Quantity Ordered: 168
Total Ordered: 48
Total Quantity Shipped: 168
Total Cartons Shipped: 48