

<b>SHIP FROM</b>		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"/>	

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

<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms:
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:		(check box) UNDERLYING BILLS OF LANDING
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time
Load #: 77125523		Actual Driver Arrival Time
		Driver Departure Time
		0900 AM PM 0916 AM PM 1220 AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		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 \_\_\_\_\_"

<b>COD Amount \$</b>
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.

<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 Pallets: 51 <i>Kw 4-23-24</i>	<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. <i>Sub John Odom 3990</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 Actual Driver Arrival Time Driver Departure Time  
 AM AM AM  
 PM PM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
9630264726	68	592.96	Y	N	06757168001152432	6070G	
9630264727	68	592.96	Y	N	06757168001152449	6070G	
9630265030	80	379.20	Y	N	06757168001152074	6070G	
9680224806	44	383.68	Y	N	06757168001152456	6040G	
9680224809	44	383.68	Y	N	06757168001152463	6040G	
9680225097	56	265.44	Y	N	06757168001152081	6040G	
9980115282	28	244.16	Y	N	06757168001152470	6024G	
9980115283	28	244.16	Y	N	06757168001152487	6024G	
<b>Grand Total</b>	2128	16773.12					

CARRIER INFORMATION						LTL ONLY	
HANDLING UNIT	PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	NMFC #	CLASS
2128	ctns		16773.12		Ice Cream Maker	55620	100
2128			16773.12		<b>Grand Total</b>		

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 \*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 \_\_\_\_\_

<p><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.</p> <p>Total Pallet: 51</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/Plates</p>	<p><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.</p>
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Order No.: 70293141      Order Date: 04/04/2024      Customer: WALMARTWHS      Customer PO No.: 9630264726  
 PO Type No.: 0003      Location No.: 6070G      Dept. No.: 00014

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**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 6070G-GENERAL  
 200 WAL-MART DRIVE  
 SHELBY, NC 28150

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666855827	SD170-0015	022164367461	Ice Shaver-Better	EA	2	68	34	68	34
666855828	SD170-0016	022164367478	Ice Shaver-Better	EA	2	68	34	68	34

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**Total Quantity Ordered: 136**  
**Total Ordered: 68**  
**Total Quantity Shipped: 136**  
**Total Cartons Shipped: 68**