

Date: 6/27/2024 2:08:29 PM

Master Bill Of Lading

SHIP FROM

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

Master Bill of Lading Number: 06757163000903078

SHIP TO

Name: Wal-Mart DC 6026A - ASM DIS DC#: 6026A
 Div.
 Address: 10815 STATE HWY 99W
 6026A
 City/State/Zip: Red Bluff, CA 96080
 SID#: _____ FOB:

CARRIER NAME: Central Transport

Trailer number: 2100019

Seal number(s):

SCAC: CTII

Pro Number: 777-7121815-1

THIRD PARTY FREIGHT CHARGES BILL TO:

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

WWW.CENTRALTRANSPORTATION.COM
 Driver's Signature Only Acknowledges Receipt of Freight
777-7121815-1

CENTRAL TRANSPORT SHIPPER LABEL
Subject to NMFC 100, CT 100CT 101
 Rules Tariffs, 49 USC 14705 and 49 CFR 370

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

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

SPECIAL INSTRUCTIONS:

Load #: 35034712

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
6575028294	45	783.00	Y	N	06757163000902996	6026G	
3230326149	1	4.50	Y	N	06757163000903047	6026A	
6575028296	141	2508.58	Y	N	06757163000903023	6026G	
Grand Total	187	3296.08					

CARRIER INFORMATION

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
8	Pallet			400.00		Pallet		70
		1	ctns	4.50		Ice Cream Powder	72750	92.5
		186	ctns	3291.58		Sheet Set & Pillowcase	49260 Sub 3	250
8				3696.08		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.

Total Pallet: 8 *6/27/24*

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.

[Signature] *6-28*

Date: 6/27/2024 2:08:28 PM

Bill Of Lading

Page 1 of 1

SHIP FROM				SHIP TO			
Name:	E & E COMPANY LTD			Name:	Wal-Mart DC 6026G - General Location #: 6026G		
Address:	221 Hanson Way			Address:	10815 STATE HWY 99W		
City/State/Zip:	Woodland, CA 95776			City/State/Zip:	Red Bluff, CA 96080		
SID#:	FOB: <input type="checkbox"/>			CID#:	FOB: <input type="checkbox"/>		
THIRD PARTY FREIGHT CHARGES BILL TO:				Name:			
Address:				Address:			
City/State/Zip:				City/State/Zip:			
SPECIAL INSTRUCTIONS:				SPECIAL INSTRUCTIONS:			
Load #: 35034712				Load #: 35034712			
Bill of Lading Number: 06757163000903023				CARRIER NAME: Central Transport			
				Trailer number: 2100019			
(402)06757163000903023				Seal number(s):			
SCAC: CTII				Pro Number: 777-7121815-1			
Freight Charge Terms: (freight charges are prepaid unless marked otherwise)				Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/>			
<input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading				Appointment Time			
				AM		AM	
				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
6575028296	141	5	2508.58	Y	N	07/01/2024	6026G	0003	00022	
GRAND TOTAL	141	5	2508.58							

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	
5	Pallet			250.00		Pallet			
		141	ctns	2508.58		Sheet Set & Pillowcase	49260 Sub 3	250	
5		141		2758.58		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: <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.	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: <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>Property described above is received in good order, except as noted.</i>		

Date: 6/27/2024 2:08:28 PM

Bill Of Lading

SHIP FROM

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

FOB:

Bill of Lading Number: 06757163000902996



(402)06757163000902996

SHIP TO

Name: Wal-Mart DC 6026G - General Location #: 6026G
Address: 10815 STATE HWY 99W
6026G
City/State/Zip: Red Bluff, CA 96080
CID#:
Dept: 00022

FOB:

CARRIER NAME: Central Transport

Trailer number: 2100019

Seal number(s):

SCAC: CTII

Pro Number: 777-7121815-1

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

SPECIAL INSTRUCTIONS:

Load #: 35034712

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

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
6575028294	45	2	783.00	Y	N	07/01/2024	6026G	0003	00022	
GRAND TOTAL	45	2	783.00							

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
2	Pallet			100.00		Pallet		
		45	ctns	783.00		Sheet Set & Pillowcase	49260 Sub 3	250
2		45		883.00		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.

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

Bill of Lading Number: 06757163000903047

 (402)06757163000903047

SHIP TO
 Name: Wal-Mart DC 6026A - ASM DIS Location #: 6026A
 Address: 10815 STATE HWY 99W
 6026A
 City/State/Zip: Red Bluff, CA 96080
 CID#: _____ FOB:
 Dept: 00014

CARRIER NAME: Central Transport
 Trailer number: 2100019
 Seal number(s): _____
SCAC: CTII
Pro Number: 777-7121815-1

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

SPECIAL INSTRUCTIONS:
 Load #: 35034712

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

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
3230326149	1	1	4.50	Y	N	07/01/2024	6026A	0033	00014	
GRAND TOTAL	1	1	4.50							

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
1	Pallet			50.00		Pallet		
		1	ctns	4.50		Ice Cream Powder	72750	92.5
1		1		54.50		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.*

Shipment Manifest (300090302)

BOL #:	06757163000903023	Customer:	WALMARTWHS	Ship To:	6026G
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034712
Trailer Number:	2100019	Pro Number:	777-7121815-1	Seal Number:	
Total Cartons/Units:	141/141	Total Cube:	341.22	Total Weight(LB):	2508.58
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6026G - General 10815 STATE HWY 99W Red Bluff, CA 96080		

<u>Customer PO No.</u>	<u>E&E SO No.</u>	<u>Mark for Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To Ship</u>	<u>Case Pack Qty</u>	<u>Total Cartons</u>	<u>Carton Weight (LB)</u>	<u>Total Weight (LB)</u>	<u>Carton Cube</u>	<u>Total Cube</u>
6575028296	70542345		WM90-418	022164389500 668313981 Pillow Cover	115	1	115	18.28	2102.20	2.42	278.30
6575028296	70542345		WM90-419	022164389616 668313982 Pillow Cover	26	1	26	15.63	406.38	2.42	62.92

Shipment Manifest (300090299)

BOL #:	06757163000902996	Customer:	WALMARTWHS	Ship To:	6026G
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034712
Trailer Number:	2100019	Pro Number:	777-7121815-1	Seal Number:	
Total Cartons/Units:	45/45	Total Cube:	108.90	Total Weight(LB):	783.00
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6026G - General 10815 STATE HWY 99W Red Bluff, CA 96080		

<u>Customer</u> <u>PO No.</u>	<u>E&E</u> <u>SO No.</u>	<u>Mark for</u> <u>Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To</u> <u>Ship</u>	<u>Case</u> <u>Pack Qty</u>	<u>Total</u> <u>Cartons</u>	<u>Carton</u> <u>Weight</u> <u>(LB)</u>	<u>Total</u> <u>Weight</u> <u>(LB)</u>	<u>Carton</u> <u>Cube</u>	<u>Total</u> <u>Cube</u>
6575028294	70537509		WM90-417	022164389494 668313980 Pillow Cover	45	1	45	17.40	783.00	2.42	108.90

Shipment Manifest (300090304)

BOL #:	06757163000903047	Customer:	WALMARTWHS	Ship To:	6026A
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034712
Trailer Number:	2100019	Pro Number:	777-7121815-1	Seal Number:	
Total Cartons/Units:	1/8	Total Cube:	0.19	Total Weight(LB):	4.50
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6026A - ASM DIS 10815 STATE HWY 99W Red Bluff, CA 96080		

<u>Customer</u> <u>PO No.</u>	<u>E&E</u> <u>SO No.</u>	<u>Mark for</u> <u>Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To</u> <u>Ship</u>	<u>Case</u> <u>Pack Qty</u>	<u>Total</u> <u>Cartons</u>	<u>Carton</u> <u>Weight</u> <u>(LB)</u>	<u>Total</u> <u>Weight</u> <u>(LB)</u>	<u>Carton</u> <u>Cube</u>	<u>Total</u> <u>Cube</u>
3230326149	70876824		SD171-0022	022164360271 666852235 Ice Cream Mixes	8	8	1	4.50	4.50	0.19	0.19