

Date: 6/17/2024 1:28:43 PM

Master Bill Of Lading

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: 06757168001193657

SHIP TO
 Name: Wal-Mart DC 7035A-ASM DIS DC#: 7035A
 Div. _____
 Address: 18815 NW 115 Avenue
 7035A
 City/State/Zip: Alachua, FL 32615
 SID#: _____ FOB:

CARRIER NAME: WAL-MART FLEET
 Trailer number: 189661
 Seal number(s): 40350649
 SCAC: WALM
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____
 SPECIAL INSTRUCTIONS:
 Load #: 78563098

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LANDING: WITH ATTACHED
 (check box) UNDERLYING BILLS OF LANDING
 Appointment Time: 0930 AM
 Actual Driver Arrival Time: 1226 PM
 Driver Departure Time: 1328 PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#	
1079609275	36	276.10	Y	N	06757168001193558	7035A	
1431600772	446	5094.26	Y	N	06757168001193534	7035A	
1431600773	131	2023.49	Y	N	06757168001193527	7035A	
3508527143	324	3987.72	Y	N	06757168001193510	7035R	
9031122463	582	2297.97	Y	N	06757168001193503	7035A	
Grand Total	1519	13679.54					

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(a) of NMFC Rule 309.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
901	ctns			11105.47		Comforters, Bedspreads	49017	200
36	ctns			276.10		Ice Cream Maker	55620	100
582	ctns			2297.97		Panels, Valances	49260 Sub 4	175
1519				13679.54		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 / DATE
 his is to certify that the above named materials are properly loaded, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.
 06/17/24
[Signature]

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] 6/17/24

