

SHIP FROM		Master Bill of Lading Number: 06757168001225778	
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: Schneider	
Name:	Wal-Mart Center Point 7976	DC#:	7976
		Div.:	
Address:	423 Pitts School Road 7976	Trailer number:	205068
		Seal number(s):	5624964
City/State/Zip:	Concord, NC 28027	SCAC:	SCNN
SID#:		Pro Number:	0000
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		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: Load #: 35261247		Appointment Time	Actual Driver Arrival Time
		1300 AM	1140 AM
			Driver Departure Time
			1408 AM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
8880835071	1	6.49	Y	N	06757168001225693	6011A	
2282050030	3	19.47	Y	N	06757168001225594	7035A	
2730338422	4	25.96	Y	N	06757168001225587	7036A	
3131044381	5	32.45	Y	N	06757168001225570	6048A	
1880495535	3	19.47	Y	N	06757168001225655	7045A	
5380894930	13	84.37	Y	N	06757168001225723	6023A	
9680226864	9	58.41	Y	N	06757168001225709	6040A	
5735156255	6	38.94	Y	N	06757168001225754	6092A	
4480237061	11	71.39	Y	N	06757168001225624	6066A	
5030147298	2	12.98	Y	N	06757168001225631	6020A	
3930246734	4	25.96	Y	N	06757168001225600	7038A	
8230385899	10	64.90	Y	N	06757168001225716	6010A	
3130375943	8	51.92	Y	N	06757168001225464	6039A	
3730296575	16	103.84	Y	N	06757168001225525	6006A	

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

<p>SHIPPER SIGNATURE / DATE</p> <p>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: 25 <i>XW 7-22-24</i></p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>	<p>CARRIER SIGNATURE / PICKUP DATE</p> <p>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> <p><i>Tonelle Wilkin 7-22-24</i></p>
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SHIP FROM		Master Bill of Lading Number: 06757168001225778	
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: Schneider	
Name: Wal-Mart Center Point 7976 DC#: 7976 Div. _____ Address: 423 Pitts School Road 7976 City/State/Zip: Concord, NC 28027 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 205068 Seal number(s): 5624964 SCAC: SCNN Pro Number: 0000	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 35281247		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
		Appointment Time AM PM	Actual Driver Arrival Time AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
7335195824	4	25.96	Y	N	06757168001225457	6030A	
1730326501	5	32.45	Y	N	06757168001225495	6027A	
2830167110	1	6.49	Y	N	06757168001225488	6036A	
3931034419	11	71.39	Y	N	06757168001225563	6009A	
6630097469	5	32.45	Y	N	06757168001225747	6054A	
8934877720	1	6.49	Y	N	06757168001225761	6080A	
1880545294	10	64.90	Y	N	06757168001225549	6018A	
5380067930	3	19.47	Y	N	06757168001225679	6094A	
5382040029	21	136.29	Y	N	06757168001225440	7033A	
7980157502	14	90.86	Y	N	06757168001225686	6017A	
9630266880	19	123.31	Y	N	06757168001225730	6070A	
Grand Total	189	1226.61					

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. <p style="text-align: right;">Shipper Signature</p>	
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: 25	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.		

Order No.: 71049561 **Order Date:** 07/17/2024 **Customer:** WALMARTWHS **Customer PO No.:** 2830167110
PO Type No.: 0033 **Location No.:** 6036A **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 6036A-ASM DIS
8660 SOUTH US HWY 79
PALESTINE, TX 75803

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666852222	SD171-0021	022164360264	Ice Syrups	EA	6	6	1	6	1

Total Quantity Ordered: 6
Total Ordered: 1
Total Quantity Shipped: 6
Total Cartons Shipped: 1