

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001228434	
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>		<b>CARRIER NAME:</b> Prime Inc	
Name:	Wal-mart Centerpoint #7840	DC#:	7840
		Div.:	
Address:	1980 Getwell Rd 7840	Trailer number:	241154
City/State/Zip:	Memphis, TN 38111	Seal number(s):	5028143 <sup>OG</sup>
SID#:	FOB: <input type="checkbox"/>	SCAC:	PRIJ
		Pro Number:	0000
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
<b>SPECIAL INSTRUCTIONS:</b> Load #: 35305460		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
		Appointment Time	Actual Driver Arrival Time
		13:00 AM	12:30 AM
		13:42 AM	

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
7980157575	4	25.96	Y N	06757168001228335	6017A	
1430197140	3	19.47	Y N	06757168001215533	6031A	
1880495606	4	25.96	Y N	06757168001228410	7045A	
3030375880	13	84.37	Y N	06757168001215595	6043A	
3429798555	15	97.35	Y N	06757168001215687	6037A	
2730336496	9	58.41	Y N	06757168001228137	7036A	
9630266959	5	32.45	Y N	06757168001228274	6070A	
2830167189	2	12.98	Y N	06757168001228212	6036A	
6630097537	5	32.45	Y N	06757168001228373	6054A	
3131044445	4	25.96	Y N	06757168001228199	6048A	
5030147376	2	12.98	Y N	06757168001228267	6020A	
8880835129	6	38.94	Y N	06757168001228328	6011A	
1880545359	13	84.37	Y N	06757168001228113	6018A	
1880545365	4	25.96	Y N	06757168001228403	6018A	

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**

<p><b>SHIPPER SIGNATURE / DATE</b></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: 43 <i>OGT/25/24</i></p>	<p><b>Trailer Loaded:</b></p> <p><input checked="" type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver</p>	<p><b>Freight Counted:</b></p> <p><input checked="" type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver/pallets said to contain</p> <p><input type="checkbox"/> By Driver/Pieces</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b></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>[Signature]</i> <i>07/25/24</i></p>
--	---	---	--

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001228434	
Name: <b>E &amp; E COMPANY LTD</b>			
Address: <b>311 International Trade Pkwy</b>			
City/State/Zip: <b>Port Wentworth, GA 31407</b>			
SID#: _____ FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		CARRIER NAME: <b>Prime Inc</b>	
Name: <b>Wal-mart Centerpoint #7840</b> DC#: <b>7840</b>		Trailer number: <b>241154</b>	
Address: <b>1980 Getwell Rd</b> Div. _____		Seal number(s): <b>568143</b>	
City/State/Zip: <b>Memphis, TN 38111</b>		SCAC: <b>PRIJ</b>	
SID#: _____ FOB: <input type="checkbox"/>		Pro Number: <b>0000</b>	
<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"/> <b>MASTER BILL OF LANDING: WITH ATTACHED</b>	
City/State/Zip: _____		(check box) <b>UNDERLYING BILLS OF LANDING</b>	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time	
Load #: 35305460		Actual Driver Arrival Time	
		Driver Departure Time	
		AM PM AM PM AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
6630097542	2	12.98	Y	N	06757168001228304	6054A	
1330445349	10	64.90	Y	N	06757168001215526	6038A	
3130376019	4	25.96	Y	N	06757168001228175	6039A	
1880495610	2	12.98	Y	N	06757168001228427	7045A	
3880246910	3	19.47	Y	N	06757168001228229	6012A	
8230385968	10	64.90	Y	N	06757168001228342	6010A	
3130376021	5	32.45	Y	N	06757168001228236	6039A	
3131044443	7	45.43	Y	N	06757168001228182	6048A	
5380895003	9	58.41	Y	N	06757168001228311	6023A	
1880545091	23	174.77	Y	N	06757168001215564	6018A	
5235146429	4	25.96	Y	N	06757168001228250	6016A	
7829968597	1	6.49	Y	N	06757168001228106	6068A	
8880835135	2	12.98	Y	N	06757168001228281	6011A	
9680226952	8	51.92	Y	N	06757168001228380	6040A	

<p>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 _____</p>	<p><b>COD Amount \$</b> _____</p> <p><b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
---	---

**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;"><b>Shipper Signature</b></p>		
<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 Pallets: 43</p>	<table style="width:100%;"> <tr> <td style="width: 50%;"> <b>Trailer Loaded:</b>  <input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver                 </td> <td style="width: 50%;"> <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                 </td> </tr> </table>	<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>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		
<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>			

---

**Order No.:** 71090213      **Order Date:** 07/21/2024      **Customer:** WALMARTWHS      **Customer PO No.:** 6630097542  
**PO Type No.:** 0033      **Location No.:** 6054A      **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 6054A-ASM DIS  
385 CALLAWAY CHURCH ROAD  
LA GRANGE, GA 30241

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666852223	SD171-0018	022164360233	Ice Syrups	EA	6	6	1	6	1
666852224	SD171-0020	022164360257	Ice Syrups	EA	6	6	1	6	1

---

**Total Quantity Ordered:** 12  
**Total Ordered:** 2  
**Total Quantity Shipped:** 12  
**Total Cartons Shipped:** 2