

SHIP FROM

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

Master Bill of Lading Number: 06757163000903054

SHIP TO

Name: Wal-Mart DC 6021A - ASM DIS DC#: 6021A
 Div. _____
 Address: 1005 South H Street
 6021A
 City/State/Zip: Porterville, CA 93257
 SID#: _____ FOB:

CARRIER NAME: Central Transport

Trailer number: 2100019
 Seal number(s): _____
 SCAC: CTII
 Pro Number: 777-7121813-6

THIRD PARTY FREIGHT CHARGES BILL TO:

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



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 PM	AM PM	AM PM

SPECIAL INSTRUCTIONS:

Load #: 35034680

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
3680395524	3	13.48	Y	N	06757163000903030	6021A	
4525478065	33	574.20	Y	N	06757163000902972	6021G	
4525478067	149	2652.17	Y	N	06757163000903009	6021G	
Grand Total	185	3239.85					

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
7	Pallet			350.00		Pallet		70
		3	ctns	13.48		Ice Cream Powder	72750	92.5
		182	ctns	3226.37		Sheet Set & Pillowcase	49260 Sub 3	250
7				3589.85		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

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: 7 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.

6-28

SHIP FROM

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

FOB:

Bill of Lading Number: 06757163000902972



(402)06757163000902972

SHIP TO

Name: Wal-Mart DC 6021G - General Location #: 6021G
 Address: 1005 South H Street
 6021G
 City/State/Zip: Porterville, CA 93257
 CID#:
 Dept: 00022

FOB:

CARRIER NAME: Central Transport

Trailer number: 2100019

Seal number(s):

SCAC: CTII

Pro Number: 777-7121813-6

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 #: 35034680

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
4525478065	33	1	574.20	Y	N	07/01/2024	6021G	0003	00022	
GRAND TOTAL	33	1	574.20							

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		
		33	ctns	574.20		Sheet Set & Pillowcase	49260 Sub 3	250
1		33		624.20		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: 06757163000903009

 (402)06757163000903009

SHIP TO
 Name: Wal-Mart DC 6021G - General Location #: 6021G
 Address: 1005 South H Street
 6021G
 City/State/Zip: Porterville, CA 93257
 CID#: _____ FOB:
 Dept: 00022

CARRIER NAME: Central Transport
 Trailer number: 2100019
 Seal number(s): _____
SCAC: CTII
Pro Number: 777-7121813-6

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid Collect X 3rd Party

SPECIAL INSTRUCTIONS:
 Load #: 35034680

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
4525478067	149	5	2652.17	Y	N	07/01/2024	6021G	0003	00022	
GRAND TOTAL	149	5	2652.17							

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				
		149	ctns	2652.17		Sheet Set & Pillowcase		49260 Sub 3	250	
5		149		2902.17		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: 06757163000903030

 (402)06757163000903030

SHIP TO
 Name: Wal-Mart DC 6021A - ASM DIS Location #: 6021A
 Address: 1005 South H Street
 6021A
 City/State/Zip: Porterville, CA 93257
 CID#: _____ FOB:
 Dept: 00014

CARRIER NAME: Central Transport
 Trailer number: 2100019
 Seal number(s): _____
SCAC: CTII
Pro Number: 777-7121813-6

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 #: 35034680

Master Bill of Lading: with attached 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
3680395524	3	1	13.48	Y	N	06/30/2024	6021A	0033	00014	
GRAND TOTAL	3	1	13.48							

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		
1	Pallet			50.00		Pallet				
		3	ctns	13.48		Ice Cream Powder	72750	92.5		
1		3		63.48		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 property 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 (300090297)

BOL #:	06757163000902972	Customer:	WALMARTWHS	Ship To:	6021G
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034680
Trailer Number:	2100019	Pro Number:	777-7121813-6	Seal Number:	
Total Cartons/Units:	33/33	Total Cube:	79.86	Total Weight(LB):	574.20
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6021G - General 1005 South H Street Porterville, CA 93257		

<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>
4525478065	70537490		WM90-417	022164389494 668313980 Pillow Cover	33	1	33	17.40	574.20	2.42	79.86

Shipment Manifest (300090300)

BOL #:	06757163000903009	Customer:	WALMARTWHS	Ship To:	6021G
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034680
Trailer Number:	2100019	Pro Number:	777-7121813-6	Seal Number:	
Total Cartons/Units:	149/149	Total Cube:	360.58	Total Weight(LB):	2652.17
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6021G - General 1005 South H Street Porterville, CA 93257		

<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>
4525478067	70542335		WM90-418	022164389500 668313981 Pillow Cover	122	1	122	18.28	2230.16	2.42	295.24
4525478067	70542335		WM90-419	022164389616 668313982 Pillow Cover	27	1	27	15.63	422.01	2.42	65.34

Shipment Manifest (300090303)

BOL #:	06757163000903030	Customer:	WALMARTWHS	Ship To:	6021A
Carrier:	Central Transport	Ship Date:	06/28/2024	Load Number:	35034680
Trailer Number:	2100019	Pro Number:	777-7121813-6	Seal Number:	
Total Cartons/Units:	3/24	Total Cube:	0.57	Total Weight(LB):	13.48
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6021A - ASM DIS 1005 South H Street Porterville, CA 93257		

<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>
3680395524	70876822		SD171-0022	022164360271 666852235 Ice Cream Mixes	8	8	1	4.50	4.50	0.19	0.19
3680395524	70876822		SD171-0023	022164360288 666852232 Ice Cream Mixes	8	8	1	4.49	4.49	0.19	0.19
3680395524	70876822		SD171-0024	022164360295 666852234 Ice Cream Mixes	8	8	1	4.49	4.49	0.19	0.19