

Date: 9/3/2024 10:25:56 AM

# Master Bill Of Lading

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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001259216	
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> WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	180140
		Seal number(s):	5627803
City/State/Zip:	Conley, GA 30288	SCAC:	WALM
SID#:		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"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
<b>SPECIAL INSTRUCTIONS:</b>		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
Load #: 80751608		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
5735156972	4	25.96	Y	N	06757168001258974	6092A
3430825640	1	6.49	Y	N	06757168001257724	7039A
6630098220	4	25.96	Y	N	06757168001259001	6054A
8880835766	4	25.96	Y	N	06757168001259124	6011A
5235147144	9	58.41	Y	N	06757168001258912	6016A
5380068685	2	12.98	Y	N	06757168001258929	6094A
3930247452	3	19.47	Y	N	06757168001258752	7038A
8230386656	5	32.45	Y	N	06757168001259094	6010A
5030148033	3	19.47	Y	N	06757168001258851	6020A
5380895693	6	38.94	Y	N	06757168001258950	6023A
6630098249	5	32.45	Y	N	06757168001259018	6054A
3429799577	5	32.45	Y	N	06757168001257717	6037A
3680396717	16	103.84	Y	N	06757168001257731	6021A
8680257604	7	45.43	Y	N	06757168001259100	6019A

When 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.

<b>SHIPPER SIGNATURE / DATE</b> <small>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.</small> Total Pallets: 50 <i>XW9304</i>	<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>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and driver has the DOT emergency response guidebook on board the vehicle.</small> <i>James White</i> 9/3/24
	Shipper Signature		

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Address:	311 International Trade Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:	FOB: <input type="checkbox"/>		
<b>SHIP TO</b>		<b>CARRIER NAME: WAL-MART FLEET</b>	
Name:	Consolidation Dock 7101	DC#: 7101	
		Div.	
Address:	1200 Mason Dixon Ln		
	7101		
City/State/Zip:	Conley, GA 30288		
SID#:	FOB: <input type="checkbox"/>		
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:		3rd Party: <input type="checkbox"/>	
City/State/Zip:			
<b>SPECIAL INSTRUCTIONS:</b>		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
Load #: 80751608		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3730297319	12	77.88	Y N	06757168001257748	6006A	
7335196630	10	64.90	Y N	06757168001259025	6030A	
7980158269	22	474.28	Y N	06757168001259049	6017A	
8180386733	22	142.78	Y N	06757168001259070	6025A	
9630267660	17	161.33	Y N	06757168001259148	6070A	
3230327370	15	97.35	Y N	06757168001257700	6026A	
5780326979	3	19.47	Y N	06757168001258981	7034A	
6280396871	25	162.25	Y N	06757168001258998	7026A	
<b>Grand Total</b>	<b>430</b>	<b>3300.70</b>				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodity requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
430	ctns			3300.70		Ice Cream Powder	72750	92.5
430				3300.70		<b>Grand Total</b>		

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 \*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:50

## 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.

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<b>Order No.:</b> 71389419	<b>Order Date:</b> 08/24/2024	<b>Customer:</b> WALMARTWHS	<b>Customer PO No.:</b> 7980158269
<b>PO Type No.:</b> 0033	<b>Location No.:</b> 6017A	<b>Dept. No.:</b> 00014	

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**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 6017A - ASM DIS  
 2106 EAST TIPTON STREET  
 SEYMOUR, IN 47274

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666041517	SD171-0004	022164359862	Ice Syrups	EA	6	78	13	78	13
666852223	SD171-0018	022164360233	Ice Syrups	EA	6	12	2	12	2
666852225	SD171-0019	022164360240	Ice Syrups	EA	6	18	3	18	3
666852224	SD171-0020	022164360257	Ice Syrups	EA	6	12	2	12	2
666852222	SD171-0021	022164360264	Ice Syrups	EA	6	12	2	12	2

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<b>Total Quantity Ordered:</b>	<b>132</b>
<b>Total Ordered:</b>	<b>22</b>
<b>Total Quantity Shipped:</b>	<b>132</b>
<b>Total Cartons Shipped:</b>	<b>22</b>