

SHIP FROM		Master Bill of Lading Number: 06757168001269277	
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: WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	199051
		Seal number(s):	36975864
City/State/Zip:	Conley, GA 30288	SCAC:	WALM
SID#:		Pro Number:	0000
		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
Load #: 81130132		Appointment Time	Actual Driver Arrival Time
		1100 AM	10:07 PM
			Driver Departure Time
			1256 PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
4480238102	14	90.86	Y	N	06757168001268751	6066A	
3430825867	1	6.49	Y	N	06757168001268706	7039A	
5030277589	6	38.94	Y	N	06757168001268775	6035A	
5235147399	13	84.37	Y	N	06757168001268812	6016A	
7335196874	6	38.94	Y	N	06757168001268966	6030A	
1730327519	7	45.43	Y	N	06757168001268584	6027A	
3680396953	5	32.45	Y	N	06757168001268713	6021A	
5030148296	12	77.88	Y	N	06757168001268768	6020A	
1430198415	12	77.88	Y	N	06757168001268577	6031A	
3730297581	11	71.39	Y	N	06757168001268720	6006A	
3230327624	10	64.90	Y	N	06757168001268683	6026A	
5735157236	17	365.33	Y	N	06757168001268911	6092A	
1880546285	17	161.33	Y	N	06757168001268607	6018A	
8230396898	16	103.84	Y	N	06757168001269000	6010A	

<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>COD Amount \$</p> <p>Fee Terms: 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>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: 40 <i>[Signature]</i></p>	<p>Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted: <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 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. <i>[Signature]</i> 9/12 SLSC</p>
---	---	---	--

SHIP FROM		Master Bill of Lading Number: 06757168001269277	
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: WAL-MART FLEET	
Name: Consolidation Dock 7101 DC#: 7101 Div. _____ Address: 1200 Mason Dixon Ln 7101 City/State/Zip: Conley, GA 30288 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 199051 Seal number(s): 36975864 SCAC: WALM 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 #: 81130132		<input checked="" type="checkbox"/> 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	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
2282051055	7	147.43	Y	N	06757168001268614	7035A	
5382041221	13	109.87	Y	N	06757168001268881	7033A	
5780327247	2	12.98	Y	N	06757168001268928	7034A	
6280397146	3	19.47	Y	N	06757168001268935	7026A	
8680257846	15	97.35	Y	N	06757168001269017	6019A	
7829969643	18	371.82	Y	N	06757168001268973	6068A	
9630267942	30	271.20	Y	N	06757168001269048	6070A	
9980118337	7	45.43	Y	N	06757168001269062	6024A	
1330446522	25	162.25	Y	N	06757168001268560	6038A	
2730337447	14	90.86	Y	N	06757168001268621	7036A	
5380895926	16	103.84	Y	N	06757168001268850	6023A	
8934878747	2	12.98	Y	N	06757168001269031	6080A	
Grand Total	478	3994.72					

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 to 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"/>
--	--

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:40	<table style="width:100%;"> <tr> <td>Trailer Loaded:</td> <td>Freight Counted:</td> </tr> <tr> <td><input checked="" type="checkbox"/> By Shipper</td> <td><input checked="" type="checkbox"/> By Shipper</td> </tr> <tr> <td><input type="checkbox"/> By Driver</td> <td><input type="checkbox"/> By Driver/pallets said to contain</td> </tr> <tr> <td></td> <td><input type="checkbox"/> By Driver/Pieces</td> </tr> </table>	Trailer Loaded:	Freight Counted:	<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper	<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said to contain		<input type="checkbox"/> By Driver/Pieces
Trailer Loaded:	Freight Counted:								
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper								
<input type="checkbox"/> By Driver	<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.: 71513666 Order Date: 09/09/2024 Customer: WALMARTWHS Customer PO No.: 5382041221
 PO Type No.: 0033 Location No.: 7033A 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 7033A-ASM DIS
 CO WAL-MART HAWAII DISTRIBUTI
 APPLE VALLEY, CA 92307

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	6	1	6	1
666852223	SD171-0018	022164360233	Ice Syrups	EA	6	18	3	18	3
666852225	SD171-0019	022164360240	Ice Syrups	EA	6	6	1	6	1
666852224	SD171-0020	022164360257	Ice Syrups	EA	6	30	5	30	5
666852222	SD171-0021	022164360264	Ice Syrups	EA	6	18	3	18	3

Total Quantity Ordered: 78
Total Ordered: 13
Total Quantity Shipped: 78
Total Cartons Shipped: 13