

Date: 9/12/2024 12:28:27 PM

Master Bill Of Lading

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	
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	

<small>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 _____</small>	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).

<small>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.</small>	<small>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>
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SHIPPER SIGNATURE / DATE <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 Pallet: 40 <i>[Signature]</i>	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 <small>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.</small> <i>[Signature]</i> 9/12 SLSC
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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 AM PM	Actual Driver Arrival Time AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
8880836024	10	64.90	Y	N	06757168001269024	6011A	
3880247877	7	45.43	Y	N	06757168001268737	6012A	
6630098498	11	71.39	Y	N	06757168001268942	6054A	
8180386987	16	103.84	Y	N	06757168001268997	6025A	
2830168132	20	129.80	Y	N	06757168001268638	6036A	
3030377071	9	58.41	Y	N	06757168001268652	6043A	
3429799842	14	90.86	Y	N	06757168001268690	6037A	
1880496502	3	19.47	Y	N	06757168001268591	7045A	
3130376957	20	129.80	Y	N	06757168001268669	6039A	
3131045350	13	84.37	Y	N	06757168001268676	6048A	
3930247707	9	58.41	Y	N	06757168001268744	7038A	
3931035351	1	6.49	Y	N	06757168001269253	6009A	
7980158561	25	289.75	Y	N	06757168001268980	6017A	
9680227890	21	136.29	Y	N	06757168001269055	6040A	

Where the rate is dependant 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 rules, 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: 40	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.: 71513639 **Order Date:** 09/09/2024 **Customer:** WALMARTWHS **Customer PO No.:** 3429799842
PO Type No.: 0033 **Location No.:** 6037A **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 6037A-ASM DIS
 1455 SE FEEDVILLE RD
 HERMISTON, OR 97838

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
666852225	SD171-0019	022164360240	Ice Syrups	EA	6	6	1	6	1
666852224	SD171-0020	022164360257	Ice Syrups	EA	6	60	10	60	10
666852222	SD171-0021	022164360264	Ice Syrups	EA	6	12	2	12	2

Total Quantity Ordered: 84
Total Ordered: 14
Total Quantity Shipped: 84
Total Cartons Shipped: 14