

Date: 10/29/2024 9:38:26 AM

Master Bill Of Lading

Page 1 of 4

SHIP FROM		Master Bill of Lading Number: 06757168001306705
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	Trailer number: 188406
Address:	1200 Mason Dixon Ln 7101	Div.	Seal number(s): 36975913
City/State/Zip:	Conley, GA 30288		SCAC: WALM
SID#:	FOB: <input type="checkbox"/>		Pro Number: 0000

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
Load #: 82291804		Appointment Time	Actual Driver Arrival Time
		0930 AM	0816 AM
			0938 AM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
6630099396	1	6.49	Y	N	06757168001303681	6054A
3230328331	1	6.49	Y	N	06757168001292527	6026A
8680258546	1	6.49	Y	N	06757168001292770	6019A
5780328128	3	19.47	Y	N	06757168001303667	7034A
7980159515	7	45.43	Y	N	06757168001303704	6017A
5382042259	7	70.93	Y	N	06757168001303643	7033A
3430826703	1	6.49	Y	N	06757168001303513	7039A
6280397835	1	6.49	Y	N	06757168001292909	7026A
1430199382	10	90.40	Y	N	06757168001303810	6031A
3680397848	2	12.98	Y	N	06757168001303520	6021A
2830169031	4	25.96	Y	N	06757168001303469	6036A
5030278472	6	38.94	Y	N	06757168001303599	6035A
8937150792	2	12.98	Y	N	06757168001303759	6037A
3131046187	4	25.96	Y	N	06757168001303490	6048A

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: <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 rates 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. <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 Carrier acknowledges receipt of packages and received 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> 10.29.24
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SHIP FROM		Master Bill of Lading Number: 06757168001306705	
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:	188406
		Seal number(s):	38975913
City/State/Zip:	Conley, GA 30288	SCAC:	WALM
SID#:		Pro Number:	0000
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
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 UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 82291804		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		Supplier#
					BOL#	DC#	
8180387861	4	25.96	Y	N	06757168001303711	6025A	
1382400651	3	19.47	Y	N	06757168001303803	6068A	
8680258782	3	19.47	Y	N	06757168001303735	6019A	
3730298489	9	58.41	Y	N	06757168001303537	6006A	
3880248812	7	45.43	Y	N	06757168001303544	6012A	
3931036159	4	25.96	Y	N	06757168001303568	6009A	
5735158138	8	230.42	Y	N	06757168001303650	6092A	
9680228786	8	51.92	Y	N	06757168001303773	6040A	
7335197782	2	12.98	Y	N	06757168001303698	6030A	
2282052014	7	70.93	Y	N	06757168001303445	7035A	
5380069876	4	25.96	Y	N	06757168001303612	6094A	
8880836876	4	25.96	Y	N	06757168001303742	6011A	
1880547169	7	45.43	Y	N	06757168001303438	6018A	
3130377826	15	97.35	Y	N	06757168001303476	6039A	

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

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: 42	Trailer Loaded:	Freight Counted:	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.
	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	

Order No.: 71901543 **Order Date:** 10/21/2024 **Customer:** WALMARTWHS **Customer PO No.:** 3931036159
PO Type No.: 0033 **Location No.:** 6009A **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 6009A - ASM DIS
 1501 E MAPLE LEAF ROAD
 MOUNT PLEASANT, IA 52641

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666852223	SD171-0018	022164360233	Cherry Snow Cone Syrup	EA	6	6	1	6	1
666852224	SD171-0020	022164360257	Blue Raspberry Snow Cone Syrup	EA	6	12	2	12	2
666852222	SD171-0021	022164360264	Tigers Blood Snow Cone Syrup	EA	6	6	1	6	1

Total Quantity Ordered: 24
Total Ordered: 4
Total Quantity Shipped: 24
Total Cartons Shipped: 4