

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____ FOB:

Master Bill of Lading Number: 06757168001293111

SHIP TO
 Name: Wal-Mart DC 7035A-ASM DIS DC#: 7035A
 Div.
 Address: 18815 NW 115 Avenue
 7035A
 City/State/Zip: Alachua, FL 32615
 SID#: _____ FOB:

CARRIER NAME: ALLEN LUND COMPANY
 Trailer number: 237035
 Seal number(s): 36585432
 SCAC: LUAC
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name:
 Address:
 City/State/Zip:
 SPECIAL INSTRUCTIONS:
 Load #: 36144198

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LANDING: WITH ATTACHED
 (check box) UNDERLYING BILLS OF LANDING
 Appointment Time Actual Driver Arrival Time Driver Departure Time
 1100 AM PM 1350 AM PM 1509 AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
1431601257	489	5394.45	Y	N	06757168001288735	7035G	
1431601259	384	4333.44	Y	N	06757168001288759	7035G	
1431601730	137	1471.07	Y	N	06757168001288773	7035A	
1431601731	43	671.94	Y	N	06757168001288780	7035A	
2282051345	8	51.92	Y	N	06757168001282009	7035A	
9031123976	226	887.46	Y	N	06757168001288797	7035A	
Grand Total	1287	12810.28					

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(a) of NMFC Item 500</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1053	ctns			11870.90		Comforters, Bedspreads	49017	200
8	ctns			51.92		Ice Cream Powder	72750	92.5
226	ctns			887.46		Panels, Valances	49260 Sub 4	175
1287				12810.28		Grand Total		

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.

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: 28
[Signature] 10/11/24

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets sold to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier carries emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
[Signature] 10/11/24

