

SHIP FROM		Master Bill of Lading Number: 06757168001311556
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	

SHIP TO		CARRIER NAME: WAL-MART FLEET
Name:	Consolidation Dock 7101	Trailer number: 142391
	DC#: 7101	Seal number(s): 36975907
	Div.	SCAC: WALM
Address:	1200 Mason Dixon Ln	Pro Number: 0000
	7101	
City/State/Zip:	Conley, GA 30288	
SID#:	FOB: <input type="checkbox"/>	

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 UNDERLYING BILLS OF LANDING (check box)	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 82515808		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#
1330447476	11	71.39	Y	N	06757168001311044	6038A	
1382400770	7	45.43	Y	N	06757168001311051	6068A	
1430199499	17	135.83	Y	N	06757168001311068	6031A	
1730328498	11	173.39	Y	N	06757168001311075	6027A	
1880497516	3	19.47	Y	N	06757168001311082	7045A	
1880547023	105	762.31	Y	N	06757168001311099	6018A	
1880547265	3	19.47	Y	N	06757168001311105	6018A	
2282052110	10	115.90	Y	N	06757168001311129	7035A	
2730338515	31	201.19	Y	N	06757168001311136	7036A	
2830169134	9	58.41	Y	N	06757168001311143	6036A	
3030378081	3	19.47	Y	N	06757168001311150	6043A	
3130377937	15	97.35	Y	N	06757168001311211	6039A	
3131046304	8	51.92	Y	N	06757168001311228	6048A	
3230328661	18	116.82	Y	N	06757168001311235	6026A	

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 provisions of the DOT.
 Total Pallets: *12* *11/1/24*

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.
[Signature]
11-1-24

SHIP FROM		Master Bill of Lading Number: 06757168001311556	
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: 142391	
		Seal number(s): 36975907	
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"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address: _____		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
City/State/Zip: _____			
SPECIAL INSTRUCTIONS:		Appointment Time	
Load #: 82515806		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 (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
5735158248	5	57.95	Y	N	06757168001311396	6092A	
5780328208	4	25.96	Y	N	06757168001311402	7034A	
6280398180	14	90.86	Y	N	06757168001311419	7026A	
6630099504	3	19.47	Y	N	06757168001311426	6054A	
7335197873	4	25.96	Y	N	06757168001311433	6030A	
7980159613	14	167.36	Y	N	06757168001311440	6017A	
8180387958	4	25.96	Y	N	06757168001311457	6025A	
8230387847	8	51.92	Y	N	06757168001311464	6010A	
8680258879	8	51.92	Y	N	06757168001311471	6019A	
8880836744	31	222.23	Y	N	06757168001311488	6011A	
8880836985	4	25.96	Y	N	06757168001311495	6011A	
8937150902	13	84.37	Y	N	06757168001311501	6037A	
9630268986	10	115.90	Y	N	06757168001311518	6070A	
9680228911	13	84.37	Y	N	06757168001311525	6040A	

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 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. 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: 44	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. _____ Shipper Signature	
Trailer Loaded: <input 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.: 71957766	Order Date: 10/28/2024	Customer: WALMARTWHS	Customer PO No.: 9630268986
PO Type No.: 0033	Location No.: 6070A	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 6070A-ASM DIS
 200 WAL-MART DRIVE
 SHELBY, NC 28150

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	12	2	12	2
666852223	SD171-0018	022164360233	Cherry Snow Cone Syrup	EA	6	12	2	12	2
666852224	SD171-0020	022164360257	Blue Raspberry Snow Cone Syrup	EA	6	24	4	24	4
666852222	SD171-0021	022164360264	Tigers Blood Snow Cone Syrup	EA	6	12	2	12	2

Total Quantity Ordered:	60
Total Ordered:	10
Total Quantity Shipped:	60
Total Cartons Shipped:	10