

SHIP FROM		Master Bill of Lading Number: 06757168001274509	
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: Swift Transportation	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.:	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	160103
City/State/Zip:	Conley, GA 30288	Seal number(s):	36975848
SID#:		SCAC:	SWFT
		Pro Number:	
		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 #: 35887060		Appointment Time	Actual Driver Arrival Time
		<i>Preload</i> AM	AM
		PM	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#
5735157370	2	15.86	Y	N	06757168001274479	6092A	
7829969790	2	15.86	Y	N	06757168001274493	6068A	
2282320036	241	2640.64	Y	N	06757168001274462	6068A	
4408526856	200	2459.76	Y	N	06757168001274448	6068R	
2124559605	269	2997.06	Y	N	06757168001274455	6092A	
4213327441	426	5210.92	Y	N	06757168001274486	6092R	
Grand Total	1142	13340.10					

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(j) of NMFC Item 300</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1138	ctns			13308.38		Comforters, Bedspreads	49017	200
4	ctns			31.72		Ice Cream Maker	55620	100
1142				13340.10		Grand Total		

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 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.
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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: 30 <i>[Signature]</i> 9-24-24	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 papers. 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>
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Order No.: 71550359 Order Date: 09/15/2024 Customer: WALMARTWHS Customer PO No.: 4213327441
 PO Type No.: 0020 Location No.: 6092R Dept. No.: 00022

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 6092R-REGULAR
 3120 ILLINOIS HWY 89
 SPRING VALLEY, IL 61362

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
662833772	MS9344409622-02	022164323054	Q Allie 10pcs Comforter Set	EA	1	96	96	96	96
662833771	MS9344409622-03	022164323061	K Allie 10pcs Comforter Set	EA	1	80	80	80	80
662833776	MS9344409622-08	022164323115	Q Chase 10pcs Comforter Set	EA	1	88	88	88	88
662833777	MS9344409622-11	022164323146	Q Cara 10pcs Comforter Set	EA	1	96	96	96	96
662800973	MS9344409622-17	022164322767	F/Q Moran 5pcs Comforter Set	EA	1	36	36	36	36
662800971	MS9344409622-18	022164322774	K Moran 5pcs Comforter Set	EA	1	32	32	32	32

Total Quantity Ordered: 428
Total Ordered: 428
Total Quantity Shipped: 428
Total Cartons Shipped: 428