

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: 06757168001300765

SHIP TO
 Name: Consolidation Dock 7101 DC#: 7101
 Div. _____
 Address: 1200 Mason Dixon Ln
 7101
 City/State/Zip: Conley, GA 30288
 SID#: _____ FOB:

CARRIER NAME: WAL-MART FLEET
 Trailer number: ~~474596~~ 175294
 Seal number(s): 36975934
 SCAC: WALM
 Pro Number: 0000

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____
SPECIAL INSTRUCTIONS:
 Load #: 82035555

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LANDING: WITH ATTACHED
 (check box) UNDERLYING BILLS OF LANDING
 Appointment Time: 1400 AM/PM Actual Driver Arrival Time: 1007 AM/PM Driver Departure Time: 1455 AM/PM

CUSTOMER ORDER INFORMATION

| CUSTOMER ORDER NUMBER | # PKGS CTN | WEIGHT LBS | PALLET/SLIP (CIRCLE ONE) | | BOL# | ADDITIONAL SHIPPER INFO | |
|-----------------------|------------|------------|--------------------------|---|-------------------|-------------------------|-----------|
| | | | | | | DC# | Supplier# |
| 4158526272 | 188 | 2227.96 | Y | N | 06757168001295597 | 6018R | |
| 1880497261 | 2 | 15.40 | Y | N | 06757168001295566 | 7045A | |
| 8775438546 | 186 | 2071.17 | Y | N | 06757168001295641 | 6018A | |
| 2808526451 | 208 | 2516.88 | Y | N | 06757168001295573 | 7045R | |
| 4713326026 | 84 | 1037.56 | Y | N | 06757168001295610 | 6011R | |
| 8225638324 | 64 | 744.19 | Y | N | 06757168001295634 | 6011A | |
| 9325169083 | 152 | 1676.90 | Y | N | 06757168001295658 | 7038A | |
| 4358527510 | 96 | 1133.28 | Y | N | 06757168001295603 | 7038R | |
| 4975698507 | 178 | 1905.17 | Y | N | 06757168001295627 | 7045A | |
| Grand Total | 1158 | 13328.51 | | | | | |

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 219 of NMFC Item 389</small> | LTL ONLY | |
|---------------|------|---------|------|------------|----------|---|----------|-------|
| QTY | TYPE | QTY | TYPE | | | | NMFC # | CLASS |
| 1156 | ctns | | | 13313.11 | | Comforters, Bedspreads | 49017 | 200 |
| 2 | ctns | | | 15.40 | | Ice Cream Maker | 55620 | 100 |

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.

| | | | |
|---|--|---|--|
| <p>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>KW 10/17/24</i></p> | <p>Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> | <p>Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p> | <p>CARRIER SIGNATURE / PICKUP DATE Carrier certifies 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. <i>Mark Thornton 10-17-24</i></p> |
|---|--|---|--|

Order No.: 71786409 Order Date: 10/12/2024 Customer: WALMARTWHS Customer PO No.: 4358527510
 PO Type No.: 0020 Location No.: 7038R 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 7038R-REGULAR
 4013 SOUTH JENKINS RD.
 FT PIERCE, FL 34981

| 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 | 48 | 48 | 48 | 48 |
| 662833777 | MS9344409622-11 | 022164323146 | Q Cara 10pcs Comforter Set | EA | 1 | 48 | 48 | 48 | 48 |

Total Quantity Ordered: 96
Total Ordered: 96
Total Quantity Shipped: 96
Total Cartons Shipped: 96