

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

Master Bill Of Lading

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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	Trailer number: 188406
	7101	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 (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 82291804		0930 AM	0816 PM
			Driver Departure Time
			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 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 Pallets: <i>12</i> <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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Date: 10/29/2024 9:38:26 AM

Master Bill Of Lading

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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	Trailer number: 188406
	DC#: 7101	Seal number(s): 36975913
	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"/>	3rd Party: <input type="checkbox"/>
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING		
City/State/Zip:		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
		AM PM	AM PM	AM PM
SPECIAL INSTRUCTIONS:				
Load #: 82291804				

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
5380896785	3	19.47	Y	N	06757168001303629	6023A	
5382042003	4	25.96	Y	N	06757168001292862	7033A	
1330447363	4	25.96	Y	N	06757168001303797	6038A	
1730328407	5	57.95	Y	N	06757168001303827	6027A	
4480239027	5	83.45	Y	N	06757168001303575	6066A	
6280398077	8	51.92	Y	N	06757168001303674	7026A	
8230387751	7	45.43	Y	N	06757168001303728	6010A	
9630268877	4	25.96	Y	N	06757168001303766	6070A	
2730338403	21	136.29	Y	N	06757168001303452	7036A	
3230328573	12	77.88	Y	N	06757168001303506	6026A	
3930248617	5	32.45	Y	N	06757168001303551	7038A	
5030149197	3	19.47	Y	N	06757168001303582	6020A	
5235148331	9	58.41	Y	N	06757168001303605	6016A	
8937150570	2	12.98	Y	N	06757168001292848	6037A	

<p>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 _____</p>	<p>COD Amount \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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.

<p>SHIPPER SIGNATURE / DATE</p> <p>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.</p> <p>Total Pallet: 42</p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/45 lbs</p>	<p>CARRIER SIGNATURE / PICKUP DATE</p> <p>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.</p> <p>Shipper Signature</p>
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Order No.: 71901544 Order Date: 10/21/2024 Customer: WALMARTWHS Customer PO No.: 4480239027
 PO Type No.: 0033 Location No.: 6066A 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 6066A-ASM DIS
 690 CRENSHAW BLVD
 HOPKINSVILLE, KY 42240

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	6	1	6	1
666852224	SD171-0020	022164360257	Blue Raspberry Snow Cone Syrup	EA	6	12	2	12	2

Total Quantity Ordered: 30
Total Ordered: 5
Total Quantity Shipped: 30
Total Cartons Shipped: 5