

Date: 11/26/2024 11:01:35 AM

# Master Bill Of Lading

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001334210	
Name:	E & E COMPANY LTD		
Address:	311 International Trade Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:		FOB: <input type="checkbox"/>	
<b>SHIP TO</b>		<b>CARRIER NAME:</b> WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.:	
Address:	1200 Mason Dixon Ln	Trailer number:	174815
	7101	Seal number(s):	63488886
City/State/Zip:	Conley, GA 30288	SCAC:	WALM
SID#:		Pro Number:	0000
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
<b>SPECIAL INSTRUCTIONS:</b>		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
Load #: 83144883		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		0800	0805
			1101
			AM PM

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO		
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	DC#	Supplier#
5380896996	9	58.41	Y	N	06757168001315110	6023A	
8934879858	3	19.47	Y	N	06757168001315219	6080A	
1880547384	9	58.41	Y	N	06757168001314939	6018A	
6630099484	24	101.07	Y	N	06757168001318050	6054G	
8937151025	16	103.84	Y	N	06757168001315226	6037A	
2830169265	8	51.92	Y	N	06757168001314960	6036A	
3130378040	17	110.33	Y	N	06757168001314984	6039A	
5030149415	13	84.37	Y	N	06757168001315080	6020A	
7335197980	7	45.43	Y	N	06757168001315141	6030A	
8880836950	27	130.58	Y	N	06757168001318623	6011G	
2282052234	12	128.88	Y	N	06757168001314946	7035A	
3130377910	40	138.70	Y	N	06757168001318708	6039G	
3230328790	15	97.35	Y	N	06757168001315004	6026A	
6280398293	21	136.29	Y	N	06757168001315127	7026A	

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).**

<p>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.</p> <p><b>SHIPPER SIGNATURE / DATE</b>                  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.  <i>[Signature]</i> 11/26/24</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p><b>Trailer Loaded:</b>  <input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p> <p><b>Freight Counted:</b>  <input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver/pallets said to contain  <input type="checkbox"/> By Driver/Pieces</p>	<p><b>SHIPPER SIGNATURE</b></p> <p><b>CARRIER SIGNATURE / PICKUP DATE</b>                  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.  <i>[Signature]</i> 11-26-2024</p>
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City/State/Zip:	Port Wentworth, GA 31407		
SID#:	FOB: <input type="checkbox"/>		
<b>SHIP TO</b>		<b>CARRIER NAME: WAL-MART FLEET</b>	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.:	
Address:	1200 Mason Dixon Ln	Trailer number:	174815
	7101	Seal number(s):	63488886
City/State/Zip:	Conley, GA 30288	SCAC: WALM	
SID#:	FOB: <input type="checkbox"/>	Pro Number:	0000
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
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	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time	Actual Driver Arrival Time
Load #: 83144883		AM PM	AM PM
		Driver Departure Time	AM PM

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
1380547095	6	38.94	Y	N	06757168001314816	6069A	
1430199808	21	138.29	Y	N	06757168001314908	6031A	
1730328477	22	84.98	Y	N	06757168001318630	6027G	
3030378184	11	71.39	Y	N	06757168001314977	6043A	
9980119457	21	136.29	Y	N	06757168001315240	6024A	
1382400904	13	84.37	Y	N	06757168001314892	6068A	
3430826879	4	25.96	Y	N	06757168001315011	7039A	
5030149260	24	95.12	Y	N	06757168001317978	6020G	
3930248819	9	58.41	Y	N	06757168001315059	7038A	
5030278677	9	58.41	Y	N	06757168001315097	6035A	
8230387979	17	110.33	Y	N	06757168001315189	6010A	
3131046415	10	64.90	Y	N	06757168001314991	6048A	
7980159739	13	135.37	Y	N	06757168001315165	6017A	
8180388072	8	51.92	Y	N	06757168001315172	6025A	

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

## 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.

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 proceeds. 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.: 71957696      Order Date: 10/28/2024      Customer: WALMARTWHS      Customer PO No.: 1380547095  
 PO Type No.: 0033      Location No.: 6069A      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 6069A-ASM DIS  
 1100 MATLOCK DRIVE  
 ST. JAMES, MO 65559

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
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	18	3	18	3
666852222	SD171-0021	022164360264	Tigers Blood Snow Cone Syrup	EA	6	12	2	12	2

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Total Quantity Ordered: 36  
 Total Ordered: 6  
 Total Quantity Shipped: 36  
 Total Cartons Shipped: 6