

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

Master Bill Of Lading

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: **06757168001334210**

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: **174815**
 Seal number(s): **63488886**
 SCAC: **WALM**
 Pro Number: **0000**

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:
 Load #: **83144883**

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
0800 AM PM	0805 AM PM	1101 AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			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).

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 terms, 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.
 _____ 11/26/2024

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain 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.
 _____ 11-26-2024

SHIP FROM		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"/>

SHIP TO		CARRIER NAME: WAL-MART FLEET	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	174815
City/State/Zip:	Conley, GA 30288	Seal number(s):	63488886
SID#:		SCAC:	WALM
		Pro Number:	0000
		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 #: 83144683		Appointment Time	Actual Driver Arrival Time
		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#
6630099631	5	32.45	Y	N	06757168001315134	6054A
7582540089	7	45.43	Y	N	06757168001315158	6094A
Grand Total	589	3550.72				

CARRIER INFORMATION						LTL ONLY			
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION		NMFC #	CLASS
QTY	TYPE	QTY	TYPE			<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(a) of NMFC Issue 208)</small>			
158	ctns			651.53		Ice Cream Maker		55620	100
431	ctns			2899.19		Ice Cream Powder		72750	92.5
589				3550.72		Grand Total			

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 *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: <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 sold 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.
	Total Pallets: 44		

Order No.: 72011976 Order Date: 11/04/2024 Customer: WALMARTWHS Customer PO No.: 6630099631
 PO Type No.: 0033 Location No.: 6054A 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 6054A-ASM DIS
 385 CALLAWAY CHURCH ROAD
 LA GRANGE, GA 30241

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
666852225	SD171-0019	022164360240	Grape Snow Cone Syrup	EA	6	6	1	6	1
666852222	SD171-0021	022164360264	Tigers Blood Snow Cone Syrup	EA	6	18	3	18	3

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