

Date: 11/15/2024 12:58:13 PM

# Master Bill Of Lading

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001322651	
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: WAL-MART FLEET</b>	
Name: Consolidation Dock 7101		DC#: 7101	
		Div. _____	
Address: 1200 Mason Dixon Ln		Trailer number: 175018	
7101		Seal number(s): 5627863	
City/State/Zip: Conley, GA 30288		SCAC: WALM	
SID#: _____		Pro Number: _____	
FOB: <input type="checkbox"/>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
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	
City/State/Zip: _____		(check box) UNDERLYING BILLS OF LANDING	
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time: 10:00 AM PM	
Load #: 82880832		Actual Driver Arrival Time: 11:34 AM PM	
		Driver Departure Time: 12:58 AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
			Y	N		DC#	Supplier#
5780328451	1	6.49	Y	N	06757168001321173	7034A	
2282052385	7	45.43	Y	N	06757168001320947	7035A	
3230328919	9	58.41	Y	N	06757168001320992	6026A	
5030278805	5	32.45	Y	N	06757168001321128	6035A	
9980119564	9	58.41	Y	N	06757168001321319	6024A	
6737390003	7	45.43	Y	N	06757168001321203	6080A	
2830169394	10	64.90	Y	N	06757168001322439	6036A	
3430826996	2	12.98	Y	N	06757168001321005	7039A	
8880837219	6	38.94	Y	N	06757168001321272	6011A	
1382401055	8	102.92	Y	N	06757168001320893	6068A	
3880398187	3	19.47	Y	N	06757168001321029	6021A	
5235148671	12	77.88	Y	N	06757168001321135	6016A	
5380897107	7	45.43	Y	N	06757168001321142	6023A	
8630099778	7	45.43	Y	N	06757168001321197	6054A	

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.

**SHIPPER SIGNATURE / DATE**  
 I hereby certify that the above named materials are properly loaded, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.  
 Total Pallets: 41  
 06/11/15/24

**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.  
 Timon Phillips 11-15-24

SHIP FROM		Master Bill of Lading Number: 06757168001322651
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: 175018
		Seal number(s): 5627863
City/State/Zip:	Conley, GA 30288	SCAC: WALM
SID#:	FOB: <input type="checkbox"/>	Pro Number:

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:		
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM
Load #: 82880832		

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
9680229149	5	32.45	Y	N	06757168001321302	6040A	
5382042655	12	103.38	Y	N	06757168001321159	7033A	
5735158499	5	32.45	Y	N	06757168001321166	6092A	
1730328744	6	38.94	Y	N	06757168001320916	6027A	
1880497739	6	38.94	Y	N	06757168001320923	7045A	
3130378168	9	58.41	Y	N	06757168001320978	6039A	
3131046552	7	45.43	Y	N	06757168001320985	6048A	
7582540219	7	45.43	Y	N	06757168001321227	6094A	
9630269260	6	38.94	Y	N	06757168001321296	6070A	
2730338757	8	51.92	Y	N	06757168001320954	7036A	
3030378319	10	64.90	Y	N	06757168001320961	6043A	
6280398424	19	123.31	Y	N	06757168001321180	7026A	
3880249163	10	64.90	Y	N	06757168001321043	6012A	
3930248945	3	19.47	Y	N	06757168001321050	7038A	

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 _____	<b>COD Amount \$</b> _____ <b>Fee Terms:</b> 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 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.

<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. Total Pallet: 41	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<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	<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 DO emergency response guidebook or equivalent documentation in the vehicle.
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Order No.: 72081315      Order Date: 11/11/2024      Customer: WALMARTWHS      Customer PO No.: 3880249163  
 PO Type No.: 0033      Location No.: 6012A      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 6012A - ASM DIS  
 3101 NORTH QUINCY  
 PLAINVIEW, TX 79072

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	18	3	18	3
666852225	SD171-0019	022164360240	Grape Snow Cone Syrup	EA	6	18	3	18	3
666852224	SD171-0020	022164360257	Blue Raspberry Snow Cone Syrup	EA	6	6	1	6	1
666852222	SD171-0021	022164360264	Tigers Blood Snow Cone Syrup	EA	6	18	3	18	3

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**Total Quantity Ordered: 60**  
**Total Ordered: 10**  
**Total Quantity Shipped: 60**  
**Total Cartons Shipped: 10**