

SHIP FROM		Master Bill of Lading Number: 06757168001361674
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	

SID#:	FOB: <input type="checkbox"/>	CARRIER NAME: Swift Transportation
SHIP TO		Trailer number: 131700
Name:	Consolidation Dock 7101	Seal number(s): 34484142
	DC#: 7101	SCAC: SWFT
	Div.	Pro Number: 0000
Address:	1200 Mason Dixon Ln 7101	
City/State/Zip:	Conley, GA 30268	
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
City/State/Zip:		<input type="checkbox"/> UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time Actual Driver Arrival Time Driver Departure Time
Load #: 37030170		1100 AM 0800 AM 0925 AM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3030378931	30	178.40	Y	N	06757168001360868	6043A	
2808526537	160	1963.92	Y	N	06757168001360844	7045R	
4975698867	144	1568.12	Y	N	06757168001360899	7045A	
9782210852	726	7936.27	Y	N	06757168001360929	6043A	
3158527610	176	2083.60	Y	N	06757168001360882	6043R	
1680498346	7	19.81	Y	N	06757168001360820	7045A	
<b>Grand Total</b>	1243	13750.12					

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged so to ensure safe transportation with ordinary care. See Section 2(s) of NMFC Item 300</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1206	ctns			13551.91		Comforters, Bedspreads	49017	200
37	ctns			198.21		Ice Cream Maker	55620	100
1243				13750.12		<b>Grand Total</b>		

Where the rate is dependent on value, shippers are required to advise 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"/>

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 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>[Signature]</i> 12/31/24	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 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>
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**Order No.:** 72961594      **Order Date:** 12/22/2024      **Customer:** WALMARTWHS      **Customer PO No.:** 2808526537  
**PO Type No.:** 0020      **Location No.:** 7045R      **Dept. No.:** 00022

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**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 7045R- REGULAR  
 6000 WALTON WAY  
 MT. CRAWFORD, VA 22841

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
662833776	MS9344409622-08	022164323115	Q Chase 10pcs Comforter Set	EA	1	44	44	44	44
662833777	MS9344409622-11	022164323146	Q Cara 10pcs Comforter Set	EA	1	48	48	48	48
662800973	MS9344409622-17	022164322767	F/Q Moran 5pcs Comforter Set	EA	1	36	36	36	36
662800971	MS9344409622-18	022164322774	K Moran 5pcs Comforter Set	EA	1	32	32	32	32

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**Total Quantity Ordered: 160**  
**Total Ordered: 160**  
**Total Quantity Shipped: 160**  
**Total Cartons Shipped: 160**