

SHIP FROM		Master Bill of Lading Number: 06757168001371949	
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: 123401	
DC#: 7101		Seal number(s): 34484298	
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	
City/State/Zip: _____		(check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	
Load #: 84437351		Actual Driver Arrival Time	
		Driver Departure Time	
		Preload AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
5235149514	12	77.88	Y	N	06757168001371604	6016A	
6437580201	6	38.94	Y	N	06757168001371741	6036A	
1332850617	18	116.82	Y	N	06757168001371406	6031A	
2332750248	5	32.45	Y	N	06757168001371468	6066A	
8782710314	5	32.45	Y	N	06757168001371659	6020A	
9032810037	5	32.45	Y	N	06757168001371529	6012A	
1880498538	3	19.47	Y	N	06757168001371437	7045A	
2730339601	6	38.94	Y	N	06757168001371918	7036A	
5030279811	11	71.39	Y	N	06757168001371734	6035A	
9432640573	3	19.47	Y	N	06757168001371833	6054A	
5735159340	5	32.45	Y	N	06757168001371864	6092A	
5780329242	3	19.47	Y	N	06757168001371901	7034A	
8230388878	12	77.88	Y	N	06757168001371499	6010A	
1382401945	3	19.47	Y	N	06757168001371413	6068A	

<p>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 _____</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).

<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>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p>	<p style="text-align: right;">Shipper Signature</p>
<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 Pallets: <i>1</i></p> <p><i>JW 1/10/25</i></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/Placards</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><i>JH Anderson</i> 1-10-25</p>

Order No.: 73076611 Order Date: 01/06/2025 Customer: WALMARTWHS Customer PO No.: 2730339601
 PO Type No.: 0033 Location No.: 7036A 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 7036A - ASM DIS
 2226 FM 3013 RD
 SEALY, TX 77474

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	18	3	18	3
666852224	SD171-0020	022164360257	Blue Raspberry Snow Cone Syrup	EA	6	12	2	12	2

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