

SHIP FROM		Master Bill of Lading Number: 06757168001354409	
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: Paschall Trucking	
Name:	Consolidation Dock 7101	DC#:	7101
		Div.:	
Address:	1200 Mason Dixon Ln 7101	Trailer number:	634686
City/State/Zip:	Conley, GA 30288	Seal number(s):	34484291
SID#:		SCAC:	PASC
		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 #: 36930217		Appointment Time	Actual Driver Arrival Time
		1400 AM	1054 AM
		PM	PM
			Driver Departure Time
			1505 AM
			PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
3058526660	92	1094.68	Y	N	06757168001354331	6010R
3930249457	53	403.53	Y	N	06757168001354324	7038A
9830049351	193	2175.96	Y	N	06757168001354355	6010A
4358527620	200	2459.76	Y	N	06757168001354362	7038R
8230388586	48	374.20	Y	N	06757168001354348	6010A
9325169479	760	8602.87	Y	N	06757168001354393	7038A
Grand Total	1346	15111.00				

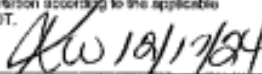

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to insure safe transportation with ordinary care. See Section 2(a) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1245	ctns			14333.27		Comforters, Bedspreads	49017	200
101	ctns			777.73		Ice Cream Maker	55620	100
1346				15111.00		Grand Total		

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: <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.

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: 32 	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. 
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Order No.: 72796155 Order Date: 12/12/2024 Customer: WALMARTWHS Customer PO No.: 4358527620
 PO Type No.: 0020 Location No.: 7038R Dept. No.: 00022

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 7038R-REGULAR
 4001 SOUTH JENKINS RD.
 FT PIERCE, FL 34981

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
662833772	MS9344409622-02	022164323054	Q Allie 10pcs Comforter Set	EA	1	48	48	48	48
662833771	MS9344409622-03	022164323061	K Allie 10pcs Comforter Set	EA	1	40	40	40	40
662833776	MS9344409622-08	022164323115	Q Chase 10pcs Comforter Set	EA	1	44	44	44	44
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

Total Quantity Ordered: 200
Total Ordered: 200
Total Quantity Shipped: 200
Total Cartons Shipped: 200