

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Master Bill of Lading Number: 06757163000976508

SHIP TO
 Name: Wal-Mart DC 6561A-ASM DIS DC#: 6561A
 Div.
 Address: 1600 Agua Mansa Road
 6561A
 City/State/Zip: Colton, CA 92324
 SID#: _____ FOB:

CARRIER NAME: **WAL-MART FLEET**
 Trailer number: 156754
 Seal number(s): 63589269
 SCAC: WALM
 Pro Number:

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

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

SPECIAL INSTRUCTIONS:
 Load #: 84376497

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
9521646525	1148	14300.60	Y	N	06757163000976492	6561R	
5537571574	100	1013.68	Y	N	06757163000976478	6561A	
3131898408	15	118.95	Y	N	06757163000976485	6561A	
Grand Total	1263	15433.23					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1248	ctns			15314.28		Comforters, Bedspreads	49017	200
15	ctns			118.95		Ice Cream Maker	55620	100
1263				15433.23		Grand Total		

Where the rate is dependent on value, shippers are required to stated 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:

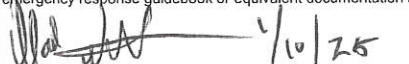
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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

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:33  1/10/25

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.
 1/10/25

Date: 1/10/2025 9:38:18 AM

Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000976478



SHIP TO

Name: Wal-Mart DC 6561A-ASM DIS Location #: 6561A
 Address: 1600 Agua Mansa Road
 6561A
 City/State/Zip: Colton, CA 92324
 CID#: _____ FOB:
 Dept: 00022

CARRIER NAME: WAL-MART FLEET

Trailer number: 156754
 Seal number(s): 63589269

SCAC: WALM
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: *(freight charges are prepaid unless marked otherwise)*

Prepaid _____ Collect 3rd Party

SPECIAL INSTRUCTIONS:
 Load #: 84376497

Master Bill of Lading: with attached
 (check box) underlying Bills of Lading

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	Pits Count	WEIGHT	PALLET/SLIP (CIRCLE ONE)	Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
5537571574	100	3	1013.68	Y N	01/11/2025	6561A	0033	00022	
GRAND TOTAL	100	3	1013.68						

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
100	ctns			1013.68		Comforters, Bedspreads	49017	200
GRAND TOTAL								

Where the rate is dependent on value, shippers are required to stated 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

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:

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. Property described above is received in good order, except as noted.

Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000976485



(402)06757163000976485

SHIP TO

Name: Wal-Mart DC 6561A-ASM DIS Location #: 6561A
 Address: 1600 Agua Mansa Road
 6561A
 City/State/Zip: Colton, CA 92324
 CID#: _____ FOB:
 Dept: 00014

CARRIER NAME: WAL-MART FLEET
 Trailer number: 156754
 Seal number(s): 63589269
SCAC: WALM
Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid _____ Collect **X** 3rd Party _____

SPECIAL INSTRUCTIONS:
 Load #: 84376497

Master Bill of Lading: with attached underlying Bills of Lading (check box)

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION										
CUSTOMER ORDER NUMBER	# PKGS	Pkts Count	WEIGHT	PALLET/ SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
3131898408	15	1	118.95	Y	N	01/11/2025	6561A	0033	00014	
GRAND TOTAL	15	1	118.95							

CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <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(e) of NMFC Item 360</small>	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
15	ctns			118.95		Ice Cream Maker	55620	100	
15				118.95		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 / 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:
 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. Property described above is received in good order, except as noted.

Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Bill of Lading Number: 06757163000976492



SHIP TO

Name: Wal-Mart DC 6561R-Regular Location #: 6561R
 Address: 1600 Agua Mansa Road
 6561R
 City/State/Zip: Colton, CA 92324
 CID#: _____ FOB:
 Dept: 00022

CARRIER NAME: WAL-MART FLEET

Trailer number: 156754
 Seal number(s): 63589269

SCAC: WALM

Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: *(freight charges are prepaid unless marked otherwise)*

Prepaid Collect 3rd Party

SPECIAL INSTRUCTIONS:

Load #: 84376497

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	Pkts Count	WEIGHT	PALLET/SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
9521646525	1148	29	14300.60	Y	N	01/11/2025	6561R	0020	00022	
GRAND TOTAL	1148	29	14300.60							

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <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(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1148	ctns			14300.60		Comforters, Bedspreads	49017	200
1148				14300.60		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to stated 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 _____

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:

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. *Property described above is received in good order, except as noted.*

Shipment Manifest (300097647)

BOL #:	06757163000976478	Customer:	WALMARTWHS	Ship To:	6561A
Carrier:	WAL-MART FLEET	Ship Date:	01/10/2025	Load Number:	84376497
Trailer Number:	156754	Pro Number:		Seal Number:	63589269
Total Cartons/Units:	100/100	Total Cube:	206.56	Total Weight(LB):	1013.68
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6561A-ASM DIS 1600 Agua Mansa Road Colton, CA 92324		

<u>Customer</u> <u>PO No.</u>	<u>E&E</u> <u>SO No.</u>	<u>Mark for</u> <u>Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To</u> <u>Ship</u>	<u>Case</u> <u>Pack Qty</u>	<u>Total</u> <u>Cartons</u>	<u>Carton</u> <u>Weight</u> <u>(LB)</u>	<u>Total</u> <u>Weight</u> <u>(LB)</u>	<u>Carton</u> <u>Cube</u>	<u>Total</u> <u>Cube</u>
5537571574	73065614		MS9344409 622-20	022164322798 662800972 K Beau 5pcs Comforter Set	36	1	36	9.98	359.28	1.96	70.56
5537571574	73065614		MS9344409 622-26	022164322859 662800965 K Carlton 5pcs Comforter Set	32	1	32	10.61	339.52	2.11	67.52
5537571574	73065614		MS9344409 622-29	022164322880 662850700 F/Q Albion 5pcs Comforter Set	32	1	32	9.84	314.88	2.14	68.48

Shipment Manifest (300097648)

BOL #:	06757163000976485	Customer:	WALMARTWHS	Ship To:	6561A
Carrier:	WAL-MART FLEET	Ship Date:	01/10/2025	Load Number:	84376497
Trailer Number:	156754	Pro Number:		Seal Number:	63589269
Total Cartons/Units:	15/30	Total Cube:	13.35	Total Weight(LB):	118.95
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6561A-ASM DIS 1600 Agua Mansa Road Colton, CA 92324		

<u>Customer</u> <u>PO No.</u>	<u>E&E</u> <u>SO No.</u>	<u>Mark for</u> <u>Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To</u> <u>Ship</u>	<u>Case</u> <u>Pack Qty</u>	<u>Total</u> <u>Cartons</u>	<u>Carton</u> <u>Weight</u> <u>(LB)</u>	<u>Total</u> <u>Weight</u> <u>(LB)</u>	<u>Carton</u> <u>Cube</u>	<u>Total</u> <u>Cube</u>
3131898408	73065603		SD170-0015	022164367461 666855827 Snow Cone Machine Red- Better	30	2	15	7.93	118.95	0.89	13.35

Shipment Manifest (300097649)

BOL #:	06757163000976492	Customer:	WALMARTWHS	Ship To:	6561R
Carrier:	WAL-MART FLEET	Ship Date:	01/10/2025	Load Number:	84376497
Trailer Number:	156754	Pro Number:		Seal Number:	63589269
Total Cartons/Units:	1148/1148	Total Cube:	2262.32	Total Weight(LB):	14300.60
Ship From:	E & E COMPANY LTD- 444096 221 Hanson Way Woodland, CA 95776	Ship To:	Wal-Mart DC 6561R-Regular 1600 Agua Mansa Road Colton, CA 92324		

<u>Customer PO No.</u>	<u>E&E SO No.</u>	<u>Mark for Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To Ship</u>	<u>Case Pack Qty</u>	<u>Total Cartons</u>	<u>Carton Weight (LB)</u>	<u>Total Weight (LB)</u>	<u>Carton Cube</u>	<u>Total Cube</u>
9521646525	73065623		MS9344409 622-03	022164323061 662833771 K Allie 10pcs Comforter Set	280	1	280	13.08	3662.40	1.98	554.40
9521646525	73065623		MS9344409 622-08	022164323115 662833776 Q Chase 10pcs Comforter Set	352	1	352	11.69	4114.88	1.79	630.08
9521646525	73065623		MS9344409 622-17	022164322767 662800973 F/Q Moran 5pcs Comforter Set	324	1	324	12.11	3923.64	1.94	628.56
9521646525	73065623		MS9344409 622-18	022164322774 662800971 K Moran 5pcs Comforter Set	192	1	192	13.54	2599.68	2.34	449.28