

Date: 3/6/2025 4:11:04 PM

Master Bill Of Lading

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____ FOB:

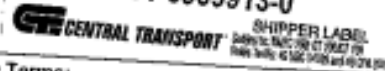
Master Bill of Lading Number: 06757168001419351

SHIP TO
 Name: Wal-Mart DC 7045A-ASM DIS DC#: 7045A
 Address: 6000 Walton Way 7045A Div.
 City/State/Zip: Mt. Crawford, VA 22841
 SID#: _____ FOB:

CARRIER NAME: Central Transport

Trailer number: 5313041R
 Seal number(s): _____

SCAC: CTII
 Pro Number: _____
 www.centraltransport.com
 Driver's Signature Only Acknowledges Receipt of Freight
151-6909913-0



THIRD PARTY FREIGHT CHARGES BILL TO:

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

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

SPECIAL INSTRUCTIONS:

Load #: 38013881

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3058526783	48	552.96	Y N	06757168001415308	6010R	
8230389500	35	241.85	Y N	06757168001415292	6010A	
8230389523	2	12.98	Y N	06757168001413960	6010A	
Grand Total	85	807.79				

HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLAS
48	ctns			552.96		Comforters, Bedspreads	49017	200
35	ctns			241.85		Ice Cream Maker	55620	100
2	ctns			12.98		Ice Cream Powder	72750	92.5
Grand Total				807.79				

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 offered, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.
 Shipper Signature: O.G. 3/10/25

Trailer Loaded: By Shipper By Driver
Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Places

SHIPPER SIGNATURE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available in/cab; carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
 Shipper Signature: AV 3-10-25

Order No.: 73432998	Order Date: 02/24/2025	Customer: WALMARTWHS	Customer PO No.: 3058526783
PO Type No.: 0020	Location No.: 6010R	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 6010R - REGULAR
 1401 BAKER HWY W
 DOUGLAS, GA 31533

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

Total Quantity Ordered:	48
Total Ordered:	48
Total Quantity Shipped:	48
Total Cartons Shipped:	48