

SHIP FROM		Master Bill of Lading Number: 06757168001428193	
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 DC#: 7101 Div. _____ Address: 1200 Mason Dixon Ln 7101 City/State/Zip: Conley, GA 30288 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 194961 Seal number(s): 5275456 SCAC: WALM Pro Number: 0000	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 86097492		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
		Appointment Time AM PM	Actual Driver Arrival Time AM PM
		Driver Departure Time AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
2908526056	48	552.96	Y	N	06757168001422511	6009R	
1431602912	88	1028.72	Y	N	06757168001422634	7035A	
2732071738	50	575.80	Y	N	06757168001422658	6017A	
7675409225	20	233.80	Y	N	06757168001422368	7039A	
9737830309	1	6.49	Y	N	06757168001422610	7026A	
1633070164	1	6.49	Y	N	06757168001422887	7034A	
4158526469	96	1105.92	Y	N	06757168001422382	6018R	
7632701282	1	6.49	Y	N	06757168001422719	6024A	
2532421098	44	514.36	Y	N	06757168001422641	6030A	
3458527474	144	1658.88	Y	N	06757168001422559	6017R	
5382044739	2	12.98	Y	N	06757168001422672	7033A	
9529969928	2	23.38	Y	N	06757168001422375	7026A	
3282890729	1	6.49	Y	N	06757168001422788	7038A	
3532950211	5	58.45	Y	N	06757168001422443	7036A	

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: <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. <p style="text-align: right;">Shipper Signature</p>
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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:50	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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SHIP FROM		Master Bill of Lading Number: 06757168001428193
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	DC#: 7101	
	Div. _____	
Address: 1200 Mason Dixon Ln 7101		
City/State/Zip: Conley, GA 30288		
SID#: _____	FOB: <input type="checkbox"/>	
		Trailer number: 194961
		Seal number(s): 5275456
		SCAC: WALM
		Pro Number: 0000

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:		
Name: _____				
Address: _____	Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>	3rd Party: <input type="checkbox"/>	
City/State/Zip: _____	<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING			
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
Load #: 86097492		AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
3558526634	48	552.96	Y	N	06757168001422467	7039R	
4082171426	11	128.59	Y	N	06757168001422498	6031A	
6737391795	1	6.49	Y	N	06757168001422702	6080A	
1382403075	1	6.49	Y	N	06757168001422870	6068A	
3430828621	1	6.49	Y	N	06757168001422795	7039A	
3533090060	89	1038.96	Y	N	06757168001422450	7038A	
4975699284	44	514.36	Y	N	06757168001422344	7045A	
6132540782	44	514.36	Y	N	06757168001422351	6006A	
3308527112	96	1105.92	Y	N	06757168001422535	6019R	
3908526793	48	552.96	Y	N	06757168001422481	6035R	
4758527091	96	1105.92	Y	N	06757168001422429	6037R	
4858526926	144	1658.88	Y	N	06757168001422436	6006R	
1880499475	1	6.49	Y	N	06757168001422894	7045A	
2832920235	26	303.94	Y	N	06757168001422504	6036A	

<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>
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<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 Pallet: 50</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/Pieces</p>	<p>CARRIER SIGNATURE / PICKUP DATE</p> <p><small>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.</small></p>
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Order No.: 73517223 Order Date: 03/10/2025 Customer: WALMARTWHS Customer PO No.: 3533090060
 PO Type No.: 0033 Location No.: 7038A 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 7038A-ASM DIS
 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
662833770	MS9344409622-01	022164323047	F Allie 10pcs Comforter Set	EA	1	1	1	1	1
662833776	MS9344409622-08	022164323115	Q Chase 10pcs Comforter Set	EA	1	88	88	88	88

Total Quantity Ordered: 89
Total Ordered: 89
Total Quantity Shipped: 89
Total Cartons Shipped: 89