

SHIP FROM		Master Bill of Lading Number: 06757168001415377
Name: <b>E &amp; E COMPANY LTD</b>		
Address: <b>311 International Trade Pkwy</b>		
City/State/Zip: <b>Port Wentworth, GA 31407</b>		
SID#: _____	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: Central Transport
Name: <b>Wal-Mart DC 6023A - ASM DIS</b>	DC#: <b>6023A</b>	
Address: <b>21500 Cox Road</b>		Trailer number: <b>470751</b>
City/State/Zip: <b>Sutherland, VA 23885</b>		Seal number(s): _____
SID#: _____	FOB: <input type="checkbox"/>	SCAC: <b>CTII</b>   <a href="http://www.centraltransport.com">www.centraltransport.com</a> Pro Number: _____   Driver's Signature Only Acknowledges Receipt of Freight <div style="text-align: right; font-weight: bold; font-size: 1.2em;">151-6909912-2</div> SHIPPER LABEL <small>Printed on Recycled Paper</small>

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"/> <b>MASTER BILL OF LANDING: WITH ATTACHED</b> <input type="checkbox"/> <b>UNDERLYING BILLS OF LANDING</b>	
<b>SPECIAL INSTRUCTIONS:</b>	Appointment Time	Actual Driver Arrival Time
Load #: 38013872	AM PM	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#
4058526756	32	433.28	Y N	06757168001415254	6023R		
4575639614	236	2657.85	Y N	06757168001415278	6023A		
5380898542	1	7.93	Y N	06757168001415261	6023A		
<b>Grand Total</b>	<b>269</b>	<b>3099.06</b>					

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodity 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(a) of NMFC Item 369.		
						NMFC #	CLASS	
268	ctns			3091.13		Comforters, Bedspreads	49017	200
1	ctns			7.93		Ice Cream Maker	55620	100
269				3099.06		<b>Grand Total</b>		

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 _____	<b>COD Amount \$</b> _____ 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.
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<b>SHIPPER SIGNATURE / DATE</b> 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 Pallets: 8	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	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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. <div style="font-size: 1.5em; text-align: center;">JK</div> <div style="font-size: 1.2em; text-align: right;">03/06/2025</div>
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**Order No.:** 73424374      **Order Date:** 02/23/2025      **Customer:** WALMARTWHS      **Customer PO No.:** 5380898542  
**PO Type No.:** 0033      **Location No.:** 6023A      **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 6023A - ASM DIS  
 21500 COX ROAD  
 SUTHERLAND, VA 23885

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
666855827	SD170-0015	022164367461	Snow Cone Machine Red-Better	EA	2	2	1	2	1

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**Total Quantity Ordered:** 2  
**Total Ordered:** 1  
**Total Quantity Shipped:** 2  
**Total Cartons Shipped:** 1