





# Delivery Receipt

**PRO-NUMBER**  
777-9968181-0

**SHIP DATE**  
2025-04-24

**Consignee:**  
WAL-MART 6561  
1600 W AGUA MANSA RD  
COLTON, CA 92324

**Terminal Location**      **Terminal ID**  
RANCHO CUCAMONGA - CA      918

**Shipper:**  
E - E COMPANY  
221 HANSON WAY  
WOODLAND, CA 95776

**Terminal Location**      **Terminal ID**  
SACRAMENTO - CA      958

**Reference Number**  
38913043

**FREIGHT TERMS:**  
**Freight Charges Are Collect**

**P.O. Number**  
5537572957

**SCAC: CTII**

**Special Instructions:**

DATE: 4/24/2025 10:26:45 AM		Bill Of Lading		Page 1 of 1	
<b>SHIP FROM</b>			<b>Bill of Lading Number:</b> 003716300101882		
Name: E - E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 COE: <input type="checkbox"/> FOB: <input type="checkbox"/>					
<b>SHIP TO</b>			<b>CARRIER NAME:</b> Central Transport		
Name: Wal-Mart DC 6995A-A3M 025 Location #: 6061A Address: 1600 Agua Mansa Road City/State/Zip: Colton, CA 92324 COE: <input type="checkbox"/> FOB: <input type="checkbox"/>			Trailer number: 226129 Seal number(s): SCAC: CTII Pro Number: 777-9968181-0 		
<b>THIRD PARTY FREIGHT CONTROLS BILL TO</b>			Freight Charge Terms: ( freight charges are prepaid unless marked otherwise)		
Name: Address: City/State/Zip:			Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/> Make Bill of Lading with attached (check box) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Appointment Time: AM PM Actual Driver Arrival Time: AM PM Driver Departure Time: AM PM		
<b>SPECIAL INSTRUCTIONS:</b> Load # 38913043					
<b>CUSTOMER ORDER INFORMATION</b>					
<b>CUSTOMER ORDER NUMBER</b>	<b>#</b>	<b>PKGS</b>	<b>WEIGHT</b>	<b>PALLETS (SPLS INCLD)</b>	<b>Must Deliver By Date</b>
5537572957	278	6	3168.38	Y N	04/28/2025
<b>GRAND TOTAL</b>	<b>278</b>	<b>6</b>	<b>3168.38</b>		
<b>CARRIER INFORMATION</b>					
<b>HANDLING UNIT</b>	<b>PACKAGE</b>	<b>WEIGHT</b>	<b>H.M. (K)</b>	<b>COMMODITY DESCRIPTION</b>	<b>LTL ONLY</b>
QTY TYPE	QTY TYPE				NMFC # CLASS
278 179s		2168.38		Comforters, Bedspreads	48017 200
<b>GRAND TOTAL</b>					
278		2400.39			
Make this Bill of Lading void unless signed by shipper and consignee in writing. The signed or stamped value of the property as shown on this Bill of Lading shall be the value for all purposes.			<b>COO Amount \$</b> Fee Terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(1)(A) and (B).					
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above content, description and quantity of contents that have been agreed upon in writing. The carrier, by signing this Bill of Lading, certifies that the goods, descriptions and value thereon have been received by the carrier and are available to the consignee at the place, on the date, and in the condition stated hereon.			<b>CARRIER SIGNATURE / PICKUP DATE</b> I certify that I have received the packages and contents described herein and that they are in the condition and quantity as described herein. I certify that the goods, descriptions and value thereon have been received by the carrier and are available to the consignee at the place, on the date, and in the condition stated hereon.		
Signature: <i>[Signature]</i> Date: 4/24/25			Signature: <i>[Signature]</i> Date: 04-24-25		

**Signed By:** patty Aguilar

**Signature:** *[Signature]*  
(States shipment received in good order)

**HU's Received:** 6      **Date:** 2025-04-25

**Driver:** CT-918757      **Trailer:** 1800639

**Arrive Time:** 3:49 PM      **Depart Time:** 3:56 PM

**PRO-NUMBER: 777-9968181-0**

Inside Delivery       Sort/Segregate       Driver Delay  
 Liftgate       Redelivery

By signing below, Consignee acknowledges that additional delivery service/s were performed and are subject to rules and conditions outlined in the CT100 series rules tariff.

**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Date	Number And Type of Container	Number And Type of PCS	Exception Type
Log #			
<b>Total Exceptions:</b>			

All claims for loss or damage must be reported immediately. By making of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction allowance may be made to this bill as permitted by 49 CFR 105.12(b).

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**Order No.:** 73780327      **Order Date:** 04/16/2025      **Customer:** WALMARTWHS      **Customer PO No.:** 5537572957  
**PO Type No.:** 0033      **Location No.:** 6561A      **Dept. No.:** 00022

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**SHIP FROM:**  
 E & E COMPANY LTD  
 221 HANSON WAY  
 WOODLAND, CA 95776

**BILL TO:**  
 WAL-MART STORE 111 WHS  
 1108 SE 10TH STREET  
 ATTN: A/P DEPT.  
 BENTONVILLE, AR 72716

**SHIP TO:**  
 WAL-MART DC 6561A-ASM DIS  
 1600 AGUA MANSA ROAD  
 COLTON, CA 92324

Customer SKU Number	Item Number	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Cartons Ordered	Qty Shipped	Cartons Shipped
673808298	MS8544409622-07	022164488562	Q Patrick Comforter Set	EA	1	176	176	176	176
670126511	MS9444409622-02	022164418866	F/Q Comforter	EA	2	96	48	96	48
670123545	MS9444409622-26	022164419108	F/Q Comforter	EA	2	108	54	108	54

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**Total Quantity Ordered: 380**  
**Total Ordered: 278**  
**Total Quantity Shipped: 380**  
**Total Cartons Shipped: 278**