


Date: 8/11/2025 11:33:46 AM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757168001525557
Name: E & E COMPANY LTD		 <p>(402)06757168001525557</p>
Address: 311 International Trade Pkwy		
City/State/Zip: Port Wentworth, GA 31407		
SID#: _____	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: Knight Transportation
Name: Wal-Mart DC 6070A-ASM DIS	Location #: 6070A	Trailer number: 83592
Address: 200 Wal-Mart Drive		Seal number(s): 89490859
6070A		SCAC: KNIG
City/State/Zip: Shelby, NC 28150		Pro Number:
CID#: _____	FOB: <input type="checkbox"/>	
Dept: 00022		

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/>
Name: _____		<input type="checkbox"/> Master Bill of Lading: with attached <input type="checkbox"/> (check box) underlying Bills of Lading
Address: _____		Appointment Time: AM <input type="checkbox"/> PM <input type="checkbox"/> Actual Driver Arrival Time: AM <input type="checkbox"/> PM <input type="checkbox"/> Driver Departure Time: AM <input type="checkbox"/> PM <input type="checkbox"/>

SPECIAL INSTRUCTIONS:
Load #: 40424119

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
6982621747	252	7	3929.99	Y N	08/04/2025	6070A	0033	00022	
GRAND TOTAL	252	7	3929.99						

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or LTL local care or attention in loading or stowing must be so marked and packaged as to allow safe transportation with ordinary care. See Section 2(j) of NMFC Item 100.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
252	ctns			3929.99		Comforters, Bedspreads	49017	200
GRAND TOTAL								

When 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, conditions 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 <small>This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>	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/Pieces <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE <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. Property described above is received in good order, except as noted.</small>
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Date: 8/11/2025 11:33:44 AM

Bill Of Lading

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

Bill of Lading Number: 06757168001525564

 (402)06757168001525564

SHIP TO
 Name: Wal-Mart DC 6040A-ASM DIS Location #: 6040A
 Address: 1020 Wal-Mart Drive
 6040A
 City/State/Zip: Hope Mills, NC 28348
 CID#: _____ FOB:
 Dept: 00022

CARRIER NAME: Knight Transportation
 Trailer number: 83592
 Seal number(s): 60480859
SCAC: KNIG
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 #: 40424119

Master Bill of Lading: with attached 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	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
7882701581	329	9	5220.91	Y N	08/05/2025	6040A	0033	00022	
GRAND TOTAL	329	9	5220.91						

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 insure safe transportation with ordinary care. See Section 2(b) of NMFC Item 349.</small>	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
329	ctns			5220.91		Comforters, Bedspreads	49017	200	
329				5220.91		GRAND TOTAL			

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

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
 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.

Date: 8/11/2025 11:33:40 AM

Bill Of Lading

Page 1 of 1

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