


Date: 12/11/2025 12:14:48 PM

Bill Of Lading

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SHIP FROM		Bill of Lading Number: 0875718001622041
Name:	E & E COMPANY LTD	 (402)06757168001622041
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:	Wal-Mart DC 7035A-ASM DIS Location #: 7035A	Trailer number: 161496
Address:	18245 NW 115 Avenue	Seal number(s): 69490461
City/State/Zip:	Alachua, FL 32615	SCAC: WALM
CID#:	FOB: <input type="checkbox"/>	Pro Number:
Dept:	00022	

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

SPECIAL INSTRUCTIONS:
Load #: 91832636

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS	Pits 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
1431604864	252	13	3717.94	Y N	12/13/2025	7035A	0033	00022	
GRAND TOTAL	252	13	3717.94						

HANDLING UNIT							PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention or handling or stowage must be so marked and prepaid: see for more information with carrier rate. See Section 2(a) of NMFC Item 363</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE			NMFC #	CLASS						
13	Pallet							455.00		Pallet			
		252	ctns					3717.94		Comforters, Bedspreads Sub 3 - 2 but less than 4	49260-3	250	
13		252						4172.94		GRAND TOTAL			

Where the rate is dependent on value, shippers are required to elated 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 <small>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.</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/pallets used to contain <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 kit/kitbook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.</small>		