

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

Master Bill of Lading Number: 06757168001671463

**SHIP TO**  
 Name: Consolidation Dock 7101 DC#: 7101  
 Div.  
 Address: 1200 Mason Dixon Ln  
 7101  
 City/State/Zip: Conley, GA 30288  
 SID#: \_\_\_\_\_ FOB:

CARRIER NAME: WESTERN EXPRESS  
 Trailer number: 380441  
 Seal number(s): 73105114  
 SCAC: WSXI  
 Pro Number:

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name:  
 Address:  
 City/State/Zip:

Freight Charge Terms:  
 Prepaid:  Collect:  3rd Party:   
 MASTER BILL OF LANDING: WITH ATTACHED  
 (check box) UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:  
 Load #: 43379197

Appointment Time Actual Driver Arrival Time Driver Departure Time  
 1300 AM 1029 AM 1133 AM  
 PM PM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
1431605290	611	5077.03	Y	N	06757168001671308	7035A
1431605291	58	829.11	Y	N	06757168001671278	7035A
2082003876	1080	7751.60	Y	N	06757168001671285	6024A
3508528161	44	535.92	Y	N	06757168001671315	7035R
9031129865	345	1415.50	Y	N	06757168001671292	7035A
<b>Grand Total</b>	<b>2138</b>	<b>15609.16</b>				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	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 ensure safe transportation with ordinary care. See Section 2(a) of NACM Sec 360.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
990	ctns			12980.50		Comfortors, Bedspreads Sub 3 - 2 but less than 4	49260-3	250
345	ctns			1415.50		Panels, Valances	49260-4	175
803	ctns			1213.16		Sheet Set & Pillowcase	49260-3	250
<b>2138</b>				<b>15609.16</b>		<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 \_\_\_\_\_

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, specifications 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.  
 Total Pallet: 31 *[Signature]* 3/5/2026

Trailer Loaded:  By Shipper  By Driver  
 Freight Counted:  By Shipper  By Driver/Pallets said to contain  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.  
*[Signature]*

SHIPPED DATE: 3/5/2026

MUST DELIVERED BY DATE: 3/9/2026