



Greetings:

Associated Freight Brokers, Inc. is located in Yakima, Washington with a branch in Sunnyside, WA. The company has been in business since November 2, 1988. Randall A. Ward, owner of Associated, has been involved in the brokerage industry since 1978.

We are principally engaged in the transport of both fresh and frozen food products throughout the North American Continent. Associated manages all aspects of shipments including drayage, semi-trailers as specified, pickup and delivery appointments, palletization, cargo insurance, "in transit" reports and compliance with ICC and DOT regulations. Associated also offers a variety of industry related services such as fuel and mileage tax preparation, accounting, and bookkeeping services.

Our goal is to build and maintain long term relationships that our customers and carriers can depend on daily. Please contact one of us for further information about our company, rates or commodities shipped.



Yakima, WA Sales Office

Wendy Olson 800-349-4979
Josh Borden 866-881-8315
Lola Leon 509-453-3083

Sunnyside, WA Office

Wally McMinimee
509-840-1185

Accounting Office

Ramona Bishop Accounts Payable
Sandy Hatch Accounts Receivable

(509) 453-3083
(800) 548-0669 Watts
(509) 575-6555 Sales Fax (509) 452-0672 Accounting Fax

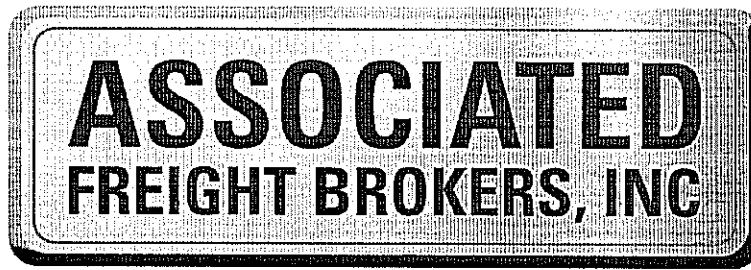
Motor Carrier Number MC214286
Federal ID# 91-1426378
SCAC Code AFBS

Website www.associatedfreight.com
Physical/Billing Address 1714 S 24th Ave,
Yakima, WA 98902

We look forward to doing business with you.

Sincerely,

Randall A. Ward



Infinity Carriers
1923 Augusta Lane
Yuba City, CA 95993
509-217-1188

APM Transportation Inc.
PO Box 3116
Bellingham, WA. 98225
(360) 510-0344

Sohi Bros Enterprises LTD
PO Box 436
Surrey, BC V3T 5B6
(800) 780-7644

JLV Transport
2281 – C Harvest Rd
San Diego, CA 92154
619-455-9899

Rolling Stone Transport
1955 Red Haven Ave
Yuba City , CA 95993
530-682-7383

TMG Logistics Inc
2750 Peace Portal Dr. #B
Blaine, WA 98230
360-392-8843

Galaxy Pacific Services LLC
4010 Kramer Ln.
Bellingham, WA 98226
510-378-5853

R & S Bros Trucking
1963 Mccane Ave
Yuba City , CA 95953
530-763-5838



New Carrier Checklist

This is a list of the information needed to set up a new carrier. The checklist is broken down into two sections; required & verifiable. Required information is what is required in order to have the truck set up in VLP. Verifiable information is the information that you will collect from the truck and write in below for our records.

Verifiable Information

- 1. Reefer unit year _____ make _____ model _____ Trailer Information – Year _____
Make _____
- 2. Produce chute mounted properly, installed & in serviceable condition. No rips/tears.
- 3. # of Trucks in fleet _____ Equipment type: Reefers _____, Vans _____, Flats _____
- 4. Tractor Information – Year _____ Make _____ Color _____ Unit # _____
Name shown on truck _____
Located on (choose one) _____ Door _____ Fuel Tank _____ Sleeper _____
VIN# _____ Tag _____ State _____
- 5. Review with carrier : cleanliness of the inside of the trailer, available hours, reefer is to be run on CONTINUOUS at the temperature specified by you, temp recorder should be present and placed on the wall of the trailer.

Required Information

- 1. Completed New Carrier Checklist
- 2. Insurance Certificate in AFB's name and listed as additional insured if possible.
- 3. Authority
- 4. W – 9
- 5. Carrier Contract & Contract Addendum
- 6. Set Up Completion Process and Checklist
- 7. References
- 8. Reefer Maintenance Records
-

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see Instructions) ▶ _____		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)																																																			
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.																																																			
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																																																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="10" style="text-align: center;">Social security number</td> </tr> <tr> <td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td> </tr> <tr> <td colspan="10" style="text-align: center;">OR</td> </tr> <tr> <td colspan="10" style="text-align: center;">Employer identification number</td> </tr> <tr> <td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td><td style="width: 30px;"> </td> </tr> </table>	Social security number																				OR										Employer identification number																			
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Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and	
3. I am a U.S. citizen or other U.S. person (defined below); and	
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See **What is backup withholding?** on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See **What is FATCA reporting?** on page 2 for further information.

DATE _____

FREIGHT BROKER- CONTRACT CARRIER - CONTRACT

I. IDENTIFICATION OF PARTIES

AGREEMENT made this _____ day of _____, 20____, by and between _____, hereinafter referred to as CARRIER, MC# _____ and ASSOCIATED FREIGHT BROKERS, INC., hereinafter referred to as BROKER, MC# 214286 B.

WITNESS:

- 1) CARRIER is a motor contract carrier of property authorized by the U.S. Department of Transportation ("U.S. DOT") and/or by various state governmental agencies to provide transportation of property in interstate and/or intrastate commerce under contract with shippers and receivers of general commodities, and
- 2) BROKER is a U.S. DOT regulated (Title 49 U.S. Code Section 13904) and a non-regulated freight BROKER, authorized to engage in operations as a freight broker in connection with the transportation of general commodities, between points in the U.S.

NOW THEREFORE, in consideration of the representation made in this Contract, the parties agree as follows:

II. SPECIFIC OBLIGATION OF CARRIER

(a) CARRIER shall issue a bill of lading for property it receives for transportation under this Contract and shall be liable to BROKER and to any other person entitled to recover under the bill of lading. CARRIER'S liability imposed by this paragraph is CARRIER'S liability under 49 U.S. Code Section 14706 for the actual loss of, injury to or delay in delivery of the property. Failure to issue a bill of lading does not affect the liability of CARRIER. BROKER requires CARRIER to assume full liability for the actual loss of, injury to or delay in delivery of the property transported by CARRIER at the request of BROKER in order to negate a possibility of CARRIER transporting the property at a released rate or with a limitation or liability.

(b) CARRIER agrees to maintain cargo insurance in the amount of \$100,000.00 covering all risks, provided, on specified shipments requiring greater coverage carrier shall obtain increased cargo insurance as required, to compensate those parties entitled to recover under the preceding paragraphs. CARRIER agrees to maintain public liability insurance for bodily injury (including injury resulting in death) and for damage to property (other than cargo transported pursuant to this Contract) in an amount not less than \$2,000,000.00 combined single limit per occurrence and auto liability of not less than one million dollars (\$1,000,000) and workers'-compensation coverage as required by applicable law and an umbrella liability policy of not less than one million dollars (\$1,000,000.) All insurance coverage required herein shall be with reliable insurance company or companies having an A.M. Best Company rating of A-VII or better, with all funds referred to herein being U.S. Funds. CARRIER shall cause its insurance carrier to forward forthwith to BROKER a standard certificate of insurance confirming the issuance of such cargo insurance, naming BROKER and any other person or entity as designated by BROKER as additional

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CARRIER INITIALS

insured, which certificate shall require the insurance carrier to give BROKER written notice thirty (30) days prior to the cancellation of such cargo insurance.

(c) CARRIER'S liability shall begin at the time CARRIER confirms to BROKER that it will haul the cargo and shall continue until said cargo is off loaded to the designated consignee at the destination, or to any intermediate drop off approved by shipper, or BROKER.

(d) CARRIER shall arrive at the point of origin of shipment at the time and date designated by shipper or BROKER, fully prepared to accept the cargo on CARRIER'S equipment, which equipment shall be in good working order with clean cargo space and capable of properly protecting, preserving and hauling the cargo without damage to the Cargo.

(e) CARRIER agrees to defend (at its expense), indemnify and hold harmless BROKER and its officers and employees and customers from and against any and all loss, damage and/or claim to include but not be limited to delivery delay claims on each shipment transported by CARRIER, damages, fines, penalties, expenses, court actions and/or judgments for damages to persons and/or property and for cleanup or remediation or any leaks, spill or contamination, arising out of CARRIER'S operations pursuant to this Contract. This indemnification and hold harmless obligation extends to BROKER'S costs (including without limitation attorneys' fees and expert witness costs). This indemnification shall survive termination of this Contract. Additionally, CARRIER, shall comply with any mediation, arbitration and/or venue clause that BROKER is subject to for any product or claim stemming from a shipment carried by CARRIER and indemnify CARRIER for all expenses and or costs incurred by CARRIER pursuant to such clauses.

(f) CARRIER shall be responsible for payment of all road, fuel and other taxes, fees or permits related to shipments transported by CARRIER as requested by BROKER.

(g) CARRIER shall not be listed or identified under the FMCSA's Safety Management System ("SMS") BASIC as categorized in the "Alert" status, and shall immediately report to BROKER, if CARRIER is at any time so categorized during the term of this agreement.

(h) CARRIER further agrees that it shall not subcontract, broker, re-broker or assign any portion of its duties to transport all shipments contemplated by this Contract.

(i) CARRIER agrees that during the term of this Contract, if freight is tendered directly to CARRIER by a customer that was originally introduced to CARRIER by BROKER, then for all such freight shipped, CARRIER will pay BROKER a commission of 20% of the gross revenue generated by the CARRIER.

(j) CARRIER expressly agrees that at no time, without written authorization from BROKER will the CARRIER perform services, directly or indirectly, for any of BROKER'S customers during the effective time of this Contract and for a period of two years from the termination of this Contract or any renewal thereof as provided under Paragraph X (a) hereof.

(k) CARRIER shall at all times maintain its vehicle and operations in full compliance with all U.S. DOT regulations and shall maintain its U.S. DOT authorization as a carrier and shall advise Broker in writing if its authorization as a carrier is challenged or revoked by U.S. DOT and shall not accept any loads arranged by BROKER until such authorization is fully restored by U.S. DOT. CARRIER shall

further (a) comply at all times hereunder with all applicable state and federal safety regulations including, without limitation, compliance with all applicable laws and regulations under the Federal Food & Cosmetic Act, the federal Department of Homeland Security ("DSA") and Transportation Security Agency ("TSA"), as well as any legislation and related programs designed to protect transportation activities from terrorist attacks (such as the Customs - Trade Partnerships Against Terrorism and the Free and Secure Trade); (b) ensure the safe, proper and legal load securement of all product shipped under this Contract.

(l) CARRIER shall at all times maintain its trailer in a clean, sanitary, and odor-free condition, including temperature-controlled trailers as needed, suitable for the transportation of consumable food products; (c) pursuant to the permissible limits of federal or state law and consistent with best practices in the industry,

(m) CARRIER shall have and maintain an information systems interfacing and Internet capabilities, including a dedicated web portal for designated supply-chain distribution management.

(n) CARRIER agrees that this is a written contract for purposes of 49 U.S.C.A. §14101(b)(1). Accordingly, and except as otherwise provided herein, the parties expressly and mutually waive any and all remedies otherwise available to either party under the provisions of the Interstate Commerce Act ("Act"), namely Part B thereof 49 U.S.C.A. §13101, et seq.

(o) CARRIER expressly waives any statutory liens otherwise available to the carrier.

(p) CARRIER expressly agrees to assume liability to shipper or consignee for the full retail value of any product lost, damaged or delayed as a part of any shipment carried by CARRIER. CARRIER further agrees that it shall pay the shipper or consignee the full retail value of the lost product.

(q) CARRIER shall pay BROKER or its assigns for any such loss or damage no later than thirty (30) days upon the submission by BROKER of a written notice of claim setting forth the nature and value of the claim.

(r) CARRIER agrees that upon issuance of the 30-day notice per section (q) hereof, BROKER may off-set the amount of any such claim against any payments otherwise due CARRIER from BROKER.

(s) CARRIER agrees and represents that no shipment of product hereunder shall be subject to any limitation of liability and/or released value unless otherwise agreed to in writing by BROKER. To the extent that CARRIER inadvertently or otherwise carries product later deemed to be subject to any such limitation of liability, CARRIER shall be liable for and shall pay the difference between the value of the product lost or damaged and such limitation amount. No shipment of product hereunder shall be subject to any terms of transportation used by CARRIER as may be contained in any "tariff", "service guide", "service rules" or similar publication maintained by carrier to transport product hereunder.

(t) CARRIER agrees that CARRIER'S liability as to all product transported hereunder shall be on the basis of the so-called "Carmack Amendment" ("Carmack"), 49 USC §94706, preserving to consignee or shipper any and all rights and remedies thereunder, as well as any of the remedies which would otherwise be available to consignee or shipper notwithstanding Carmack.

(u) In addition to the terms contained herein CARRIER and BROKER agree that terms contained on Appendixes A and B hereto are incorporated herein by this reference.

(v) CARRIER operating any transport refrigeration unit (TRU) in California must ensure that its TRU meets all California legal requirements for operation of TRUs on California highways. The BROKER contact person per the requirements of this subsection is the Broker's agent that brokered the applicable load to the CARRIER. CARRIER shall confirm this to BROKER by any means reasonably requested by BROKER to include but not be limited to submission to BROKER of completed SSD/EAB form #28 with acknowledgment by State of California of full compliance with all regulations pertaining to TRU operations.

(w) CARRIER shall maintain its equipment, to include without limitation the refrigeration units, to the highest standard of the industry. CARRIER shall perform preventive maintenance on its equipment no less frequently than semiannually. CARRIER shall keep maintenance records evidencing all maintenance performed and shall provide copies of such maintenance records to BROKER every 6 months or more frequently as requested by BROKER.

III. SPECIFIC OBLIGATIONS OF BROKER

(a) BROKER shall offer on behalf of customers, shippers, and receivers to CARRIER no fewer than ~~one (1) shipment per year for as long as this Contract or any extension of same remains in effect.~~

(b) BROKER agrees to pay to CARRIER the freight charges for the transportation of property transported under this Contract in accordance with the rates set forth in this Contract or in addenda to this Contract, within thirty (30) days after receipt by BROKER of CARRIER'S invoice, accompanied by original proof of delivery, covering such transportation. CARRIER agrees that BROKER (and not any other shipper or consignee) shall be solely liable to CARRIER for payment of such freight charges.

IV. SPECIFIED RATES AND CHARGES

The parties agree that the fixed rate(s) set forth in this Contract or in addenda to this Contract may be amended for individual shipments, based on the market conditions then prevailing. The methodology for amending the fixed rate(s) will be as follows: After a rate is agreed to by the parties, BROKER shall furnish to CARRIER a Confirmation of Contracted Carrier Verbal Rate Agreement (hereinafter referred to as the Confirmation Agreement). The Confirmation Agreement will identify the individual shipment by date of tender, origin, destination, commodity and agreed rate. The Confirmation Agreement shall be an accepted amendment to this Contract and in the text of the Confirmation Agreement there shall be reference to this Contract for identification. Because of storage difficulties, the Confirmation Agreement need not be attached to this Contract, but may be kept with the shipping papers for the individual shipments. CARRIER is required to sign and return a signed copy of each confirmation agreement prior to his truck being dispatched.

V. BILLS OF LADING

Each bill of lading shall note that the shipment is to be transported by CARRIER, acting as the motor carrier, and that the shipment is to be transported by CARRIER at the request of BROKER, ACTING AS A FREIGHT BROKER. The name of the shipper shall be inserted in the blank for the shipper, and the name of the consignee shall be inserted in the blank for the consigned. When BROKER has assembled

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multiple shipments into carload or truckload lots, the list of underlying shippers shall be attached as an Appendix to the bill of lading. If any provision (including but not limited to a limitation of liability for cargo loss, damage or delivery delay) contained in any bill of lading or receipt issued by CARRIER, BROKER or a shipper other than BROKER conflicts with this Contract, then such conflicting provision shall not apply. The CARRIER is responsible to send the original bill of lading to the BROKER with their invoice.

VI. CONTRACT UNDER TITLE 49 U.S. CODE SECTION 14101(b)

To the extent that this Contract is applicable to U.S. DOT regulated interstate or foreign commerce shipments, BROKER and CARRIER agree that this Contract is entered into pursuant to Title 49, Code of Federal Regulations. To the extent that any provision of this Contract is contrary with any laws, codes or regulations (collectively "Law" this Contract shall be interpreted in a manner that is as close to the language of the Contract as possible but still in compliance with the Law and such Laws shall be deemed a part of this Contract.

VII. PROVISIONS AS TO THE HANDLING OF CARGO CLAIMS

Cargo claims shall be handled by CARRIER in accordance with regulations contained in Part 370 of Title 49, Code of Federal Regulations and this Contract to the extent not in violation with applicable regulations.

VIII. INDEPENDENT CONTRACTOR STATUS

The relationship of CARRIER to BROKER shall at all times be that of an independent contractor.

IX. FORCE MAJEURE EXCEPTIONS

Neither party to this Contract will be liable to the other party to this Contract for failure to perform under this Contract if such failure is caused by strike, acts of God, war, civil disorder, or compliance with a legally constituted order of civil or military authorities.

X. TERMS OF THIS CONTRACT

(a) This Contract is to become effective on signing and, except for the provisions of Paragraphs II.(e) and II. (j), shall remain in effect for a period of one year from such date, subject to the right of either party to this Contract to terminate this Contract at any time upon not less than thirty (30) days prior written notice to the other party to this Contract.

(b) In the event that CARRIER accepts additional loads brokered to CARRIER after the expiration of this Contract, the terms and conditions hereof shall remain in effect until changed by mutual written agreement.

(c) Any notices shall be given in writing to the parties below given address or last known address. Delivery shall be deemed made when actually received either at the party's address or fax #.

(d) Any provision in this Contract that is deemed in violation with any law or regulation shall be deleted and the rest of the contract shall remain fully in force.

(e) Venue and jurisdiction for any disputes or actions arising hereunder shall be laid in Yakima County, State of Washington. The prevailing party in any such dispute or action shall be entitled to an award of its reasonable attorney fees.

XI. APPROVAL OF BACKGROUND CHECKS, INTERVIEWS WITH THIRD PARTIES AND INSURANCE POLICIES

The undersigned CARRIER, on behalf of itself and/or its principal, (hereinafter collectively "CARRIER") hereby gives permission for BROKER to investigate, verify and obtain information given in, required by or relevant to this Contract, including searches of law enforcement and published records, including driving records and criminal background checks, ARB-compliant TRUs, contact brokers and shippers with whom CARRIER has had previous or current contacts with and interview same. It is understood that this information will be used, in part, to determine the CARRIER's compliance with and ability to continue operating under this Contract. It is also understood that as long as this Contract remains effective, the criminal history and driver's records check may be repeated at any time. CARRIER waives any right to assert that such an investigation or request constitutes an invasion of CARRIER'S privacy. CARRIER recognizes that such inquiries are in the interest of all persons involved in the Contract and fully consents to such investigations.

IN WITNESS WHEREOF, the parties have set their hands and seal this _____ day of _____, 200__.

CARRIER:

BROKER:

Associated Freight Brokers, Inc.

By: _____

By: _____

Print Name and Title

Randall A. Ward, President

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FREIGHT BROKER- CONTRACT CARRIER – CONTRACT ADDENDUM

I. IDENTIFICATION OF PARTIES

AGREEMENT made this _____ day of _____, 20____, by and between _____, hereinafter referred to as CARRIER, MC# _____ and ASSOCIATED FREIGHT BROKERS, INC., hereinafter referred to as BROKER, MC# 214286 B.

WITNESS:

- 1) CARRIER is a motor contract carrier of property authorized by the U.S. Department of Transportation ("U.S. DOT") and/or by various state governmental agencies to provide transportation of property in interstate and/or intrastate commerce under contract with shippers and receivers of general commodities, and
- 2) BROKER is a U.S. DOT regulated (Title 49 U.S. Code Section 13904) and a non-regulated freight BROKER, authorized to engage in operations as a freight broker in connection with the transportation of general commodities, between points in the U.S.

II. SPECIFIC OBLIGATION OF CARRIER

NOW THEREFORE, in consideration of the representation made in this Contract Addendum, the parties agree as follows:

- (a) CARRIER operating any transport refrigeration unit (TRU) in California must ensure that its TRU meets all California legal requirements for operation of TRUs on California highways. CARRIER must be registered on ARBER-ARB'S online TRU registration system. CARRIER to supply BROKER with a current certification page printout to serve as proof of compliance for each TRU that will be used to transport loads BROKER contracts CARRIER to haul. The BROKER contact person per the requirements of this subsection is the Broker's agent that brokered the applicable load to the CARRIER. CARRIER shall confirm this to BROKER by any means reasonably requested by BROKER to include but not be limited to submission to BROKER of completed SSD/EAB form #28 with acknowledgment by State of California of full compliance with all regulations pertaining to TRU operations. Carrier is responsible for all incurred costs including fines or penalties incurred due to non-compliance with these requirements.

IN WITNESS WHEREOF, the parties have set their hands and seal this _____ day of _____, 20____.

CARRIER:

BROKER:

Associated Freight Brokers, Inc.

By: _____

By: _____

Print Name and Title

Randall A. Ward, President

Set Up Completion Process and Checklist:

- _____ A new Certificate of Insurance with Cargo & Liability, naming Associated Freight Brokers, Inc. as the Certificate Holder.
- _____ A copy of your I.C.C. Operating Authority.
- _____ A current W-9 showing your Federal I.D. # or SSN #.
- _____ Current refrigeration unit maintenance records that are dated within the last six months.
- _____ Signed and initialed Freight Broker - Contract Carrier – Contract
- _____ List of references

*****Associated Freight Brokers, Inc. wants to be guaranteed Notification if your policy cancels or changes, we ask that you also name us as ADDITIONAL INSURED on the cargo only.*****

*****Reefer Breakdown deductibles can be no higher than \$2500 *****

Failure to provide this information will delay payment.

COMPANY INFORMATION

NAME _____	ADDRESS _____
CITY _____	ST _____ ZIP CODE _____
PHONE () _____	EMERGENCY DAY () _____
FAX () _____	EMERGENCY NIGHT () _____
EMAIL _____	DISPATCH CONTACT _____
FEDERAL ID# _____ FWHA OR DOT# _____	MC# _____
INSURANCE AGENT _____	PHONE () _____

REFERENCES

COMPANY NAME _____	COMPANY NAME _____
CONTACT PERSON _____	CONTACT PERSON _____
PHONE NUMBER _____	PHONE NUMBER _____
COMPANY NAME _____	COMPANY NAME _____
CONTACT PERSON _____	CONTACT PERSON _____
PHONE NUMBER _____	PHONE NUMBER _____

PERMISSION TO FAX

As required by law, written permission is needed to contact your company via fax.

PHONE NUMBER _____ FAX _____ EMAIL _____
NAME/TITLE _____ SIGNATURE _____

Payment Methods & Rates

Associated Freight Brokers, Inc. offers the following rate/payment programs:

Our **Regular Payment Program** is to write a check and mail it via the U.S. Postal Service within **21 days** of receipt of the required paperwork, providing no claim issues exist and all original BOLs are clear and signed. ACH payment is available. (*)

Bills of Lading can be scanned and emailed to Shatch@associatedfreight.com. Please follow up electronic copies with original Bills of Lading. Electronic copies received will begin the 21 day pay countdown to the date due for payment. Same Day Pay and all Quick Pay Options require **ORIGINAL** Bills of Lading in order to process for payment.

Cash **advances** are offered up to 40% of gross, but not to exceed \$1000.00 per day. Advance fees carry a 2 % charge of the gross revenue of the load. Each individual ComCheck written carries a \$15.00 fee in addition to the advance charge. Unloading advances for Lumper carry a flat \$25.00 fee

ACH Quick Pay (24 hours) (bank transfer time is 1-2 days) is offered on all loads for a charge of 4% of the gross rate. (Additional paperwork needed to set up)

Same Day Pay (via EFS check - 24 hours) is offered for a charge of 6% of the gross rate, and a \$25 processing fee. (*)

Quick pay (24-48 hours) is offered on all loads received in our office for a charge of 4% of the gross rate. Payment is by check and is mailed via the U.S. Postal Service. Also, we offer Overnight Check Service. A \$35 overnight mail charge will apply. You are welcome to send in a pre-printed air bill for your account with Fedex to avoid the \$35 charge.

7 Day Pay is offered on all loads received in our office for a charge of 2% of the gross rate. Payment is by check and is mailed via the U.S. Postal Service. Also, we offer Overnight Check Service. A \$35 overnight mail charge will apply. You are welcome to send in a pre-printed air bill for your account with Fedex to avoid the \$35 charge. (*)

Paperwork received after 12:00 pm may not be processed until the following business day.

(*) PAPERWORK REQUIRED TO PROCESS PAYMENT:

- 1.) Invoice
- 2.) Signed Rate Confirmation
- 3.) AFB Reference Number (ie. 1-150100-0)
- 4.) Complete and **ORIGINAL** BOLs

Please mail invoices and **ORIGINAL** Bills of Lading to:

Associated Freight Brokers, Inc.

1714 S 24th Avenue

Yakima, WA 98902



ASSOCIATED FREIGHT BROKERS, INC. - CONTROLLER'S OFFICE

DIRECT DEPOSIT

ENROLLMENT AUTHORIZATION

COMPLETION INSTRUCTIONS AND PRIVACY NOTICE ARE ON THE REVERSE OF THE VENDOR COPY. PLEASE TYPE OR USE BALL POINT PEN-PRINT CLEARLY.

This authorization remains in full force and effect until the Associated Freight Controller's Office receives written notification from the vendor of its termination, or until the Associated Freight Controller's Office or appointing authority deems it necessary to terminate the agreement.

SECTION A (To be completed by vendor)

1. TYPE OF ENROLLMENT ACTION		2. SOCIAL SECURITY NUMBER / FEDERAL ID NUMBER	
1.	<input type="checkbox"/> NEW SECTIONS A, B AND C MUST BE COMPLETED		
2.	<input type="checkbox"/> CHANGE SECTIONS A, B AND C MUST BE COMPLETED		
3.	<input type="checkbox"/> CANCEL SECTIONS A AND D MUST BE COMPLETED		
		3. NAME (First Middle Last)	

SECTION B (To be completed by vendor if NEW or CHANGE box in Section A is checked)

1. TYPE OF ACCOUNT - MUST BE CHECKED. IF LEFT BLANK, WILL BE PROCESSED AS CHECKING.			
<input type="checkbox"/> C (Checking)		<input type="checkbox"/> S (Savings)	
Verify Routing/Depositor Numbers with Financial Institution			
2. ROUTING NUMBER (9 digits)		3. DEPOSITOR ACCOUNT NUMBER	
4. FINANCIAL INSTITUTION NAME			
5. FINANCIAL (Number and Street)		City/State Zip	
INSTITUTION			
ADDRESS			

SECTION C (To be completed by vendor if NEW or CHANGE box in Section A is checked)

I hereby authorize the Associated Freight Brokers, Inc. Controller's Office to provide for direct deposit of any accounts payable payments due, less any mandatory deductions or authorized deductions therefrom, or as set forth and agreed to under the Freight Broker - Contract Carrier - Contract In the above designated account.

If at any time the amount of the payment so deposited exceeds the amount of the payable actually due and payable, I hereby authorize the Associated Freight Brokers, Inc. Controller's Office to either:

(a) Withhold a sum equal to the overpayment from future accounts payable monies; or

(b) Recover such overpayment from the above-designated account.

If Associated Freight Brokers, Inc. is legally obligated to withhold any part of the accounts payable account/monies due for any reason, or if Company listed above no longer meets eligibility requirements for the Direct Deposit program, I understand the Associated Freight Brokers, Inc. Controller's Office may terminate our enrollment in the program. If any action taken by _____ (company) results in nonacceptance of a direct deposit by the designated financial institution, I _____, of _____ (company) understand that Associated Freight Brokers, Inc. assumes no responsibility for processing a supplemental accounts payable payment until the amount of the nonacceptance deposit is returned to Associated Freight Brokers, Inc.

<input type="checkbox"/> 100% of the net deposit will not be sent to a financial institution outside the jurisdiction of the United States	Signature	Date
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SECTION D (To be completed by vendor if CANCEL box in Section A is checked)

I hereby cancel our Direct Deposit authorization	Signature	Date
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SECTION E (To be completed by Associated Freight Brokers, Inc. personnel/Accounting office only)

1. EFFECTIVE DATE MO DAY YR. 	2. REMARKS <input type="checkbox"/> Check box if special depositor and list detail	2. AUTHORIZED ASSOCIATED FREIGHT SIGNATURE	
		I HEREBY CERTIFY THAT I AM THE DULY APPOINTED, QUALIFIED AND ACTING PERSONNEL OF ASSOCIATED FREIGHT BROKERS, INC. AND THAT, BEING SO AUTHORIZED, DO CERTIFY THAT THIS COMPANY/VENDOR IS ELIGIBLE FOR DIRECT DEPOSIT.	
		Signature	DATE RECEIVED IN CONTROLLER'S OFFICE MO. DAY YR.

PLEASE READ THIS INFORMATION CAREFULLY

COMPLETION INSTRUCTIONS

1. To enroll in Direct Deposit, complete this form as follows:

General Instructions

- Complete Sections A, B, and C if you are enrolling for the first time, re-enrolling after cancellation, or changing your existing Direct Deposit information.
- Complete Section A and D only if you are cancelling your enrollment.

Specific Instructions

- Section A – (Item 1) Type of Enrollment Action
 - New – Complete for new enrollment or re-enrollment after cancellation
 - Change – Complete to change type of account, financial institution or branch (routing number), or Depositor account number
 - Cancel – Complete to cancel your Direct Deposit
- Section B – (Item 1) Indicate check or savings. Only one box must be checked. If left blank, will be processed as **Checking**.
 - (Item 2) Enter Routing Number (cannot begin with a '5' and cannot exceed 9 digits)
 - (Item 3) Enter Depositor Number (cannot exceed 17 digits)
- Section C - According to National Clearing House Association Operating Rules, effective September 18, 2009, you are not allowed to forward 100% of your net payment to a financial institution outside of the United States (U.S.). If 100% of the net deposit is being sent outside the jurisdiction of the U.S., you are no longer allowed to participate in the Direct Deposit program and must cancel your enrollment. A paper warrant will be issued to you effective the month the cancellation is processed.
For new/change enrollments, please mark the box indicating you are aware of this requirement and are not sending 100% of the net deposit outside the jurisdiction of the U.S.

IMPORTANT: PLEASE VERIFY YOUR DEPOSITOR ACCOUNT NUMBER AND ROUTING NUMBER WITH YOUR FINANCIAL INSTITUTION.

1. Forward your completed form to Ramona Bishop at Associated Freight Brokers, Inc. for completion of Section E.
2. Your first payment will be deposited into your designated account within 40 days after your form is received by the Controller's Office.

DIRECT DEPOSIT POSTING DATES

Funds for regular payment deposit dates will be deposited and available the first banking day following the payout date.

Fund availability is subject to change and is dependent on the individual banking institution processes for ACH direct deposit. Associated Freight Brokers, Inc. is not responsible for funds held or not deposited in a timely fashion by your banking institution. Funds are typically available within 48 hours of deposit.

While most financial institutions post funds to accounts at the beginning of the bank business day, this is not a universal practice. Some institutions post funds in the afternoon instead of the morning. It is strongly recommended that you check with your financial institution to determine when your funds will be available.

CHANGING FINANCIAL INSTITUTION OR DEPOSITOR ACCOUNTS

Your Direct Deposit will continue to be deposited into your designated account at your financial institution until the Associated Freight Brokers Controller's Office is notified that you wish to re-designate your account and/or your financial institution. To re-designate, complete and submit a new Direct Deposit Form with the new information. **DO NOT CLOSE YOUR OLD ACCOUNT UNTIL YOUR FIRST PAYMENT IS DEPOSITED INTO YOUR NEWLY DESIGNATED ACCOUNT AND/OR FINANCIAL INSTITUTION.** Your first payment into your new account will be within 40 days after your form is received by the Controller's Office. You may receive a paper warrant during this period.

PRIVACY NOTICE

The Information Practices Act of 1977 (Civil Code Section 1798.17) and the Federal Privacy Act (Public Law 93-579) require that this notice be provided when collecting personal information from individuals. Information requested on this form is used by the Associated Freight Brokers, Inc. Controller's Office for the purposes of identification and enrollment processing. It is mandatory to furnish all information requested on this form except for financial institution name, address and branch number or name. Failure to provide the mandatory information may result in the enrollment action not being processed or being processed incorrectly.

Legal references authorizing maintenance of this information include Government Code Sections 1151 and 1153, Sections 6011 and 6051 of the Internal Revenue Code, and Regulation 4, Section 404, 1256, Code of Federal Regulations, under Section 218, Title II of the Social Security Act. Copies of the Enrollment Authorization are maintained in confidential files of the Associated Freight Brokers, Inc. Controller's Office for six years. You have the right of access to copies of your organization's Enrollment Authorization Form upon request. The official responsible for maintenance of the forms is: Ramona Bishop, Accounts Payable, Associated Freight Brokers, Inc., 1714 So. 24th Avenue, Yakima, WA 98902.