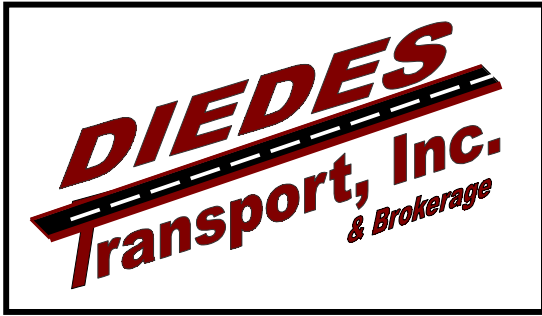


MUST BE FILLED OUT COMPLETELY AND FAXED BACK TO ACCOUNTING. "READ NOTICE AT BOTTOM"



15837 N. 51st. AVE.
Glendale, AZ 85306

ACCOUNTING DEPARTMENT
Phone: 623-847-3625

FAX BACK TO: 623-847-0633

CARRIER CONTACT AND ACCOUNTING PROFILE

The following information on your company will be needed to effectively input your company into our database for accounting applications. **This information is critical!** Payments, Invoicing and tax reporting are governed by your input.

COMPANY NAME: _____

FED I.D.# _____ MC# _____ DOT# _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

TOLL FREE# _____ PHONE# _____ FAX# _____

AFTER HOURS EMERGENCY# _____ CONTACT PERSON _____

Do you require a 1099 Form for income tax: YES NO (Circle One)

Web Site _____ Email _____

MAKE CHECKS PAYABLE:

TO: _____

Address: _____

RESOURCES & EQUIPMENT

Owner Operators: ___Y ___N Company Drivers: ___Y ___N # of Team Drivers _____

Cellular Phones(drivers) ___Y ___N Pagers(dirvers) ___Y ___N

QTY SIZE(s)

Type of Equipment: Van(s) _____

Flatbed(s) _____

Stepdeck(s) _____

Lowboy(s) _____

Specialized Trailer(s) _____

URGENT NOTICE REFERENCE INVOICING:

We require the **Original Bill of Lading** along with an **Original Signature of the consignee**, along with a copy of our Load Conformation Sheet (photo copies can be accepted only and only when an Original Signature of the consignee is obtained). Keep in mind that any failure to meet this requirement delays payment and a possible \$50.00 penalty(s) if not provided with Original BOL's.