

RLD **TRANSPORTATION, INC.**



P.O. BOX 79453 * N. DARTMOUTH, MA 02747 * PHONE (508) 991-6660 * FAX (508) 991-7330 * WWW.RLDTRANS.COM

QUICKPAY AGREEMENT

_____ (Carrier) hereby grants RLD Transportation, Inc. (Broker) the right to deduct 3% from each invoice presented to it under this agreement with the understanding that Broker will pay said invoice(s) within 48 hours of receipt.

Carrier acknowledges that it must provide Broker with ORIGINAL proof of delivery documents that clearly show the signatures of the consignee or designated receiver. Proofs of delivery that are received by the Broker on Friday will be paid within the next two business days (excepting local, state or federal holidays).

Carrier may terminate this Quickpay agreement by notifying Broker in writing. Termination will take effect immediately upon receipt of notice. Broker reserves the right to terminate this Quickpay agreement without notice. This Quickpay agreement is incorporated into and made part of the existing rate confirmation document(s).

This Quickpay agreement supersedes any previous agreements signed by the Carrier.

Agreed to and accepted on: _____
Date

Carrier Name: _____

Authorized signature: _____

Printed Name: _____ Title: _____

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ELECTRONIC FUNDS TRANSFER AUTHORIZATION

***PLEASE PROVIDE A COPY OF A VOIDED CHECK OR DEPOSIT SLIP FOR THE ACCOUNT WHICH YOU WOULD LIKE YOUR FUNDS DEPOSITED INTO

NEW _____ CHANGE _____

COMPANY INFORMATION

COMPANY NAME: _____

REMITTANCE ADDRESS: _____

CITY, STATE & ZIP: _____

CONTACT: _____ EMAIL: _____

PHONE: _____ FAX: _____

BANKING INFORMATION

BANK NAME: _____

BANK ADDRESS: _____

CITY STATE & ZIP: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

ACCOUNT NAME: _____

BANK ROUTING NUMBER: _____ ACCOUNT NUMBER: _____

TYPE OF ACCOUNT: CHECKING _____ SAVINGS _____

THE UNDERSIGNED ("PAYEE") AUTHORIZES RLD TRANSPORTATION, INC. TO MAKE PAYMENT FOR GOODS AND SERVICES COVERED BY ANY AGREEMENT, NOW OR HEREAFTER IN EFFECT, THROUGH ELECTRONIC FUNDS TRANSFER.

IN CONNECTION WITH ELECTRONIC FUND TRANSFER, PAYEE AGREES AS FOLLOWS:

PAYEE WILL USE REASONABLE EFFORTS TO VERIFY AND ENSURE THAT THE DEPOSITORY INSTITUTION SELECTED BY PAYEE IS ABLE TO RECEIVE PAYMENTS THROUGH AN AUTOMATED CLEARING HOUSE OR ANY OTHER ELECTRONIC PAYMENT NETWORK APPROVED BY RLD TRANSPORTATION, INC.

PAYEE MAY CHANGE ANY PORTION OF THE INFORMATION PROVIDED IN THIS DOCUMENT BY SUBMITTING AN AMENDED PAYMENT AUTHORIZATION IN A FORM ACCEPTABLE TO RLD TRANSPORTATION, INC. PAYEE IS RESPONSIBLE FOR ANY LOSS WHICH MAY ARISE BY REASON OF ANY ERROR, MISTAKE, OR FRAUD REGARDING THE INFORMATION PROVIDED TO RLD TRANSPORTATION, INC. OR THE PAYEE'S FAILURE TO FOLLOW PROCEDURES SET FORTH IN THIS DOCUMENT.

ELECTRONIC FUND TRANSFERS WILL BE DEEMED TO HAVE BEEN MADE WHEN THE PAYEE'S DEPOSITORY INSTITUTION RECEIVES OR HAS CONTROL OF THE PAYMENT. ANY LOSS OF PAYMENT FOLLOWING THIS POINT WILL BE THE RESPONSIBILITY OF THE PAYEE.

IN THE EVENT OF A DUPLICATE PAYMENT, OVERPAYMENT, FRAUDULENT PAYMENT OR PAYMENT MADE IN ERROR, PAYEE WILL PROMPTLY RETURN SUCH FUNDS TO RLD TRANSPORTATION, INC. AT ITS DESIGNATED ORIGINATING BANK.

IN THE EVENT THAT PAYMENT HAS NOT BEEN RECEIVED BY PAYEE, PAYEE SHALL NOTIFY RLD TRANSPORTATION, INC. IMMEDIATELY, IN WRITING, AND RLD TRANSPORTATION, INC. WILL HAVE A REASONABLE PERIOD IN WHICH TO MAKE THE PAYMENT.

AUTHORIZATION

PAYEE ACCEPTS THE TERMS OF THIS AGREEMENT, EXECUTED ON

DATE: _____

AUTHORIZED SIGNATURE

PRINT NAME AND TITLE

PLEASE RETURN THIS FORM IMMEDIATELY TO:

TANYA OLDHAM
TANYA@RLDTRANS.COM
RLD TRANSPORTATION, INC.
P.O. BOX 79453
N. DARTMOUTH, MA 02747

OR FAX TO: (508) 991-7330