

Outstanding Freight Solutions, Inc.

PO Box 201, Willow Springs, IL 60480
Phone: 708-880-4129 Fax: 708-880-4186
Email: operations@ofs-brokerage.com

Who we are

Outstanding Freight Solutions, Inc. is a Chicago based freight broker and logistics service provider with a wide range of approved motor-carriers to serve your shipping needs. We use a unique way of performing logistics and have our own brokerage management system. We also are able to select carriers based on their basic performance analysis, safety rating, insurance and authority status, as well ability to see violations, and what type of violation a carrier has. We always follow FMCSA protocols and refuse to work with carriers who do not do the same.

What we do

Although we are a relatively small brokerage firm, we can easily compete with other, large brokers, and meet their reasonable rates. We have carriers available on a daily basis, for pickup and delivery from and to any point in the US and Canada. Finding you a right carrier with newer equipment and already established excellent business history to get your shipment to its destination safely and on time is our top priority. We stick to a schedule, so rest assured, your shipment is **SAFE** with us.

Our Guaranty:

- Services our customers expect and deserve
- High level of excellence and reliability
- Maximum efficiency and professionalism
- Safe handling of merchandise
- Excellent customer service

If willing, and we hope you are, give us one, or a list of your daily loads and see how we do. We will work to get you the most reasonable rates possible, and if you like the quotes we give you, we can set you up with one of our agents.

We are driven to deliver **OUTSTANDING FREIGHT SOLUTIONS** to all of our clients by finding you a reliable motor-carrier and by coordinating your shipping needs.



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

FREIGHT BROKER COMPANY PROFILE

OUTSTANDING FREIGHT SOLUTIONS, INC. is a freight brokerage and logistics provider operating in North America. **OUTSTANDING FREIGHT SOLUTIONS, INC.** was established to serve our core customer base through providing quality transportation solutions with established motor carriers.

Enclosed you will find the forms and documents necessary to review our company and become a qualified partner with **OUTSTANDING FREIGHT SOLUTIONS, INC.**

RETURN ALL PAPERWORK TO FAX: (708) 880-4186

Outstanding Freight Solutions, Inc.
PO Box 201
Willow Springs, IL 60480

Toll Free: (844) 767-9676

Local: (708) 880-4129

Fax: (708) 880-4186

Email: operations@ofs-brokerage.com

Operations Hours:

Monday - Friday

CT 8:00 AM-5:00 PM

Brokerage Information:

MC # 31949B

FEIN # 82-1783122

Banking Information:

101 Burr Ridge Pkwy,

Burr Ridge, IL 60527

Phone: (630) 920-2100

Contact: Julija Georgievska



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

References

Martini Investment, Inc.

4717 Sedgelane Dr.
Greensboro, NC 27407
Phone: 336-854-9993
Fax: 336-736-0305
MC# 840379

BP Carriers, Inc.

7935 Stewart Dr.
Darien, IL 60561
Phone: 630-247-7372
Fax: 331-251-6925
MC# 737605

Freightzone Express, Inc.

8210 Scenic Dr.
Willow Springs, IL 60480
Phone: 847-456-5493
Fax: 708-414-0354
MC# 520884

Delta Freight Systems

1601 Estes Ave.
Elk Grove Village, IL 60007
Phone: 847-378-8912
Fax: 847-378-8913
MC# 491945

OTES

5235 W. State Rd 10
North Judson, IN 46366
Phone: 888-735-4348
Email: info@OTESinc.com



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE
June 30, 2017

LICENSE
MC-31949-B
U.S. DOT No. 3016439
OUTSTANDING FREIGHT SOLUTIONS INC
WILLOW SPGS, IL

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a **broker, arranging for transportation of freight (except household goods)** by motor vehicle.

This authority will be effective as long as the broker maintains insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

A handwritten signature in black ink, appearing to read "Jeffrey L. Secrist".

Jeffrey L. Secrist, Chief
Information Technology Operations Division

BPO

FMCSA Motor Carrier

USDOT Number: **3016439**
Docket Number: **MC031949**
Legal Name: **OUTSTANDING FREIGHT SOLUTIONS INC**
DBA (Doing-Business-As) Name



Addresses

Business Address: **8217 CRESTVIEW DR
WILLOW SPGS, IL 60480**
Business Phone: **8474565493** Business Fax: **Fax: 7084140354**
Mail Address: **8217 CRESTVIEW DR
WILLOW SPGS, IL 60480-1009**
Mail Phone: Mail Fax: Undeliverable Mail: **NO**

Authorities:

Common Authority:	NONE	Application Pending:	NO	
Contract Authority:	NONE	Application Pending:	NO	
Broker Authority:	ACTIVE	Application Pending:	NO	
Property:	YES	Passenger:	NO	Household Goods: NO
Private:	NO	Enterprise:	NO	

Insurance Requirements:

BIPD Exempt:	NO	BIPD Waiver:	NO	BIPD Required:	\$0	BIPD on File:	\$0
Cargo Exempt:	NO			Cargo Required:	NO	Cargo on File:	NO
BOC-3:	YES			Bond Required:	YES	Bond on File:	YES
Blanket Company:	SKB TRUCKING PERMITS & LOGISTICS, INC						

Comments:

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 06/15/2017
Policy/Surety Number: 615995944	Coverage From: \$0	To: \$75,000*
Effective Date: 06/19/2017	Cancellation Date:	

Insurance Carrier: **UNITED STATES FIRE INSURANCE CO.**
Attn: **TO REPORT A CLAIM CALL 888-890-1500**
Address: **305 MADISON AVE.
MORRISTOWN, NJ 07962-1973 US**
Telephone: **(973) 490 - 6000** Fax: **(973) 490 - 6448**

* If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

FMCSA Motor Carrier

USDOT Number: **3016439**

Docket Number: **MC031949**

Legal Name: **OUTSTANDING FREIGHT SOLUTIONS INC**

DBA (Doing-Business-As) Name



Rejected Insurances:

Form:	Type:	Coverage From:	\$0	To:	\$0
Policy/Surety Number:		Received:	Rejected:		
Rejected Reason:					

Insurance History:

Form:	Type:	Coverage From:	\$0	To:	\$0
Policy/Surety Number:		Effective Date From:	To:	Disposition:	

Insurance Carrier:

Attn:

Address:

Telephone:

Fax:

Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	PROPERTY BROKER	GRANTED	06/30/2017

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason

**UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION**



**HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR(S) 2017-2018**

Registrant: OUTSTANDING FREIGHT SOLUTIONS, INC.
Attn: SASHA KESIC
PO BOX 201
WILLOW SPRINGS, IL 60480

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 102017 550 017Z Effective: 07/01/2017 Expires: 06/30/2018

HM Company ID: 210444

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-52, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

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.	Name (as shown on your income tax return) Outstanding Freight Solutions, Inc.		
	Business name/disregarded entity name, if different from above		
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____	
	Address (number, street, and apt. or suite no.) P.O. Box 201 City, state, and ZIP code Willow Springs, IL 60480	Requester's name and address (optional)	
	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 the "Name" line to avoid backup withholding. For individuals, this is 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 *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									
8	2	-	1	7	8	3	1	2	2

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 ▶ **07/24/2017**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

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.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

PROPERTY BROKER - SHIPPER TRANSPORTATION AGREEMENT

THIS agreement, "AGREEMENT", made and intended to be effective this (the) _____ day of _____, 20____ by and between Outstanding Freight Solutions, Inc. located at PO Box 201, Willow Springs, IL 60480 ("BROKER") and _____ ("SHIPPER"), having offices at _____ collectively, the "PARTIES".

RECITALS

- a) WHEREAS BROKER warrants that it is licensed as a Property Broker by the Federal Motor Carrier Safety Administration (FMCSA) in Docket Number MC- 31949-B, and as a licensed broker, arranges for freight transportation. A copy of BROKER's authority is attached as Appendix A and a copy of BROKER's Surety Bond or trust fund agreement is attached as Appendix B; and
- b) WHEREAS SHIPPER, to satisfy some of its transportation needs, desires to utilize the services of BROKER to arrange for transportation of SHIPPER's freight; and
- c) WHEREAS BROKER desires to perform property brokerage services for Shipper, subject to the terms and conditions set forth below;

NOW THEREFORE, intending to be legally bound, BROKER and SHIPPER agree as follows:

The term of this Agreement shall be for one (1) year and shall automatically be renewed for successive one (1) year periods; provided, however, that this Agreement may be terminated at any time by giving ten (10) days prior written notice to the other party.

Broker represents and warrants that it is duly and legally qualified to operate as a property Broker and to provide the transportation services contemplated herein. Broker agrees to comply with all federal, state and local laws regarding the provision of such Brokerage services. The parties understand and agree that Broker functions as an independent entity, and not as a carrier, in selling, negotiating, providing and arranging for transportation for compensation.

Shipper shall tender certain shipments, from time to time, to Broker. The charges and rates for each shipment shall be provided in a rate agreement. The parties agree that the charges invoiced by Broker shall be the agreed upon contract rate of the parties for the services provided, unless such payment is objected to by Shipper within **fifteen** days of the invoice date

Initials _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

PROPERTY BROKER - SHIPPER TRANSPORTATION AGREEMENT

Shipper agrees to pay Broker within fifteen (15) days of receiving the invoice. Interest will accrue after 30 days of an unpaid invoicing at a rate of (1.5%). Shipper shall also be liable for any expenses, including attorney fees, Broker incurs in collecting its rates and charges.

Broker shall defend, indemnify and hold harmless Shipper from any loss or damage, including loss, damage or injury to persons or property, that Shipper may incur as a direct result of Broker's negligent acts or omissions. However, it is understood and agreed that Broker assumes no liability for bodily injury, property damage or public liability arising out of the involved transportation. Shipper shall defend, indemnify and hold harmless Broker from any and all loss or damage, including loss, damage or injury to persons or property, that Broker may incur as a direct result of Shipper's negligent acts or omissions.

Broker represents and warrants that it is an independent contractor under this Agreement and that its agents and/or employees are under Broker's exclusive management and control, and that Shipper neither exercises nor retains any control over Broker, its operations, agents or employees in any manner whatsoever.

Broker shall make reasonable efforts to place Shipper's loads with responsible carriers for the purposes of transporting the loads with reasonable dispatch under the direction of Shipper. However, the parties understand and agree that Broker, by signing this Agreement, makes no express or implied warranties or guarantees concerning delivery time or the locating of a carrier to provide the transportation services requested by Shipper.

In the event of a cargo loss, damage or shortage claim, Shipper agrees to notify Broker immediately by phone and to subsequently submit to Broker a written claim, fully supported by all relevant documentation, including but not limited to the signed delivery receipt, listing the nature and cause of the claim for cargo damage within twenty (20) days following the date of delivery.

Initials _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

PROPERTY BROKER - SHIPPER TRANSPORTATION AGREEMENT

No claims or allowances for shortages, damage or delay will be considered unless clearly noted on the delivery receipt or bill of lading signed by the consignee at delivery. Broker assumes no liability for cargo loss, damage, or shortage. However, Broker agrees to submit, negotiate and settle all cargo claims with the responsible carrier and to keep Shipper advised of the status of all such claims. Upon request by Shipper, Broker shall assign its rights against the carrier to Shipper. Nothing herein shall be construed to restrict any right or cause of action Shipper may have against any carrier involved with the transportation of Shipper's shipment.

Unless otherwise agreed in writing, all shipments tendered shall be accepted on a bill of lading acceptable to Shipper as the shipping document. In the event of a conflict between the bill of lading terms and this Agreement, this Agreement shall prevail. Upon request of Shipper, Broker shall require all carriers to obtain a delivery receipt from the consignee, showing the products delivered, condition of the shipment and the date and time of such delivery.

Broker agrees to notify Shipper of any accident or other event which prevents carrier from making a timely or safe delivery.

No party may assign this Agreement without the prior written consent of the other party. However, Broker may co-broker any shipments made on behalf of Shipper under this Agreement.

This Agreement constitutes the entire agreement of the parties with reference to the subject matters herein, and may not be changed, waived, or modified except in writing signed by both parties. This Agreement shall be construed in accordance with the laws of the Illinois. All civil actions filed as a result of disputes arising out of this Agreement shall be filed in the court of proper jurisdiction in the Illinois.

The language of this Agreement shall be construed according to its fair meaning and shall not be construed against the party or parties drafting it.

This Agreement, including all Appendices and Addenda, constitutes the entire agreement intended by and between the PARTIES and supersedes all prior or contemporaneous agreements, representations, warranties, statements, promises, information, arrangements, and understandings, whether oral, written, expressed or implied, with respect to the subject matter hereof. The PARTIES further intend that this Agreement constitutes the complete and exclusive statement of its terms and that no extrinsic evidence may be introduced to reform this Agreement in any judicial or arbitration proceeding involving this Agreement.

Initials _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

PROPERTY BROKER - SHIPPER TRANSPORTATION AGREEMENT

IN WITNESS WHEREOF, the PARTIES hereto have caused this Agreement to be executed in their respective names by their fully-authorized representatives as of the dates first above written.

Outstanding Freight Solutions, Inc.

Sasha Kesic, CEO

Signature:  _____

Company: _____

Name: _____

Title: _____

Signature: _____

Date: _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

CREDIT APPLICATION

Applicant Legal Name					Federal ID #	
Trade Name (if different)						
Billing Address				Physical Address		
City	ST	Zip	City	ST	Zip	
Phone		Fax		Web Address		
Contact		Title		E-mail		Cell
Type of Business (Please check one): <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other				Description of Business		
Business Start Date		# of Employees		Approx. Annual Sales		Approx. Net Worth
Limit Requested		Sales Tax Exempt? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, attach exemption certificate</i>			A/P Contact	

Principals - Names of Officers, Partners, Owners, Guarantors (attach additional sheets if necessary)

Full Name	Title	Residence Address	Residence Phone	% Interest

Bank/Finance Co. Reference

Name	City, State	Contact	Phone #	Account #	Type
Has the business or any Principle ever declared Bankruptcy <input type="checkbox"/> Yes <input type="checkbox"/> No			Date Declared		
Does the business or any Principle have any outstanding liens or judgments <input type="checkbox"/> Yes <input type="checkbox"/> No					



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

Trade References

Name	City, State	Contact	Phone #	Fax #



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

Insurance Co.

Name	City, State	Contact	Phone #	Fax #
Can we contact your agent on your behalf? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Special Billing Instructions

Purchase order required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Written or Verbal	If verbal, are names instead of numbers allowed? Yes No
Who is allowed to charge?	
Other requirements?	

TERMS & CONDITIONS OF CREDIT & SALES:

Customer agrees to pay for goods, services, and other items charged to its open account upon receipt of each invoice. Payment is past due if not received by **Outstanding Freight Solutions, Inc.**, within 30 (thirty) days of the date of invoice. Past due Invoices are subject to a service charge of 1.5% per month (18% APR). It is further agreed that the customer will pay all costs of collection, including attorney fees, should this account require legal proceedings to enforce payment.

The undersigned warrants that all information is correct. It is understood and agreed that the undersigned specifically consents to **Outstanding Freight Solutions, Inc.**, investigation of the applicant's credit history and may utilize credit reporting services for information on the applicant. The undersigned hereby authorizes the bank and trade references listed to release the information necessary to assist **Outstanding Freight Solutions, Inc.**, in establishing a line of credit.



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

CONTINUING PERSONAL GUARANTY:

In consideration of the extension of business credit for goods and services obtained by the above designated Applicant from **Outstanding Freight Solutions, Inc.** and as an inducement to make such extension, the undersigned jointly, severally, irrevocably and unconditionally agree(s) to (1) the terms and conditions set forth in this agreement, which are hereby fully incorporated herein by this reference; and (2) guarantee(s) the payment of any and all indebtedness, including advances, debts, obligations, and liabilities now existing or hereafter made or incurred, together with such costs and expenses, including reasonable attorney's fees, as may be incurred by **Outstanding Freight Solutions, Inc.** in the enforcement of this Guaranty, whether or not suit is commenced. The undersigned further indemnify (ies) and holds harmless **Outstanding Freight Solutions, Inc.**, from any loss, damage, and/or expense caused by or arising out of default of or failure to pay by CUSTOMER. This continuing guaranty shall not be revoked except by written notice to **Outstanding Freight Solutions, Inc.**, requesting that **Outstanding Freight Solutions, Inc.**, not make any further sales and deliveries on the security of this Guaranty and until the expiration of five (5) days after such notice shall have been received by **Outstanding Freight Solutions, Inc.**, by registered mail, return receipt requested. Any revocation shall be effective only with respect to merchandise shipped or delivered after the expiration of said five-day period, and shall not affect in any respect liability incurred by the undersigned prior to that time.

The undersigned, and each of them, agree(s) to be bound by all terms and conditions contained in this Credit Agreement and in the invoices issued hereunder which are incorporated by this reference as though fully set forth in full.

Printed Name _____

Signature _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

CREDIT CARD AUTHORIZATION

Date: ____ / ____ / ____ Invoice Ref. # _____

Card Holder Name: _____

Credit Card
Visa MC AMEX Discover

Card # _____

Expiration Date: _____ CVV Code: _____

Billing Address: _____

City: _____

State: _____ Zip Code: _____

Phone: (_____) _____ - _____

Authorize: I authorize **Outstanding Freight Solutions, Inc.** to charge my credit card in the amount of:
\$ _____ USD (U.S. Dollars)

Printed Name: _____

Signature: _____

I authorize **Outstanding Freight Solutions, Inc.** to charge my credit card for the outstanding/current balances owed on freight bills. All payments are subject to a 4% card processing fee. I further understand that this authorization allows **Outstanding Freight Solutions Inc.**, to also charge my credit card for any unpaid freight invoices pertaining to my account for a twelve-month period starting from today's date.



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

CREDIT TERMS & CONDITIONS

- 1) Credit terms are: net due within 15 days; interest of 1.5% per month (18% annually) on any balance more than 30 days old. Shipper shall be liable for reasonable attorney's fees and court costs in the event of litigation to collect on the account. The forum state shall be exclusively Illinois Venue shall be exclusively in Cook County and shall include any alternative dispute resolution proceedings. Illinois shall govern all matters. Payment of freight charges shall be made notwithstanding any claim for loss, damage or theft of cargo.
- 2) SHIPPER appoints Outstanding Freight Solutions Inc. and its agent to receive SHIPPER'S goods from SHIPPER'S customer or to pick up goods for SHIPPER, wherever Outstanding Freight Solutions Inc. delivers same or causes same to be delivered or where SHIPPER is carrying on a business activity, is conclusively presumed to be the agent of the SHIPPER for the receipt of said goods for the customer. Outstanding Freight Solutions Inc. retains a lien on the goods sold to the CUSTOMER and the proceeds from the sale thereof until the invoice for goods and services is paid.
- 3) These Terms and Conditions are not subject to cancellation, modification or waiver unless agreed in writing by Outstanding Freight Solutions Inc. and SHIPPER.
- 4) Any dispute as to any invoice on SHIPPER'S account with Outstanding Freight Solutions Inc. must be made in writing within thirty (30) days of receipt of the invoice or the dispute is waived and payment of the invoice shall be due without any credit for any payment offset or claim. All notices relative hereto must be in writing with proof of delivery by Registered Mail or Certified Mail, Return Receipt Requested.

Initials _____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

CUSTOMER RATE CONFIRMATION

PRO # _____	AGENT: _____
Shipper: _____	Contact: _____
Phone: (____) - _____	Fax: (____) - _____

LOAD INFORMATION:

ORIGIN: _____	ZIP CODE: _____
Location: _____	Address: _____
Contact: _____	Phone: (____) - _____
DESTINATION: _____	ZIP CODE: _____
Location: _____	Address: _____
Contact: _____	Phone: (____) - _____
Model: _____	Serial # _____
Pickup # _____	Commodity: _____
Weight: _____	Quantity: _____
Load Description: _____	

NOTE: This quotation is only an estimate of charges based on the load information provided, this quote is valid for (14) days. Any changes in the load description above may alter the amount charged. If the commodity value is over \$100,000, special cargo insurance is required, and carrier's agent must be advised of the declared value.

PRINTED: _____	SIGNATURE: _____
DATE: ____ / ____ / ____	



Outstanding Freight Solutions, Inc.
 P.O. Box 201
 Willow Springs, IL 60480
 Phone: 708-880-4129
 Fax: 708-880-4186
 Toll-Free: 844-767-9676
 Email: operations@ofs-brokerage.com

FREIGHT QUOTE SHEET

PRO # _____

Agent: _____

Shipper: _____

Contact: _____

Phone: _____

Fax: _____

Load Information:

Origin: _____	Zip Code: _____
Location: _____	Address: _____
Contact: _____	Phone: (_____) - _____
Destination: _____	Zip Code: _____
Location: _____	Address: _____
Contact: _____	Phone: (_____) - _____
Model: _____	Serial # _____
Pickup # _____	Commodity: _____
Weight: _____	Quantity: _____

Load Description: _____

Note: This quotation is only an estimate of charges based on the load information provided, this quote is valid for (14) days. Any changes in the load description above may alter the amount charged. If the commodity value is over \$100,000, special cargo insurance is required, and carrier's agent must be advised of the declared value. This rate includes all stop-off charges, fuel surcharges, loading, unloading, etc. In exchange for the rate set forth herein, it is understood and agreed that the liability of **Outstanding Freight Solutions, Inc.** for loss, damage, or delay to cargo is subject to the Carmack Amendment, and is limited to the lesser of the actual value of the goods or \$100,000 per truckload.

RATE: \$ _____

PRINTED: _____

SIGNATURE: _____

DATE: ____ / ____ / ____



Outstanding Freight Solutions, Inc.
P.O. Box 201
Willow Springs, IL 60480
Phone: 708-880-4129
Fax: 708-880-4186
Toll-Free: 844-767-9676
Email: operations@ofs-brokerage.com

SHIPPER – RATE CONFIRMATION “ADDENDUM”

Load Number: _____
Commodity: _____
Origin: _____
Load: _____

Date: _____
Equipment: _____
Destination: _____
Rate: _____

This Addendum is to be attached to contract between BROKER and SHIPPER as per phone conversation and load confirmation sheet, it is agreed that the above rate shall apply on transportation of freight.

IN WITNESS WHEREOF, the parties have signed the names on this _____ day of _____, 20____

Outstanding Freight Solutions, Inc.
Sasha Kesic, CEO

Signature:  _____

Company: _____

Name: _____

Title: _____

Signature: _____



Outstanding Freight Solutions

Outstanding Freight Solutions, Inc.

P.O. Box 201

Willow Springs, IL 60480

Phone: 708-880-4129

Fax: 708-880-4186

Toll-Free: 844-767-9676

Email: operations@ofs-brokerage.com

SHIPPER FREIGHT QUOTE CONTACT SHEET

Company Name: _____
Phone: _____
Fax: _____
Email: _____
Contact: _____
Commodity: _____
Weight: _____
Dimensions: Length ____ x Width ____ x Height ____
Temperature: ____ Degrees
Stops: _____
Tarping: _____
Load: ____ Truckload ____ Partial ____ LTL

Company Name: _____
Phone: _____
Fax: _____
Email: _____
Contact: _____
Commodity: _____
Weight: _____
Dimensions: Length ____ x Width ____ x Height ____
Temperature: ____ Degrees
Stops: _____
Tarping: _____
Load: ____ Truckload ____ Partial ____ LTL