

BOLLER LOGISTICS, LLC

Carrier Quick Pay Agreement

Carrier Name

City and State

MC Number

A Contract Carrier for Boller Logistics, LLC (Broker), and located 10601B Huntersville Comms, Drive. Huntersville, NC 28078. _____ wishes to participate in the **Quick Pay** program offered by Boller Logistics, LLC.

It is agreed that five percent or \$25.00 minimum each settlement period, will be deducted from any and all negotiated settlements to _____ (Carrier), provided that all documents required by Broker are received by Broker no later than 6:00 PM on the Tuesday's day following delivery to the consignee. Once these requirements are met, a check will be cut and mailed by 5:00 PM on Friday of that week.

Documents required are as follows:

**BILL OF LADEN
CARRIER INVOICE
BROKER RATE CONFIRMATION
COPY OF CARRIER QUICK PAY AGREEMENT
QUICK PAY (CLEARLY) NOTED ON FACE OF INVOICE
PROOF OF DELIVERY WITH SIGNATURE
ALL RECEIPTS FOR SCALES AND LUMPER SERVICE**

By my signature below, I hereby certify I am an authorized representative of Carrier and do hereby agree to the terms as stated above.

Carrier Name

Boller Logistics, LLC

Authorized Signature / Title

Authorized Signature / Title

Date

Date