



COMPANY PROFILE

PRESIDENT:	RHONDA J. GORMAN
CORPORATE & BILLING OFFICE:	1209 STOWE AVE. MEDFORD, OR 97501 800-977-5623 PH 41-734-7009 FAX
AP/AR MANAGER:	WHITNEY SINKS
TYPE OF AUTHORITY:	CONTRACT CARRIER BROKER
SCOPE OF AUTHORITY:	GENERAL COMMODITY 50 STATES CANADA & MEXICO
MOTOR CARRIER NUMBER:	309539
FEDERAL TAX ID #:	93-1219362
U.S DOT NUMBER	660686
SCAC CODE	ALKC
INSURANCE:	WILSON-HEIRGOOD ASSOCIATES P.O. BOX 1421 EUGENE, OR 97440-1421 800-852-6140 CARGO: \$500,000 LIABILITY: \$1,000,000 UMBRELLA: \$1,000,000
D & B NUMBER:	96-047-5598
D & B RATING	3A1
W.O.B. CERTIFICATE NUMBER:	P0416264

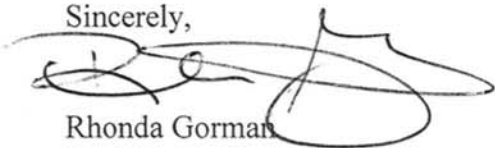


Dear New Customer

Thank you for the opportunity to introduce you to **Alliance Trucking Inc.** Webster's New World Dictionary defines *alliance* as a "close association for a common objective". Our close association is with you, the customer. Our common objective is to transport your freight in an honest and reliable manner. Providing you with quality service and indisputable business ethics are our primary goals at Alliance Trucking Inc. Our team of professionals, with over 100 years of combined trucking experience, is committed to moving your freight successfully and efficiently.

Alliance Trucking has I.C.C. authority to engage in transportation as a contract carrier and a broker. Currently, we transport a wide variety of commodities in 48 states, and Canada. Our team is not only experienced at moving truckload, LTL and over-dimensional shipments but our heavy haul department abounds with knowledge in transporting loads that can weigh in excess of 100,000 lbs. Our vast carrier base is extremely dedicated and reliable. They favor Alliance Trucking because we offer diverse types of freight in large geographical region and we pay our trucks twice as fast as the industry standard. Our quick pay policy ensures stability within our fleet so that Alliance Trucking can consistently offer you superior trucking service. We extend this quality service up to \$ 500,000 Contingent Cargo Coverage on each of your loads. Your freight is important to us. That's why we go the extra mile to make sure it's fully protected. Enclosed you will find copies of our company profile, insurance, and a business card containing our toll-free, local phone, and fax numbers. Please feel free to call for rate quotes, availability, or any other questions you may have. We at Alliance Trucking Inc. look forward to servicing your transportation needs.

Sincerely,

A handwritten signature in black ink, appearing to read "Rhonda Gorman", is written over a white rectangular area.

Rhonda Gorman
President



CREDIT APPLICATION

Please fill out and fax back to: **CREDIT DEPT.** at 541-734-7009

FIRM NAME _____ D & B # _____

MAILING ADDRESS _____

PHYSICAL ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE# _____ FAX# _____

INCORPORATED _____ FEDERAL ID OR SSN _____

OWNER OR PRESIDENT _____ DOING BUSINESS SINCE _____

ACCOUNTS PAYABLE CONTACT _____

BANK REFERENCE

BANK NAME _____ ACCT# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CONTACT _____

SUPPLIER REFERENCE

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____

ALLIANCE TRUCKING'S CREDIT TERMS ARE NET 15 DAYS

AUTHORIZED BY _____ TITLE _____



PM-25
(Rev. 1/95)
SERVICE DATE
October 24, 1996

FEDERAL HIGHWAY ADMINISTRATION

LICENSE

MC 309539 SUB 0 B

ALLIANCE TRUCKING, INC.

Medford, OR

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 (49CFR 1043) and the designation of agents upon whom process may be served (49 CFR 1044). Applicant shall also render reasonably maintain continuous and adequate service under this authority. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

JOHN F. GRIMM
Director, Office of Motor Carrier
Information Analysis



PM-31
(Rev. 1/95)

SERVICE DATE
November 05, 1996

FEDERAL HIGHWAY ADMINISTRATION

PERMIT

MC 309539 P

ALLIANCE TRUCKING INC.

MEDFORD, OR.

This permit is evidence of the carrier's authority to engage in transportation as a **contract carrier of property (except household goods)** by motor vehicle in interstate or foreign commerce.

This authority will be effective as long as the carrier maintains compliance with the requirements pertaining to insurance coverage for the protection of the public (49 CFR 1043) and the designation of agents upon whom process may be served (49 CFR 1044). Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Service must be performed under a continuing agreement with one or more persons.

JOHN F. GRIMM
Director, Office of Motor Carriers
Information Analysis

NOTE: Willful and persistent noncompliance with applicable safety fitness regulations as evidenced by a DOT safety fitness rating of "Unsatisfactory" or by other indicators, could result in a proceeding requiring the holder of this certificate or permit to show cause why this authority should not be suspended or revoked.

1209 Stowe Ave. • Medford, OR 97501 • www.alliancetrucking.com
Phone: 541.734.4844 • Toll Free: 800.977.5623 • Fax: 541.734.7009



Form **W-9**
(Rev. January 2005)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)
ALLIANCE TRUCKING, INC.

Business name, if different from above

Check appropriate box: Individual/
Sole proprietor Corporation Partnership Other Exempt from backup
withholding

Address (number, street, and apt. or suite no.)
1209 STOWE, AVE.

City, state, and ZIP code
MEDFORD, OR 97501

List account number(s) here (optional)

Requester's name and address (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 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

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OR

Employer identification number

9	3	1	2	1	9	3	6	2
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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. person (including a U.S. resident alien).

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 4.)

Sign Here

Signature of U.S. person

Keith E. V. Stone

Date

3-10-2010

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, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. 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:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If 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.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.