CONFIDENTIAL CREDIT AGREEMENT

808 N. 161st E. Ave | Suite 100 | Tulsa, Oklahoma 74116 | Phone: (800) 545-6617

Terms and Conditions:

On behalf of the company, I hereby grant permission to the below referenced bank and credit references to release pertinent information regarding our accounts to Conexus, LLC. The company named below attests to the financial responsibility, ability, and willingness to pay all transportation and other tariff charges within **30 days** of invoice date.

Business Information

Estimated Credit Limit Needed? _____
Legal Business Name: _____
Subsidiary of/Division of: _____
Address: _____
_____

Billing Address (if different from above):
_____
_____
Parent or Home Office Address: _____
_____
Phone:_____Fax: _____

Sole Proprietorship: _____Partnership: _____
Corporation: Private_____Public_____Other_____
Annual Revenue:_____No. of employees: _____
Type of Business: _____
Date Established: _____

Financial Officer/Controller: _____
Accounts Payable Contact: _____
Accounts Payable E-mail: _____
Federal ID #: _____
Preferred Method of Receiving Bills:
Fax_____Mail_____Email_____

Current Financial Information: Financial Statements will be of great assistance to us in establishing a credit limit to you. Conexus request for a copy of your most recent financial statement is hereby: Complied with_____Refused____

Service & Transportation Provider References: *(Please include three service and transportation provider references.)*

1. Name:_____Phone: _____Contact Email: _____

Address: _____

2. Name:_____Phone: _____Contact Email: _____

Address: _____

3. Name_____Phone: _____Contact Email: _____

Address: _____

Transportation Organizations Only:

Your company is a: Motor Carrier_____Broker_____Other_____
MC #_____Surety Bond Holder_____Bond #_____

Banking Information:

Bank Name: _____Phone:_____
Address: _____
Bank Officer: _____Account #:_____
By signing, I verify that I have read and agree to the above Terms & Conditions.

_____ _____ _____ _____
Print name Signature Title Date

****Please send billing specifications to accounting@meltonlogistics.com in order for payments to be processed. ****