

## Customer Service Contacts and Numbers

Department Number: 888-640-8482

Fax: 256-737-9268

[www.regarrison.com](http://www.regarrison.com)

24 Hours per Day/Seven Days per Week

Name	Territory/Division	Direct Number
Jim Hamm	Sales Manager- National Accounts	256-255-5557
Keith Wise	Regional Sales Manager	256-255-5548
David Mayo	Logistics Manager	256-255-5521
Kasey Burns	Carrier Development	256-255-0338
Maegan Carden	Account Manager Supervisor	256-255-5547
Kevin Rice	Account Manager-Dallas Operations	469-453-3199
Matt Bailey	Account Manager- Athens Operations	706-353-0836
Austin Ray	Account Manager- Salinas Operations	831-455-3520
Julian Oaks	Weekend Dispatch Supervisor	888-640-8482
Sammie Wilson	Weekend Dispatch	888-640-8482
Bill Caldwell	Fleet Supervisor	256-255-5523
Linda Peinhardt	Accounts Receivable/Credit	256-255-7608
Lori Chaffin	Billing Department/POD's	256-255-5532
Jon Duke	IT Manager	256-255-5534
Lanny Samples	Director of Safety & Recruiting, CDS	256-255-7605
Wayne Burden	VP of Operations & Sales	256-255-5542

**Equipment Type Available:** Van 53' High Cube, Air Ride Refrigerated 53' High Cube, Air Ride

<b>Company Officers:</b>	President	Wyles Griffith
	Executive Vice President	Donovon Lovell
	Executive Vice President	Jerry Lovell
	General Manager	Shane McMinn

**Contract Carrier Number:** MC-144168 SUB 10 **Federal ID Number:** 63-1183993 **Alpha Code:** GRTV 200

R.E. Garrison Trucking • PO Box 890 •  
[www.regarrison.com](http://www.regarrison.com)



Cullman, AL 35056 • 800-571-3413 •



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

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

January 27, 2010

In reply refer to:  
Your USDOT No.: 95610  
Review No.: 768803/CR

WYLES GRIFFITH  
PRESIDENT  
RE GARRISON TRUCKING INC  
PO BOX 890  
CULLMAN, AL 35056

Dear WYLES GRIFFITH:

The motor carrier safety rating for your company is:

**SATISFACTORY**

This SATISFACTORY rating is the result of a review and evaluation of your safety fitness completed on January 20, 2010. A SATISFACTORY rating indicates that your company has adequate safety management controls in place to meet the safety fitness standard prescribed in 49 C.F.R. 385.5.

Please assure yourself that any specific deficiencies identified in the review report have been corrected. We appreciate your efforts toward promoting motor carrier safety throughout your company. If you have questions or require further information, please contact:

U.S. DEPARTMENT OF TRANSPORTATION  
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION  
U. S. DEPARTMENT OF TRANSPORTATION FMCSA  
520 COTTON GIN ROAD  
MONTGOMERY, AL 36117-3550  
Telephone No.: 334-290-4954

John Van Steenburg  
Director, Office of Enforcement and  
Compliance

# Interstate Commerce Commission

PERMIT

No. MC-144168 Sub 10

R. E. GARRISON TRUCKING, INC.  
Cullman, AL

This Permit is evidence of the carrier's authority to engage in transportation as a contract carrier by motor vehicle.

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); the designation of agents upon whom process may be served (49 CFR 1044); the execution of contracts (49 CFR 1053)\*; and for passenger carriers, tariffs or schedules (49 CFR 1300 through 1310).

This authority is subject to any terms, conditions, and limitations as are now, or may be later, attached to this privilege.

The transportation service to be performed is described on the reverse side of this document.

By the Commission.

NORETA R. McGEE  
Acting Secretary

\*While the execution of contracts must be accomplished, it is unnecessary to file them with the Commission.

NOTE: If there are any discrepancies regarding this permit, please notify the Commission within 30 days.

To operate as a contract carrier, by motor vehicle, in interstate or foreign commerce, over irregular routes, transporting general commodities (except classes A and B explosives, household goods, and commodities in bulk), between points in the United States (except Alaska and Hawaii), under continuing contract(s) with commercial shippers or receivers of such commodities.



# Interstate Commerce Commission

## Certificate of Public Convenience and Necessity

MC – 144168 Sub 9

R.E. GARRISON TRUCKING, INC.  
CULLMAN, ALABAMA

This Certificate of Public Convenience and Necessity is evidence of the carrier's authority to engage in transportation as a common carrier by motor vehicle.

This authority will become effective only when the carrier has met the compliance requirements pertaining to insurance coverage for the protection of the public (49 CFR 1043), the designation of agents upon whom process may be served (49 CFR 1044), and tariffs or schedules (49 CFR 1300 through 1310, revised). The carrier shall also render reasonably continuous and adequate service to the public. Failure to meet these conditions will constitute sufficient grounds for the suspension, change, or revocation of this authority.

This authority is subject to any terms, conditions, and limitations as are now, or may be later, attached to this privilege.

For common carriers with irregular route authority: Any irregular route authority authorized in this certificate may not be tacked or joined with your other irregular route authority unless joinder is specifically authorized.

The transportation service to be performed is described on the reverse side of this document and will be valid as long as the carrier maintains compliance with the above requirements.

By the Commission.

Agatha L. Mergenovich  
Secretary

Note: If there are any discrepancies regarding this document please notify the Commission within 30 days.

To operate as a common carrier, by motor vehicle, in interstate or foreign commerce, over irregular routes, transporting general commodities (except classes A and B explosives, household goods and commodities in bulk), between points in the United States, (except Alaska and Hawaii).



# Credit Application

R.E. GARRISON TRUCKING INC.  
1103 COUNTY RD 1194 VINEMONT, AL 35179  
PH. 256-255-7608 FAX 256-255-7609

DATE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_ PH: \_\_\_\_\_

D & B NO: \_\_\_\_\_ YEARS IN BUSINESS: \_\_\_\_\_

BANK NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## CREDIT REFERENCES:

1 \_\_\_\_\_ PH: \_\_\_\_\_

2 \_\_\_\_\_ PH: \_\_\_\_\_

3 \_\_\_\_\_ PH: \_\_\_\_\_

BILL TO: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PH: \_\_\_\_\_

LINE OF BUSINESS: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

DATE \_\_\_\_\_



# R.E. Garrison Trucking, Inc.

## ADDENDUM TO CONTRACT OR RATE AGREEMENT FUEL SURCHARGE

ITEM: FREIGHT ALL KINDS

EFFECTIVE DATE: JANUARY 31, 2000

1. In applying the fuel surcharge provided herein, first determine, without reference to this section, the applicable charge between RE GARRISON TRUCKING INC and \_\_\_\_\_ then add the fuel surcharge provided herein.
2. The fuel surcharge will be updated each Tuesday and will apply to freight picked up on that same Tuesday through the following Monday and will be adjusted in that manner on a weekly basis.
3. The weekly U.S. average price for diesel fuel issued each Monday by the U.S. Department of energy (DOE) shall be used to determine the fuel surcharge applicable for the following period. Any adjustments in the fuel surcharge will become effective at 12:01 AM Tuesday following the adjustment in the DOE index and the table set forth below.

### BASIC FUEL PRICE PER GALLON

DOE Price per Gallon	fuel surcharge (cents per mile)	DOE Price per Gallon	\$1.12 fuel surcharge (cents per mile)
\$1.12 to and including \$1.1499	\$0.01	\$2.05 to and including \$2.0999	\$0.20
\$1.15 to and including \$1.1999	\$0.02	\$2.10 to and including \$2.1499	\$0.21
\$1.20 to and including \$1.2499	\$0.03	\$2.15 to and including \$2.1999	\$0.22
\$1.25 to and including \$1.2999	\$0.04	\$2.20 to and including \$2.2499	\$0.23
\$1.30 to and including \$1.3499	\$0.05	\$2.25 to and including \$2.2999	\$0.24
\$1.35 to and including \$1.3999	\$0.06	\$2.30 to and including \$2.3499	\$0.25
\$1.40 to and including \$1.4499	\$0.07	\$2.35 to and including \$2.3999	\$0.26
\$1.45 to and including \$1.4999	\$0.08	\$2.40 to and including \$2.4499	\$0.27
\$1.50 to and including \$1.5499	\$0.09	\$2.45 to and including \$2.4999	\$0.28
\$1.55 to and including \$1.5999	\$0.10	\$2.50 to and including \$2.5499	\$0.29
\$1.60 to and including \$1.6499	\$0.11	\$2.55 to and including \$2.5999	\$0.30
\$1.65 to and including \$1.6999	\$0.12	\$2.60 to and including \$2.6499	\$0.31
\$1.70 to and including \$1.7499	\$0.13	\$2.65 to and including \$2.6999	\$0.32
\$1.75 to and including \$1.7999	\$0.14	\$2.70 to and including \$2.7499	\$0.33
\$1.80 to and including \$1.8499	\$0.15	\$2.75 to and including \$2.7999	\$0.34
\$1.85 to and including \$1.8999	\$0.16	\$2.80 to and including \$2.8499	\$0.35
\$1.90 to and including \$1.9499	\$0.17	\$2.85 to and including \$2.8999	\$0.36
\$1.95 to and including \$1.9999	\$0.18	\$2.90 to and including \$2.9499	\$0.37
\$2.00 to and including \$2.0499	\$0.19	\$2.95 to and including \$2.9999	\$0.38

4. An additional \$0.01 will be assessed for every \$0.05 increase above \$2.99 per gallon on DOE's weekly average.
5. The fuel surcharge shall apply to all line haul rates, whether based upon rate per mile, hundred weight, or flat rate per load.
6. Fuel surcharge shall be shown separately on each freight invoice and identified as "fuel surcharge"
7. In the event of a Monday falling on a federal holiday, the DOE index will be announced the next business day and any resulting adjustment shall become effective on Wednesday.

R.E. GARRISON TRUCKING, INC

SHIPPER

\_\_\_\_\_  
Wyles Griffith, President



## Zip Code / State Splits

CA - N	920-922, 932-961
CA - S	900-919, 923-931
FL - W	324-325
FL - N	320-323, 326, 344
FL - C	327-329, 335-338, 346-347
FL - S	330-334, 339-342, 349
GA - N	300-303, 305-312, 318, 319
GA - S	304, 313-317
IA - E	500-504, 506-507, 509, 520-528
IA - W	505, 508, 510-516
IL - N	600-613
IL - S	614-629
MI - N	486-487, 496-499
MI - S	480-485, 488-495
MN - N	556-558, 564-567
MN - S	550-555, 559-563
NY - E	108-109, 120-139
NY - W	140-149
NYC	100-107, 110-119
PA - E	169-196
PA - W	150-168
TN - E	373-379, 385
TN - W	370-372, 380-384
TX - E	750-767, 770-778
TX - W	768-769, 779-799
WI - N	540-549
WI - S	530-539



## 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) <b>R.E. Garrison Trucking, Inc.</b>	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ----- <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.) <b>P.O. Box 890</b>	Requester's name and address (optional)
City, state, and ZIP code <b>Cullman, AL 35056</b>	
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 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
or
Employer identification number
63                      1183993

**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:

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).

**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 ▶ <i>David M. Atwill</i>	Date ▶ <i>1/5/10</i>
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### General Instructions

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

#### 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.

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.

**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.

**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 on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the 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 withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,



# CERTIFICATE OF INSURANCE

**TURNER & HAMRICK, LLC**  
 PO Box 985 • Troy, AL 36081  
 Phone (334) 566-7665 • Fax (334) 566-7215

**INSURED** Phone 866-914-4953  
**R E GARRISON TRUCKING INC.AND ADVANTAGE LEASING INC**  
 1103 COUNTY RD 1194  
 VINEMONT AL 35179

ISSUE DATE: 4-25-2013  
 PRODUCER: Steve Hewitt  
 ISSUED BY: Lynn Jacques

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COVERAGES** Fed ID # MC #

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	COMPANY/POLICY # - EFFECTIVE & EXPIRATION DATES	LIMITS
<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input checked="" type="checkbox"/> Hired Autos <input checked="" type="checkbox"/> Non-owned Autos <input type="checkbox"/> Garage Liability <input type="checkbox"/> Other \$75,000 Ballee	<b>GREAT WEST CASUALTY NAIC#11371</b> POLICY NUMBER: <b>GWP77742D</b> POLICY PERIOD FROM: 5-1-2013 TO: 5-1-2014 GWC	COMBINED SINGLE LIMIT \$1,000,000 BODILY INJURY (Per Person) BODILY INJURY (Per Accident) PROPERTY DAMAGE
<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occur <input type="checkbox"/> Owner's & Contractors Prot. <input type="checkbox"/>	<b>GREAT WEST CASUALTY</b> POLICY NUMBER: <b>GWP77742D</b> POLICY PERIOD FROM: 5-1-2013 TO: 5-1-2014 GWC	GENERAL AGGREGATE \$1,000,000 PRODUCTS-COMP/OP AGG. \$1,000,000 PERSONAL & ADV. INJURY \$1,000,000 EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$100,000 MED. EXPENSE (Any one person) \$5,000
<b>EXCESS LIABILITY</b> <input checked="" type="checkbox"/> Umbrella <input type="checkbox"/> Other Than Umbrella	<b>LEXINGTON INS CO</b> POLICY NUMBER: <b>043732526</b> POLICY PERIOD FROM: 12-15-2012 TO: 12-15-2013 CRI	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000
<b>MOTOR TRUCK CARGO</b>	<b>GREAT WEST CASUALTY</b> POLICY NUMBER: <b>GWP77742D</b> POLICY PERIOD FROM: 5-1-2013 TO: 5-1-2014 GWC	PER VEHICLE \$250,000 DEDUCTIBLE \$10,000 PER DISASTER REEFER DEDUCTIBLE \$10,000
<b>WORKERS COMPENSATION AND EMPLOYER'S LIABILITY</b>	<b>MIDWEST EMPLOYERS/AL TRUCKING ASSOC</b> POLICY NUMBER: <b>PJAL126031</b> POLICY PERIOD FROM: 1-1-2013 TO: 1-1-2014 ATA	STATUTORY LIMITS EACH ACCIDENT \$1,000,000 DISEASE-POLICY LIMIT \$1,000,000 DISEASE-EACH EMPLOYEE \$1,000,000
<b>PHYSICAL DAMAGE</b>	<b>GREAT WEST CASUALTY</b> POLICY NUMBER: <b>GWP77742D</b> POLICY PERIOD FROM: 5-1-2013 TO: 5-1-2014 TCS	\$10,000 Deductible \$75,000 Ballee Coverage

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Fax Number: 256-255-5539

"SAMPLE CERTIFICATE"

FOR ORIGINAL PLEASE CALL US AT 334-566-7665  
 OR FAX REQUEST TO 334-566-7215

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*William F Samuel*