

**I AM SHE DA BOSS LOGISTICS, LLC
DISPATCH SERVICE AGREEMENT**

I _____, The Owner of &/or The Driver of Truck# _____ of _____ (carrier), a licensed Motor Carrier, MC#, _____ and/or DOT#, _____; hereby grants authorization to : She Da Boss Logistics, LLC to act as my agent for the sole purpose of searching for and booking shipments, processing all brokerage paperwork and obtaining Certificates of Insurance as required in order to expedite shipments and dispatch via telephone, fax or, e-mail for my truck, Unit# _____, License Plate#, _____, in the state of, _____. All billing, invoicing and collections of revenue from customers, brokers, shippers, consignees, etc, are the sole responsibility of the carrier. If revenue for a shipment or shipments is uncollectible, She Da Boss Logistics, LLC will be held harmless, and no penalty or deduction of fees will be made. The carrier agrees to maintain all proper licenses and permits to conduct business as a motor carrier in the area of intended operation.

Additionally, carrier agrees to maintain liability and cargo insurance at the amounts set forth by the home state of the carrier. She Da Boss Logistics, LLC will be held harmless in the event of any, and all claims.

The fee for dispatch services will be _____% of the gross revenue of each shipment with no minimum charge. As loads are picked up, an amount equal to the above stated percentage will be payable to:

She Da Boss Logistics, LLC. Payments are to be conveniently paid through Zelle at lawanda@shedabosslogistics.com or 713-364-8021.

Please provide your SMS Cell Phone Text Number _____

& Your Email Here: _____

Either party has the right to end this agreement without cause at any time with seven (7) days' notice by written request.

Upon cancellation, any unused funds remaining in the deposit account will be refunded to the carrier within two (2) business days without penalty.

By signing below, I fully understand the terms of this agreement.

Company: _____

Signature: _____ Date: ____/____/____

Print name: _____

Dispatcher: _____

Date: ____/____/____