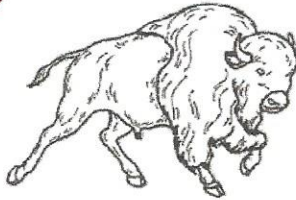


# WHITE BUFFALO LOGISTICS, LLC



P.O. BOX 317  
GNADENHUTTEN, OHIO 44629  
PH: 740-254-9150  
FAX: 740-254-4545

**Thank you for choosing White Buffalo Logistics, LLC.**

**To set up your company to haul freight for us and set you up for payment, we will need the following information faxed to (740) 254-4545 or emailed to [whitebuffs@sbcglobal.net](mailto:whitebuffs@sbcglobal.net) :**

- Certificate of insurance listing White Buffalo Logistics, LLC as certificate holder at P.O. Box 317 Gnadenhutten, OH 44663
- The completed contract filled out and sent back. (Page 2 of the package)
- Completed, current W9 and a Common Carrier authority
- Signed load confirmation
- Factoring company information to ensure correct payment

**Payment terms are NET 30 unless you request one of our quick pay options. We offer a quick pay ACH direct deposit for a 3% fee, or a check mailed out the same day. For payment we will need the following:**

- Signed and legible bill of lading/delivery receipt, listing White Buffalo Logistics, LLC as the carrier.
  - Our Pro # listed on your invoice, which can be found on the top of our load confirmation.
  - We offer a quick pay option for 3% from the load total. If you would like quick pay you will need to show the 3% deduction from the rate on your invoice. We have an ACH direct deposit option, we will need a copy of a voided check, or we can mail a check out the same day. Call Holly or Cris for details.
- Please send invoices and signed, clear, legible bill of ladings by one of the following methods:**

**Mail :**

White Buffalo Logistics, LLC

P.O. Box 317

Gnadenhutten. OH 44629-0317

**Accounting Email:**

wb\_holly@hotmail.com

**Fax:**

(740) 254-4545

**Thank you for your business!**  
Find us on the web: [www.whitebuffaloservices.com](http://www.whitebuffaloservices.com)



P.O. BOX 317  
GNADENHUTTEN, OHIO 44629  
PH: 740-254-9150  
FAX: 740-254-4545

**Brokerage Agreement**

This agreement shall serve as a contract between (carrier) \_\_\_\_\_ and **White Buffalo Logistics, LLC**, (broker) to satisfy interested parties of the relationship which each entity fulfills and to what extent. The term of the agreement shall be continuous from the signing date of \_\_\_\_\_. Termination of this agreement can be instituted by either party by giving a 30-day notice in writing to the other party.

**Carrier** is a licensed ICC Motor Carrier with Common and/or contract authority, authorized to carry **White Buffalo Logistics, LLC** traffic as tendered. Rates for the **carrier's** services shall be agreed to prior to movement of each shipment. Telephone rates shall be acceptable by either party at the time of movement.

**Carrier** shall be liable for all loss, damage, or liability incurred by transportation of property arranged for by **White Buffalo Logistics, LLC** while being transported by the **carrier**. In addition, the **carrier** is fully responsible for paying fuel taxes and workman's compensation.

**Carrier** shall not knowingly call on **White Buffalo Logistics, LLC** customers to solicit shipments directly. Failure to abide by this principle could result in filing of a complaint with the Transportation Broker's Conference in America. In the event of disagreement or dispute and legal action is taken, the prevailing party will be entitled to legal fees.

**Carrier:**

MCC ICC#: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax/Email: \_\_\_\_\_  
Equipment Types: \_\_\_\_\_  
Incorporated: \_\_\_\_\_  
Fed ID #: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_  
Factoring Co: Y/N  
Factoring Co. Info/Your Mailing Add:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Broker:**

**White Buffalo Logistics, LLC**  
P.O. Box 317  
7516 Wolfes Crossing Rd  
Gnadenhutten, OH 44629  
MC#396769  
Federal ID# 20-3120976  
Owner: *Tom Wagner*  
Operations MGR: *Scott Ryan*  
DISP: *Justin Hill*  
*Alpalet*  
*Heena*  
*L. Brown*

Thank you for your business!  
Email us: [whitebuffs@sbcglobal.net](mailto:whitebuffs@sbcglobal.net)  
Find us on the web: [www.whitebuffaloeservices.com](http://www.whitebuffaloeservices.com)

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**WHITE BUFFALO LOGISTICS, LLC**

**2** Business name/disregarded entity name, if different from above

**3** Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶   **S**    
**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

*(Applies to accounts maintained outside the U.S.)*

**5** Address (number, street, and apt. or suite no.) See instructions.

**PO BOX 317**

**6** City, state, and ZIP code

**GNADENHUTTEN, OHIO 44629**

**7** List account number(s) here (optional)

Requester's name and address (optional)

Print or type.  
See Specific Instructions on page 3.

## 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									

**or**

Employer identification number									
2	0	-	3	1	2	0	9	7	6

## 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. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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 for Part II, later.

**Sign Here**

Signature of U.S. person ▶

*Terry Wagner*

Date ▶

*1/1/2019*

## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



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

400 7th Street SW  
Washington, DC 20580

**SERVICE DATE**  
August 3, 2005

**DECISION**  
MC-396769  
JOSEPH M. CONNER  
D/B/A WHITE BUFFALO SERVICES  
GNADENHUTTEN, OH  
REENTITLED  
WHITE BUFFALO LOGISTICS, LLC

On July 27, 2005, applicant filed a request to have the Federal Motor Carrier Safety Administration's records changed to reflect a name change.

***It is ordered:***

The Federal Motor Carrier Safety Administration's records are amended to reflect the carrier's name as WHITE BUFFALO LOGISTICS, LLC.

Within 30 days after this decision is served, the applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for property broker security and BOC 3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-80 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to Federal Motor Carrier Safety Administration, 400 Virginia Avenue, SW, Suite 600, Washington, DC 20024.

The applicant is notified that failure to comply with the terms of this decision shall result in revocation of its operating rights registration, effective 30 days from the service date of this decision.

To verify that the applicant is in full compliance, call (202)358-7000 or visit our web site at: <http://ft-public.fmcsa.dot.gov>. Any other questions regarding the action taken should be directed to (202)368-9805.

***Decided: July 29, 2005***

By the Federal Motor Carrier Safety Administration

Angell Sebastian, Chief  
Information Systems Division

NCA

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	
<input type="checkbox"/> Other (see instructions) ▶	
<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code	
<b>7</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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 20%; border: 1px solid black; height: 20px;"></td> </tr> </table>			-		-	
		-		-		
<b>or</b>						
<b>Employer identification number</b>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; border: 1px solid black; height: 20px;"></td> <td style="width: 20%; border: 1px solid black; height: 20px;"></td> </tr> </table>			-			
		-				

## 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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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 for Part II, later.

**Sign Here**

Signature of  
U.S. person ▶

Date ▶

## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/06/2007	200703601654	SUBSEQNT AGENT APPOINT/LIMITED/LIABILTY/PARTNER (LSA)	25.00	.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

NANETTE DEGARMO VONALLMAN CO., L.P.A.  
134 SECOND STREET NW  
NEW PHILADELPHIA, OH 44663

**STATE OF OHIO**  
**CERTIFICATE**  
Ohio Secretary of State, Jennifer Brunner

1551291

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**WHITE BUFFALO LOGISTICS, LLC**

and, that said business records show the filing and recording of:

Document(s)  
**SUESEQNT AGENT APPOINT/LIMITED/LIABILTY/PARTNER**

Document No(s):  
**200703601654**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 30th day of January, A.D. 2007.

Ohio Secretary of State



April 27, 2017

JERRY WAGNER  
WHITE BUFFALO LOGISTICS LLC  
PO BOX 317  
GNADENHUTTEN, OH 44629

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) RENEWAL

The Standard Carrier Alpha Code of **WBFS** has been renewed for:

WHITE BUFFALO LOGISTICS LLC  
PO BOX 317  
GNADENHUTTEN, OH 44629  
MC- 0396769  
US DOT- 915951

This Alpha Code will apply only to the company name shown above through June 30, 2018. **Approximately two months prior to expiration of this SCAC, NMFTA will provide an invoice for renewal which must be promptly returned together with payment to ensure its continued validity.** Should the company name or address change, please notify the National Motor Freight Association, Inc. at the address below.

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

*If you participate in the Customs & Border Protection (CBP) ACE program and you have any issue with ACE and your SCAC, please contact CBP at the following address:*

Customs and Border Protection  
Attention: SCAC Beauregard, Cube C-231-1  
1801 N. Beauregard Street  
Alexandria, VA 20598-1350  
**AMS.SCAC@DHS.GOV**

**NOTICE:** Renewal of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC inconnection with freight rates. For participation and membership information, please call (703) 838-1810



P.O. BOX 317  
GNADENHUTTEN, OHIO 44629  
PH: 740-254-9150  
FAX: 740-254-4545

### **Request for Certificate of Insurance**

Please send a certificate of insurance listing White Buffalo Logistics, LLC as the certificate holder for your insured carrier (name of insured) \_\_\_\_\_.

**Use the below information for the certificate.**

White Buffalo Logistics, LLC

P.O. Box 317

Gnadenhutten, OH 44629

Please email the certificate to [whitebuffs@sbcglobal.net](mailto:whitebuffs@sbcglobal.net) or fax to (740) 254-4545.







U.S. Department of Transportation  
Federal Motor Carrier Safety Administration  
**Licensing and Insurance Public**

### Motor Carrier Details

<b>US DOT:</b>	915951	<b>Docket Number:</b>	MC396769	
<b>Legal Name:</b>	WHITE BUFFALO LOGISTICS, LLC			
<b>Doing-Business-As Name:</b>				
<b>Business Address</b>	<b>Business Telephone and Fax</b>	<b>Mail Address</b>	<b>Mail Telephone and Fax</b>	<b>Undeliverable Mail</b>
7516 WOLFES CROSSING RD. SE GNADENHUTTEN OH 44629	(740) 254-9150	P O BOX 317 GNADENHUTTEN OH 44629	(740) 254-9150	NO
<b>Authority Type</b>	<b>Authority Status</b>		<b>Application Pending</b>	
<b>Common</b>	INACTIVE		NO	
<b>Contract</b>	INACTIVE		NO	
<b>Broker</b>	ACTIVE		NO	
<b>Property</b>	<b>Passenger</b>	<b>Household Goods</b>	<b>Private</b>	<b>Enterprise</b>
YES	NO	NO	NO	NO
<b>Insurance Type</b>	<b>Insurance Required</b>		<b>Insurance on File</b>	
<b>BIPD</b>	\$750,000		\$0	
<b>Cargo</b>	NO		NO	
<b>Bond</b>	YES		YES	

BOC-3: YES

Blanket Company: [TRUCKERS WORLD OF FUEL TAXES & PERMITS, INC.](#)

[Web Site Content and BOC-3 Information Clarification](#)

| [Active/Pending Insurance](#) | [Rejected Insurance](#) | [Insurance History](#) | [Authority History](#) | [Pending Application](#) | [Revocation](#) |

February 16, 2015



[FMCSA Home](#) | [DOT Home](#) | [Feedback](#) | [Privacy Policy](#) | [USA.gov](#) | [Freedom of Information Act \(FOIA\)](#) | [Accessibility](#) | [OIG Hotline](#) | [Web Policies and Important Links](#) | [Plug-ins](#) | [Related Sites](#) | [Help](#)

Federal Motor Carrier Safety Administration  
1200 New Jersey Avenue SE, Washington, DC 20590 - 1-800-832-5660 - TTY: 1-800-877-8339 - [Field Office Contacts](#)



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration  
**Licensing and Insurance Public**

### Active/Pending Insurance

<b>US DOT:</b>	915951	<b>Docket Number:</b>	MC396769					
<b>Legal Name:</b>	WHITE BUFFALO LOGISTICS, LLC							
Form	Type	Insurance Carrier	Policy/Surety	Posted Date	Coverage From	Coverage To	Effective Date	Cancellation Date
84	SURETY	<a href="#">SOUTHWEST MARINE AND GENERAL INSURANCE COMPAN</a>	13325	10/03/2013	\$0	\$75,000*	10/01/2013	

\* If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

| [Carrier Details](#) | [Rejected Insurance](#) | [Insurance History](#) | [Authority History](#) | [Pending Application](#) | [Revocation](#) |

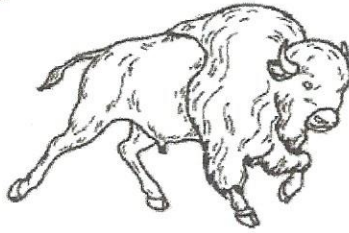
February 16, 2015

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Federal Motor Carrier Safety Administration  
1200 New Jersey Avenue SE, Washington, DC 20590 - 1-800-832-5660 - TTY: 1-800-877-8339 - Field Office Contacts

# WHITE BUFFALO LOGISTICS, LLC



P.O. BOX 317  
GNADENHUTTEN, OHIO 44629  
PH: 740-254-9150  
FAX: 740-254-4545

## Trade References

**Bennett Transport MC# 785878**  
17750 Cooper Road  
Pleasant City, OH 43372

Brad/Amanda  
P: (740) 680-0472  
F: (740) 732-0474

E: bennetttransport@ymail.com

**R. Brudges Transport MC# 571075**  
13622 Reveston Road  
Houston, TX 77039

Robert  
P: (281) 442-2150  
F: (281) 884-6052

E: rbt\_transport@yahoo.com

**KLong Trucking MC# 295096**  
815 14<sup>th</sup> Street  
Huntingdon, PA 16652

Kyle  
P: (800) 798-7428  
F: (814) 643-6786

E: klongtrucking@verizon.net

**Lionbridge Transport MC# 681546**  
8303 Glenlea Street  
Houston, TX 77061

Rose  
P: (713) 228-3424  
F: (877) 504-9004

E: rosariosilva@att.net

## Banking Information:

Unified Bank  
141 N. Broadway  
New Philadelphia, OH 44663

Diane Shaffer  
P: (330) 343-4413 x 2101  
F: (330) 364-8202

**We also offer a 3% quick pay! Call and ask Holly or Cris about this today at (740) 254-9150!**

You can also email [wb\\_holly@hotmail.com](mailto:wb_holly@hotmail.com) for any billings inquiries, to submit bill of ladings, and invoices.

Find us on the web: [www.whitebuffaloservices.com](http://www.whitebuffaloservices.com)  
Email us at [whitebuffs@sbcglobal.net](mailto:whitebuffs@sbcglobal.net)



## White Buffalo Logistics, LLC



is a duly licensed property broker pursuant to the authority of the Federal Motor Carrier Safety Administration, having demonstrated to TIA its integrity and having successfully met the criterion of financial responsibility to the amount of \$75,000 through the TIA Bond Program.



Valid Dec. 5, 2019 through Dec. 5, 2020 — Bond # 13325 with a limit of \$75,000

A handwritten signature in black ink, appearing to read "Lynn-AS".

Lynn Gravley  
Chairman  
TIA Services

A handwritten signature in black ink, appearing to read "Doug Clark".

Douglas A. Clark  
Interim President & CEO  
Transportation Intermediaries Association

This Trust is Underwritten by TIA Services & U.S. Bank.

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B.M.C. 84  
(10/98)

Approved by OMB  
2125-0570

Filer FHWA  
ACCOUNT NO 28318

License No.  
MC- 396769

PROPERTY BROKER'S SURETY BOND UNDER 49 U.S.C. 13906

KNOW ALL MEN BY THESE PRESENTS, That we WHITE BUFFALO LOGISTICS, LLC  
(Name of Property Broker)

of 7516 WOLFES CROSSING ROAD. SE. GNADENHUTTEN. OH. 44629  
(Street) (City) (State) (ZIP Code)

as PRINCIPAL (hereinafter called Principal), and Southwest Marine and General Insurance Company a corporation,  
(Name of Surety)

or a Risk Retention Group established under the Liability Risk Retention Act of 1986, Pub. L. 99-563, created and

existing under the laws of the State of Arizona (hereinafter called Surety) are held and  
(State or District of Columbia)

firmly bound unto the United States of America in the sum of \$75,000, for which payment, well and truly to be made, we bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal is or intends to become a Broker pursuant to the provisions of Title 49 U.S.C. 13903, and the rules and regulations of the Federal Highway Administration relating to insurance or other security for the protection of motor carriers and shippers, and has elected to file with the Federal Highway Administration such a bond as will ensure financial responsibility and the supplying of transportation subject to the ICC Termination Act of 1995 in accordance with contracts, agreements, or arrangements therefore, and

WHEREAS, this bond is written to assure compliance by the Principal as a licensed Property Broker of Transportation by motor vehicle with 49 U.S.C. 13906(b), and the rules and regulations of the Federal Highway Administration, relating to insurance or other security for the protection of motor carriers and shippers, and shall inure to the benefit of any and all motor carriers or shippers to whom the Principal may be legally liable for any of the damages herein described.

NOW, THEREFORE, the condition of this obligation is such that if the Principal shall pay or cause to be paid to motor carriers or shippers by motor vehicle any sum or sums for which the Principal may be held legally liable by reason of the Principal's failure faithfully to perform, fulfill and carry out all contracts, agreements, and arrangements made by the Principal while this bond is in effect for the supplying of transportation subject to the ICC Termination Act of 1995 under license issued to the Principal by the Federal Highway Administration, then this obligation shall be void, otherwise to remain in full force and effect.

The liability of the Surety shall not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments shall amount in the aggregate to the penalty of the bond, but in no event shall the Surety's obligation hereunder exceed the amount of said penalty. The Surety agrees to furnish written notice to the Federal Highway Administration forthwith of all suits filed, judgments rendered, and payments made by said Surety under this bond.

This bond is effective the 5th day of December, 2012, 12:01 a.m., standard time at the address of the Principal as stated herein and shall continue in force until terminated as hereinafter provided. The principal or the Surety may at any time cancel this bond by written notice to the Federal Highway Administration at its office in Washington, D.C., such cancellation to become effective thirty (30) days after actual receipt of said notice by the FHWA on the prescribed Form BMC-36, Notice of Cancellation Motor Carrier and Broker Surety Bond. The Surety shall not be liable hereunder for the payment of any damages hereinbefore described which arise as the result of any contracts, agreements, undertakings or arrangements made by the Principal for supplying of transportation after the termination of this bond as herein provided, but such termination shall not affect the liability of the Surety hereunder for the payment of any such damages arising as the result of contracts, agreements, or arrangements made by the Principal for the supplying for transportation prior to the date such termination becomes effective.

The receipt of this filing by the FHWA certifies that a broker Surety Bond has been issued by the company identified above, and that such company is qualified to make this filing under Section 387.315 of Title 49 of the Code of Federal Regulations.

Falsification of this document can result in criminal penalties prescribed under 18 U.S.C. 1001.

IN WITNESS WHEREOF, the said Principal and Surety have executed this instrument on the 5th day  
of December, 2012.

PRINCIPAL

Name White Buffalo Logistics, LLC

By Jerry L. Wagner  
Jerry L. Wagner, Operations Manager  
(Name of Officer and Title)

Witness [Signature]  
opr. mgr.

SURETY

Name: Southwest Marine and General Insurance Company

By Lisa Gelsomino

Lisa Gelsomino, Attorney-in-Fact

Witness Ma Gabriela Toto



FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION  
ACCEPTANCE REPORT

USER ID: SMGINS00  
TRANSMISSION NUMBER: WEB92875  
TRANSMITTED ON: 10/03/2013 15:07:22  
COMPANY NAME: SOUTHWEST MARINE AND GENERAL INSURANCE COMPAN  
SUBMITTED BY: SOUTHWEST MARINE AND GENERAL INSURANCE COMPAN (28318-00)

Docket	Form Type	Policy Number	Effective Date	Action
MC-396769	BMC-84/SURETY	13325	10/01/2013	ACCEPTED

Values in FMCSA Licensing & Insurance Database:

Legal Name: WHITE BUFFALO LOGISTICS, LLC  
Address: 7516 WOLFES CROSSING RD. SE  
GNADENHUTTEN OH US 44629  
P O BOX 377  
GNADENHUTTEN OH US 44629

91X Coverage(Type/Max/Underlying):

Total: 1