

**ROGERS WORLDWIDE
AGREEMENT FOR SERVICES & CREDIT**

CUSTOMER IDENTIFICATION									
CUSTOMER NAME:									
CORPORATION	PARTNERSHIP	SOLE PROPRIETORSHIP			LIMITED LIABILITY Co		STATE OF ORIGIN		
STREET ADDRESS:						P.O. BOX:			
CITY:		STATE:		ZIP:		TELEPHONE:		FAX:	
TYPE OF BUSINESS:							NO. OF YEARS IN BUSINESS:		
NAME OF PREDECESSOR BUSINESSES:									
PERSON TO CONTACT REGARDING INVOICES:							PHONE:		
FEDERAL TAX ID#:		SALES TAX EXEMPT #:			(PLEASE ATTACH COPY OF FORM)				
PARENT COMPANY:									
CITY:		STATE:		ZIP:		TELEPHONE:		FAX:	
INFORMATION ON PRINCIPALS									
FOR PROPRIETORSHIP OR PARTNERSHIP: LIST ALL OWNERS AND/OR PARTNERS.									
FOR CORPORATION OR LIMITED LIABILITY COMPANY: LIST ALL OFFICERS, DIRECTORS, MEMBERS AND MAJORITY STOCKHOLDERS.									
NAME:	HOME ADDRESS:			PHONE:		SOCIAL SEC. No.		POSITION:	
HAVE ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE EVER BEEN A DEBTOR IN A BANKRUPTCY PROCEEDING?									
HAS ANY JUDGMENT EVER BEEN ENTERED AGAINST ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE?									
ARE THERE LEGAL ACTIONS OR ARBITRATIONS PENDING AGAINST ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE?									

ROGERS WORLDWIDE

INSURANCE INFORMATION					
IF CUSTOMER DECLINES TO PAY ROGERS WORLDWIDE FOR TRANSPORT INSURANCE PREMIUM, WE REQUIRE INFORMATION ON YOUR EXISTING INSURERS.					
NAME OF INSURANCE UNDERWRITER:			POLICY No.:		
TYPE OF COVERAGE:		POLICY EFFECTIVE DATE:		POLICY EXPIRY DATE:	
DEDUCTIBLE, IF ANY:					
CREDIT REFERENCES (ATTACH SEPARATE SCHEDULE IF NECESSARY)					
PRIMARY BANK:					
NAME:		ACCOUNT #:		PHONE:	
ADDRESS:			CONTACT NAME:		
OTHER BANK:					
NAME:		ACCOUNT #:		PHONE:	
ADDRESS:			CONTACT NAME:		
TRADE REFERENCES					
NAME:		ACCOUNT #:		PHONE:	
ADDRESS:			CONTACT NAME:		
NAME:		ACCOUNT #:		PHONE:	
ADDRESS:			CONTACT NAME:		
NAME:		ACCOUNT #:		PHONE:	
ADDRESS:			CONTACT NAME:		
PERSONS AUTHORIZED TO INSTRUCT ROGERS WORLDWIDE AND INCUR CHARGES ON CUSTOMER'S ACCOUNT					
NAME:		TITLE:		PHONE:	
NAME:		TITLE:		PHONE:	
NAME:		TITLE:		PHONE:	

ROGERS WORLDWIDE

LIMITED POWER OF ATTORNEY
CREDIT CARD AUTHORIZATION

I AM EXISTING CLIENT OF ROGERS WORLDWIDE, A DIVISION OF ROCK-IT CARGO USA LLC

I HEREBY APPOINT THE OWNER, MANAGER AND ALL EMPLOYEES OF ROGERS WORLDWIDE TO BE MY ATTORNEYS-IN-FACT FOR THE PURPOSE OF SIGNING ANY DOCUMENTS NECESSARY TO PURCHASE TRANSPORTATION SERVICES AND TO CHARGE THESE PURCHASES TO MY CREDIT CARD BELOW:

CREDIT CARD:



NAME ON ABOVE CARD:

CREDIT CARD BILLING
ADDRESS:

CREDIT CARD NUMBER:

CREDIT CARD ID#:

EXPIRATION DATE:

D/L# OF CARDHOLDER:

SOC. SEC.# OF CARDHOLDER:

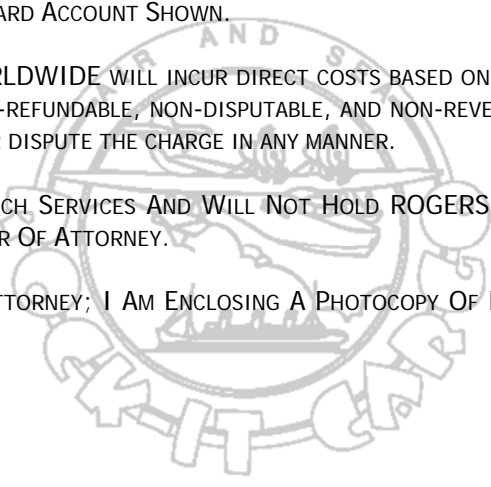
SPECIFIC SERVICES PURCHASED:

I AUTHORIZE ROGERS WORLDWIDE TO DEBIT MY CREDIT CARD SHOWN ABOVE FOR THE PURCHASE OF THE TRANSPORTATION SERVICES WHENEVER ANY OF ROGERS WORLDWIDE PERSONNEL RECEIVES A TELEPHONE CALL, REASONABLY BELIEVED TO BE FROM MYSELF OR SOMEONE ACTING ON MY BEHALF, REQUESTING THAT THEY PROVIDE TRANSPORTATION SERVICES ON MY BEHALF AND CHARGE THOSE SERVICES TO THE CREDIT CARD ACCOUNT SHOWN.

I UNDERSTAND THAT ROGERS WORLDWIDE WILL INCUR DIRECT COSTS BASED ON THIS ORDER AND I UNDERSTAND AND AGREE THAT THE CHARGES SHOWN ABOVE ARE NON-REFUNDABLE, NON-DISPUTABLE, AND NON-REVERSIBLE. ACCORDINGLY, I (WE) ACCEPT THIS CHARGE AND PROMISE NOT TO CHALLENGE OR DISPUTE THE CHARGE IN ANY MANNER.

I AGREE THAT I WILL PAY FOR ALL SUCH SERVICES AND WILL NOT HOLD ROGERS WORLDWIDE RESPONSIBLE FOR ANY OF ACTIONS PURSUANT TO THIS LIMITED POWER OF ATTORNEY.

ATTACHED TO THIS LIMITED POWER OF ATTORNEY; I AM ENCLOSING A PHOTOCOPY OF BOTH FRONT & REAR OF MY CREDIT CARD INCLUDING 1 MORE PICTURE ID



(SIGNATURE)

(CAPACITY)

(DATE)

**ROGERS WORLDWIDE
SHIPPER'S SECURITY ENDORSEMENT**

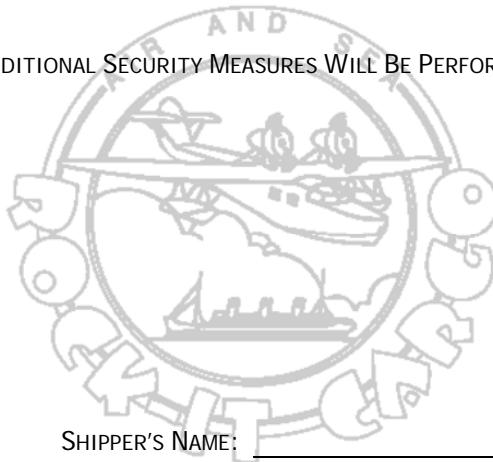
TSA SECURITY REQUIREMENTS

ROGERS WORLDWIDE, A DIV. OF ROCK-IT CARGO USA LLC IS REQUIRED BY THE TSA SECURITY REQUIREMENTS TO PROVIDE YOU WITH THE FOLLOWING NOTIFICATION:

" COPIES OF ALL RELEVANT SHIPPING DOCUMENTS SHOWING THE CARGO'S CONSIGNEE, CONSIGNOR, DESCRIPTION AND OTHER RELEVANT DATA WILL BE RETAINED ON FILE UNTIL THE CARGO / SHIPMENT IS DELIVERED. "

ROGERS WORLDWIDE, A DIV. OF ROCK-IT CARGO USA, LLC IS REQUIRED TO ACCEPT SHIPMENTS AT AIRPORT FACILITIES FROM A KNOWN SHIPPER OR THEIR REPRESENTATIVES, OR PICK UP THE SHIPMENT AT THE SHIPPER'S PREMISES AND TRANSPORT IT IN A LOCKED AND MONITORED VEHICLE.

IF THESE CONDITIONS CANNOT BE MET, ADDITIONAL SECURITY MEASURES WILL BE PERFORMED.



SHIPPER'S NAME: _____

NAME OF PERSON FROM WHOM THE SHIPMENT WAS ACCEPTED: _____
(IF DIFFERENT FROM THE SHIPPER)

I CERTIFY THAT THIS SHIPMENT DOES NOT CONTAIN ANY UNAUTHORIZED EXPLOSIVES, DESTRUCTIVE DEVICES OR HAZARDOUS MATERIALS

I CONSENT TO A SEARCH OF ANY SHIPMENT.

I AM AWARE THAT THIS ENDORSEMENT AND ORIGINAL SIGNATURE, ALONG WITH OTHER SHIPPING DOCUMENTS, WILL BE RETAINED ON FILE UNTIL THE SHIPMENT IS DELIVERED.

(DATE)

(SHIPPER'S SIGNATURE)

THIS SECTION TO BE COMPLETED BY ROGERS WORLDWIDE PERSONNEL ONLY:

KNOWN SHIPPER: TSA KS# _____

UNKNOWN SHIPPER

Exhibit A- Shipper's Itinerary

This agreement is between Rogers Worldwide, a Div. of Rock-It Cargo and _____ and is for the purposes of arranging airfreight and related services, as specified below.

Date	From	To	Costs (USD)
			Per Tariff
			Per Tariff
			Per Tariff

CLIENT

CARRIER To be confirmed

COMMODITY