



Carrier Quick Pay Authorization Form

Please complete the following form to sign up for Quick Pay with Con-way Multimodal Inc.. Upon completion, your company will be eligible for this feature upon load request.

Program Details:

- Immediate Pay: a 3% fee will be deducted from the total agreed upon payment for the shipment. This option may require up to 48 hours for processing depending on the method in which you choose to receive compensation. Requests received after 5:00 p.m. eastern time will be processed the following day.
- Seven Day Pay: a 2% fee will be deducted from the total agreed upon payment for the shipment. Paper checks will be mailed within seven days of receiving required paperwork.
- Required Paperwork: the following must be received in order to be eligible for quick pay.
 - Carrier Quick Pay Authorization form
 - Signed carrier load agreement
 - Signed and clear bill of lading
 - Other load paperwork such as weigh tickets, and lumper fees

Payment Method (select one)

Comcheck

Eligible Recipient(s) Name: _____

Phone Number: _____

EFT Please complete the attached form and return with your authorization. Allow seven days for initial bank set up. All standard payments, and quick pay payments processed going forward will be paid via EFT.

Paper check

Company Name: _____

Address: _____

City, State, Zip: _____

Please sign below as indication that you understand and accept the terms of the Quick Pay program as outlined above.

Company Name: _____

Authorized Signature: _____

Printed Name: _____

Date: _____



Check One: () New () Change () Stop

Electronic Payment Trading Partner Enrollment Form

Complete this form and fax to Accounts Payable: 734-998-4221 For Questions/Inquiries: Phone: (800) 763-2222 Option 3404

For customers with multiple payment addresses: Complete a separate signed enrollment form for each address to ensure proper remittance of your payments.

Your Company Name

Name: _____

Address: _____

City: _____

State, Zip: _____

Financial Person to Contact: _____

Telephone: _____ Email: _____

Remittance Advice Preference (Choose one only):

EDI Contact: _____
Telephone: _____

OR:
 Email

OR:
 Fax

OR:
 Paper

Your Financial Institution

Name: _____

Branch Name: _____

City, State, Zip: _____

Person to Contact: _____

Telephone: _____

Bank Transit Routing:

Account #: _____

Name on the Account: _____

Type of Account: Checking Savings

I have read and agree to the "Terms and Conditions for Electronic Payment" with Con-way, Inc.

Signature: _____

Date

Title: _____

Our electronic payment to your bank will not include electronic transmission of remittance data without EDI.

Con-way Inc.

Terms and Conditions for Electronic Payment

Your company agrees to accept payment by Con-way Inc. (Con-way) through electronic funds transfer and that we can rely exclusively on the information supplied on the enrollment form. This applies to and amends all previous electronic funds transfer agreements with Con-way by incorporating the following terms and conditions.

Con-way will initiate payment to you based on the following:

1. The electronic funds transfer will be made to the financial institution and account number on the Enrollment Form.
2. Any change in the information initially provided must be communicated to Con-way by an authorized representative of your Company in writing in time to allow for Con-way to respond to the change. Con-way will be considered harmless for any loss which may arise solely by reason of error, mistake or fraud regarding this information.
3. Payment is initiated within the normal terms of our commercial agreement with you. Our EFT terms and conditions neither enlarges nor diminishes the respective rights and obligations of us within any applicable commercial agreement. The payment due date is not affected. Con-way will consider payment made when your financial institution has received or has control of the payment transaction. This settlement date generally occurs within three (3) banking days following the initiation by Con-way.
4. If Con-way initiates payment on a non-banking day at Con-way originating, the funds transfer will occur on the following banking day. In all cases, Banking Day is defined as the day on which both trading partner's banks will be available to transmit and receive these funds transfers.
5. Con-way will adhere to all NACHA rules regarding payments that are found to be duplicate, in excess of requirements, fraudulent or in error.
6. Con-way is responsible for making all payments within this Agreement. Con-way is responsible up to the point where your financial institution receives or has control of the transaction. Any loss of data at that point will be borne by the receiving company unless the loss is solely due to negligence by Con-way or its originating bank.
7. Con-way should be notified immediately if payment is not received as described in Item 3 (above). Con-way shall have a reasonable time (not to exceed ten business days) to make said payment.
8. Electronic Funds Transfers can be terminated by either party providing that notification is in writing, and both parties agree on the termination date. Otherwise, Con-way will continue to make electronic payments to your Company as specified.

Written notice will be sent to the address provided on the Enrollment form.

Company Name: _____

Name (print): _____ Signature: _____

Title: _____ Date: _____