

AUTOMATIC PAYMENT AUTHORIZATION

THE JERRY BROWN CO., INC.
P.O. BOX 41390
EUGENE, OR 97404

JERRY BROWN USE ONLY	
Account #	_____
By:	_____

ACCOUNT NAME _____

PHONE(_____) _____

METHOD OF NOTIFICATION: EMAIL Email address: _____

FAX Fax number: (_____) _____

MAIL Mailing address: _____

City _____ State _____ Zip _____

BANK ACCOUNT INFORMATION

BANK NAME _____

BANK ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME ON BANK ACCOUNT _____

ROUTING NUMBER _____ ACCOUNT NUMBER _____

ACCOUNT TYPE: CHECKING SAVINGS

I authorize The Jerry Brown Company to automatically draft my account on or after the due dates outlines in the terms and conditions of my account until further written notice from me.

AUTHORIZED SIGNATURE _____ DATE _____
(must be signer on bank account)

PRINTED NAME _____ TITLE _____