



BRASSELER
USA®

AUTOPAY ENROLLMENT FORM

PLEASE NOTE: By completing, signing, and submitting this form (including by facsimile or other electronic means), you are acknowledging that Brasseler USA is authorized, on a monthly basis, to automatically debit the checking account number or credit card number you have provided for the total amount of all designated purchases billed to the Brasseler USA account number noted below.

CUSTOMER INFORMATION

NAME OF CUSTOMER:

NAME OF RESPONSIBLE PARTY ACTING ON AUTHORIZATION:

BRASSELER USA ACCOUNT #:

CONTACT EMAIL ADDRESS (FOR RECEIPTS):

CONTACT PHONE #:

CREDIT CARD INFORMATION

TYPE OF CARD:

VISA/MASTERCARD

AMERICAN EXPRESS

DISCOVER

NAME ON CREDIT CARD:

LAST FOUR DIGITS OF CREDIT CARD #: XXXX XXXX XXXX _ _ _ _

EXPIRATION DATE:

BILLING ZIP CODE:

CREDIT CARD BILLING ADDRESS:

Address Line 1

Address Line 2

City

State

Zip code

AGREEMENT

The terms and conditions, as set forth by Brasseler USA, are understood as follows:

I hereby authorize Brasseler USA and the issuer of the credit card referred to above, to debit the credit card I have provided above for the total outstanding amount of all designated purchases billed to the Brasseler USA account number listed above.

AUTHORIZED SIGNATURE

SIGN HERE ➡

NAME (PRINTED):

TITLE:

DATE:

PLEASE EMAIL OR FAX COMPLETED FORM TO:

Credit Department
Credit@BrasselerUSA.com or 912.921.7565 (FAX)
Need additional information? Please contact the Credit Department at 800.841.4522, Option 2