

## New FS Bill Payment Application using pay.gov form application.

1. Always come to <http://www.fs.fed.us/billpay> to access new FS Bill Payment Application.
2. Follow the instructions to pay your bill on-line using new FS Bill Payment.

Pay.gov<sup>®</sup> Log in | Register

Find Forms, Agencies...   **MAKE A PAYMENT** **FIND AN AGENCY** **ONLINE HELP**

### FS Bill Payment

Before You Begin **1 Complete Agency Form** 2 Enter Payment Info 3 Review & Submit 4 Confirmation


Online bill payment form for the USDA Forest Service.

**Paying online with Pay.gov is safe, secure, and the preferred method to make a payment.** To make a payment using one of the below accepted payment methods, please click the Continue to the Form button.

**Accepted Payment Methods:**

- ▶ Bank account (ACH)
- ▶ Debit or credit card


[Cancel](#)

**Click Here**  


This is a secure service provided by United States Department of the Treasury. The information you will enter will remain private. [Please review our privacy policy](#) for more information.

#### Need Help?

**FS Bill Payments**




**Contact:** the Albuquerque Service Center  
**Phone:** (877) 372-7248

**WARNING WARNING WARNING**

You have accessed a United States Government computer. Unauthorized use of this computer is a violation of federal law and may subject you to civil and criminal penalties. This computer and the automated systems which run on it are monitored. Individuals are not guaranteed privacy while using government computers and should, therefore, not expect it. Communications made using this system may be disclosed as allowed by federal law.

Note: This system may contain Sensitive But Unclassified (SBU) data that requires specific data privacy handling.

Contact Us | Notices & Agreements | Accessibility Policy | Privacy & Security Policy | For Agencies | \* 

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Need Help?

[Expand](#)

Enter Info



#### U.S. Forest Service Bill Payment

\* Required Fields

\* First Name:  \* Last Name:

\* Address Line 1:

Address Line 2:

\* Country:  \* City:

\* State/Province:  \* Zip/Postal Code:

Email:

Note: Please enter the bill number exactly as it appears on the billing statement, or your bill will not be credited. Use all alpha-numeric characters displayed. (Example: BD12345678900)

\* Bill Number:

\* Re-enter Bill Number:

\* Payment Amount:

PAYER INDICATE	
AMOUNT ENCLOSED:	
NET AMOUNT DUE :	\$ 410.00
DUE DATE:	09/03/14
FMMI BILL NUMBER :	1801409999
CUSTOMER NUMBER :	3159999

NOTICE:

Treasury has mandated that the new maximum daily limit for each credit card transaction is \$24,999.99. For payments greater than this amount, you must pay with an electronic check or debit card.

PDF Preview

Continue



Click here

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#### Payment Information

Payment Amount: \$1.00

\* I want to pay with my:

Bank account (ACH)

Debit or credit card

Previous

Return to Form

Cancel

Select payment choice

then click



Next

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Please provide the payment information below. Required fields are marked with an \*.

\* **Payment Amount:**

\* **Cardholder Name**


\* **Cardholder Billing Address:**

**Billing Address 2:**

**City:**

**Country**

\* **State/Province**      \* **ZIP/Postal Code**  
     

\* **Card Type:**  
      

\* **Card Number:**  
  
**Invalid credit card account number.**

\* **Expiration Date:**  
     

\* **Security Code:**  
  
[What's this?](#)

**Reference Type**  
1802375758

**Reference ID**  
1802375758

[Previous](#)   [Return to Form](#)   [Cancel](#)

[Review and Submit Payment](#)

review and make change

Enter Credit Card info

then click here

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Please review the payment information below. Required fields are marked with an \*

### Payment Information

Payment Type: Debit or credit card

Payment Amount: \$1.00

Reference\_Type: 1802375758

Reference\_ID: 1802375758

### Account Information

Cardholder Name: Daniel Cha

Cardholder Billing Address: [REDACTED]

Billing Address 2:

City: [REDACTED]

Country: United States

State/Province: [REDACTED]

ZIP/Postal Code: [REDACTED]

Card Type: Visa

Card Number: [REDACTED]

I would like to receive an email confirmation of this transaction.

\* Enter Email Address:

dcha@fs.fed.us

\* Confirm Email Address:

dcha@fs.fed.us

CC:

Additional Email Address:

You may enter multiple email addresses in this field. Separate email addresses with a comma.

\*  I authorize a charge to my card account for the above amount in accordance with my card issuer agreement.

Previous

Return to Form

Cancel

Submit Payment

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Review

Click to authorize

then click

For your security, we recommend you close your browser when you complete your payment.

## Payment Confirmation - FS Bill Payment

Before You Begin > 1 Complete Agency Form > 2 Enter Payment Info > 3 Review & Submit > 4 Confirmation

### Payment Confirmation

#### Your payment is complete

Pay.gov Tracking ID: 25U05H8D  
Agency Tracking ID: 75095006011  
Form Name: FS Bill Payment  
Application Name: FS Bill Payments

#### Payment Information

Payment Type: Debit or credit card  
Payment Amount: \$1.00  
Transaction Date: 09/19/2016 11:41:10 PM EDT  
Payment Date: 09/19/2016  
Reference Type: 1802375758  
Reference ID: 1802375758

#### Account Information

Cardholder Name: Daniel Cha  
Card Type: Visa  
Card Number: \*\*\*\*\*

#### Email Confirmation Receipt

Confirmation Receipts have been emailed to:  
dcha@fs.fed.us

[Print Receipt](#)

**Click here to  
print receipt**

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#### Register today!

or

Please consider registering for a Pay.gov account. With a Pay.gov account you can manage payments and view history.