



United States Department of Agriculture
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

Customer Electronic Payment Form

If you would like to schedule a recurring payment you must first register as a Pay.gov user. Please return to Pay.gov's home page and click on "Click here to register" before filling out the form.

**Required Field*

*Customer Name:

*Street Address:

Street Address 2:

*City:

*Country:

Zip/Postal Code:

Email Address:

*Point of Contact First Name:

Point of Contact Middle Initial:

*Point of Contact Last Name:

*Point of Contact Phone Number: Ext:

Please notate a Payment Reference for each individual debt you wish to pay. You may pay up to five Accounts or Bills

*Service Provided by:

Please note: For Assistance or to submit an address change, please email: abshelpline@aphis.usda.gov

Total Amount Calculated: \$