Use **only** for overcharge payments.
Make IFF payments through SRP: https://srp.fas.gsa.gov/

Multiple Award Schedule (MAS)
Pay.gov GSA Kansas City FAS Form Instructions

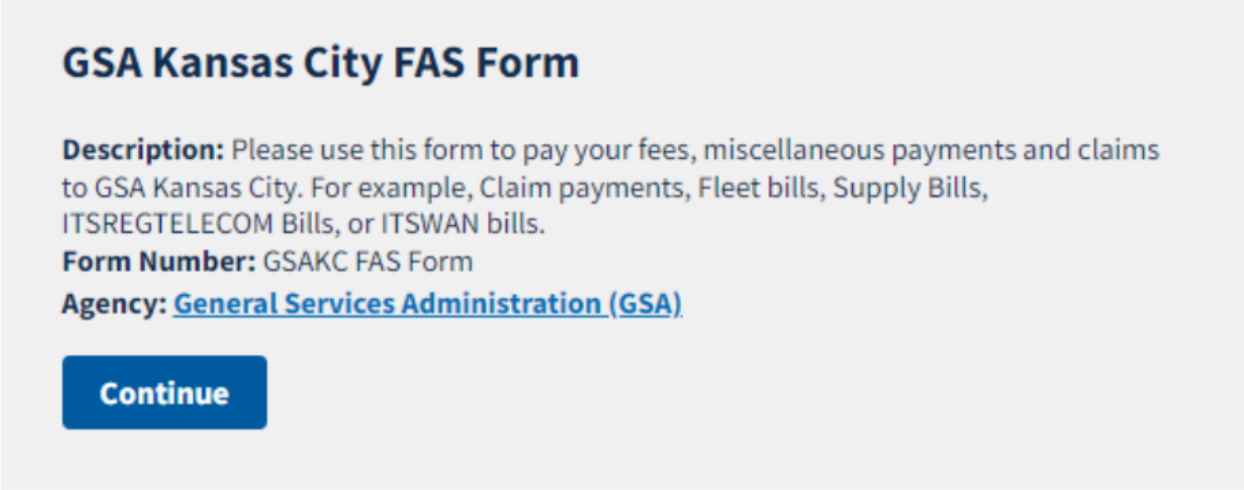
Payments
- Overcharge/Overage Payment
- Claim Payment

Payment Limits
- Each ACH payment must be ≤ $25,000.00.
- Each Credit card payment must be ≥ $5.01 and ≤ $24,999.99.
- Each PayPal payment must be ≤ $10,000.00.
- Each Venmo payment must be ≤ $10,000.00.

Add the Following Comments to the Payment
- If overcharge/overage payment:
  - *Overcharge for MAS contract* [Formal Contract Number]
- If claim payment:
  - *Claim No.* [Claim Number]
- Name of the Business

1. Go to: <https://www.pay.gov/public/home.>
2. Enter: **"GSA"** and choose **.**

3. Choose: **"GSA Kansas City FAS Form"**



4. Choose **"Continue to the Form"**

5. Complete the **GSA Kansas City FAS Form** with the payer's billing address.
   Note: The payer's information will transfer to the appropriate payment form whether it is for a credit card or another type of payment.
   a. Choose **"NON_FEDERAL."**
   b. Enter Statement Number as: **"MAS O/C"**
   c. Choose **"CONTINUE."**

GSA Kansas City FAS Form

GSA Finance Federal Acquisition Services Credit Card Form

GSA Finance Federal Acquisition Services Credit Card Form

Help Text

Date Charged *

02/05/2026

FED_NON *

- ○ FEDERAL
- ◉ NON-FEDERAL

CARDHOLDER NAME (as it appears on the card)

Agency/Company Name *

COMPANY NAME/Payer's Name

First Name *

Name

M.I.

Last Name *

Name

Street Address *

2300 Main Street, 2NW

City *

Kansas City

State *

Missouri

Zip Code *

64108

Cardholder Phone Number *

(800) 676-3600

Cardholder E-Mail Address

kc-cashreceipts@gsa.gov

Payment Information *

- ○ Claim
- ○ General Billings
- ◉ Other

Statement or Claim Number *

MAS O/C

Total Amount of Payment *

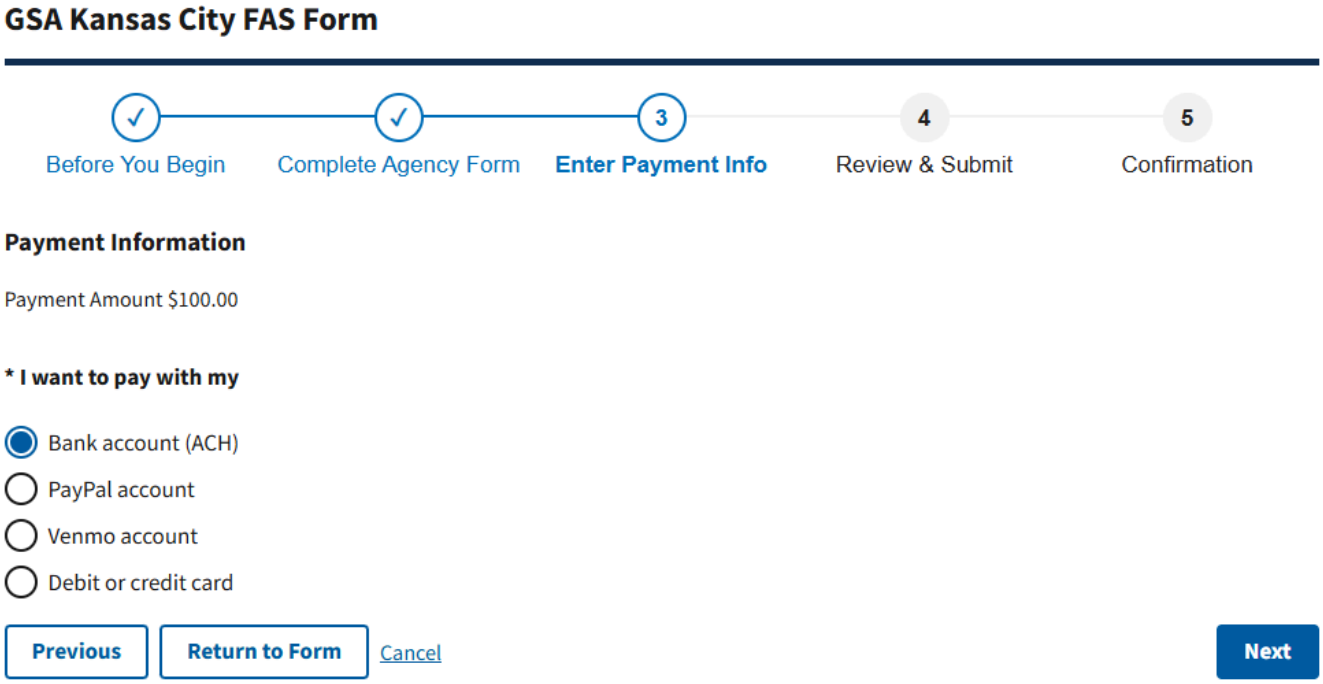
$100.00

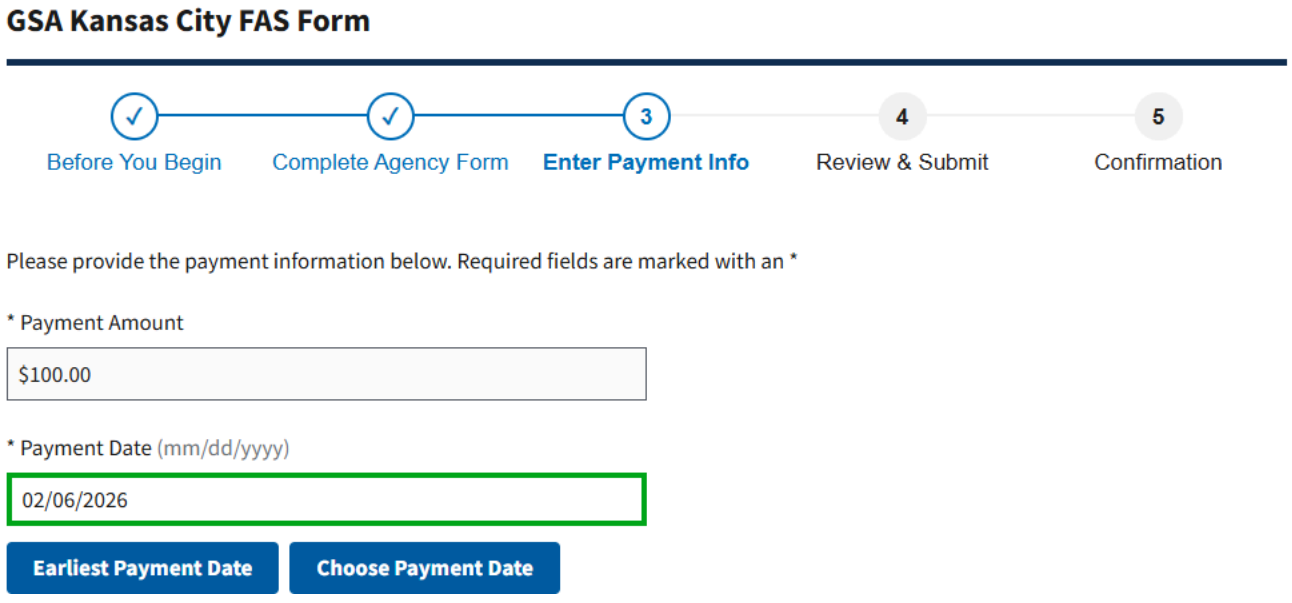
Comments

ENTER:
OVERCHARGE FOR MAS CONTRACT (ENTER FORMAL MAS CONTRACT NUMBER)
ENTITY OR COMPANY NAME

Continue View PDF

6. Choose **"Bank account ACH"** and follow the prompts.





* Account Holder Name

NAME NAME

* Select Account Type

Select ...

* Routing Number

* Account Number

* Confirm Account Number

Invoice Number
MAS O/C

Memo
ENTER: OVERCHARGE FOR MAS CONTRACT (ENTER FORMAL MAS CONTRACT NUMBER) ENTITY OR COMPANY NAME

Business Line
AASITS

Payment Type
Other

Previous | Return to Form | Cancel | Review and Submit Payment

7. Choose **"PayPal account"** and PayPal. Then follow the prompts.

GSA Kansas City FAS Form

✓ Before You Begin — ✓ Complete Agency Form — 3 Enter Payment Info — 4 Review & Submit — 5 Confirmation

Payment Information

Payment Amount $100.00

*** I want to pay with my**

- ○ Bank account (ACH)
- ◉ PayPal account *
- ○ Venmo account
- ○ Debit or credit card

PayPal

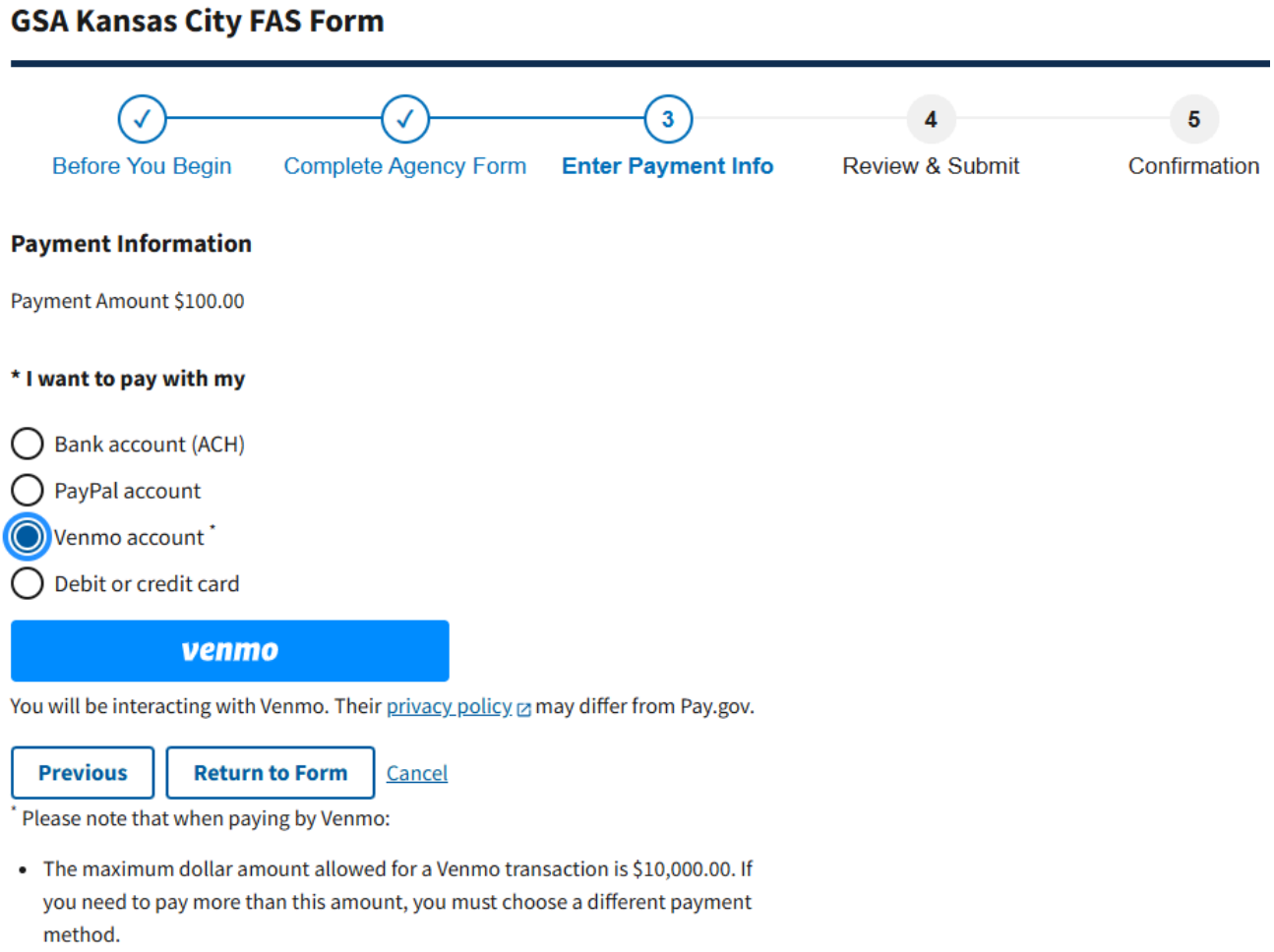
You will be interacting with PayPal. Their privacy policy may differ from Pay.gov.

Previous | Return to Form | Cancel

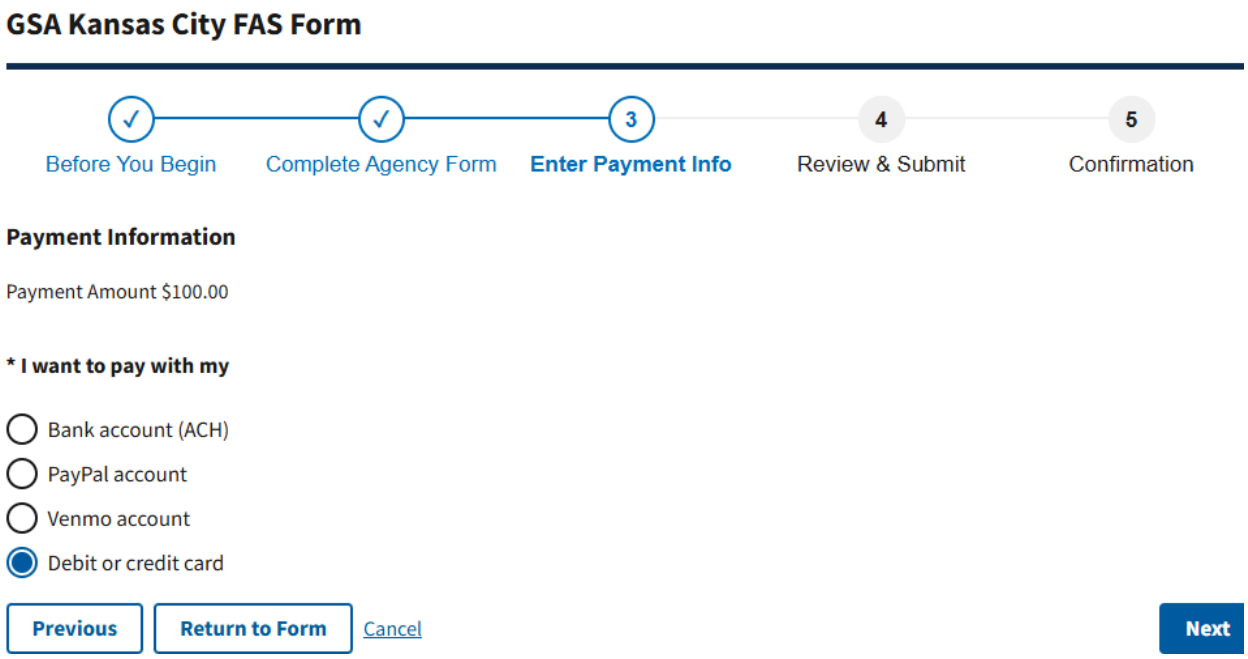
* Please note that when paying by PayPal:

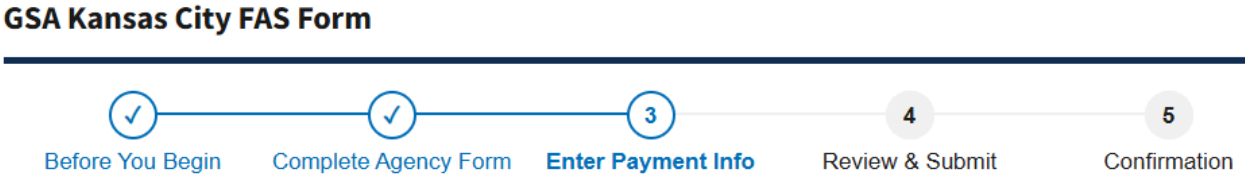
- The maximum dollar amount allowed for a PayPal transaction is $10,000.00. If you need to pay more than this amount, you must choose a different payment method.

8. Choose **"Venmo account"** and choose venmo. Then follow the prompts.



9. Choose “Debit or Credit Card.” Then follow the prompts.





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

* Payment Amount

$100.00

* Cardholder Name

Name Name

* Cardholder Billing Address

2300 Main Street, 2NW

Billing Address 2

City

Kansas City

* Country

United States

* State/Province

Missouri

* ZIP/Postal Code

64108

* Card Number

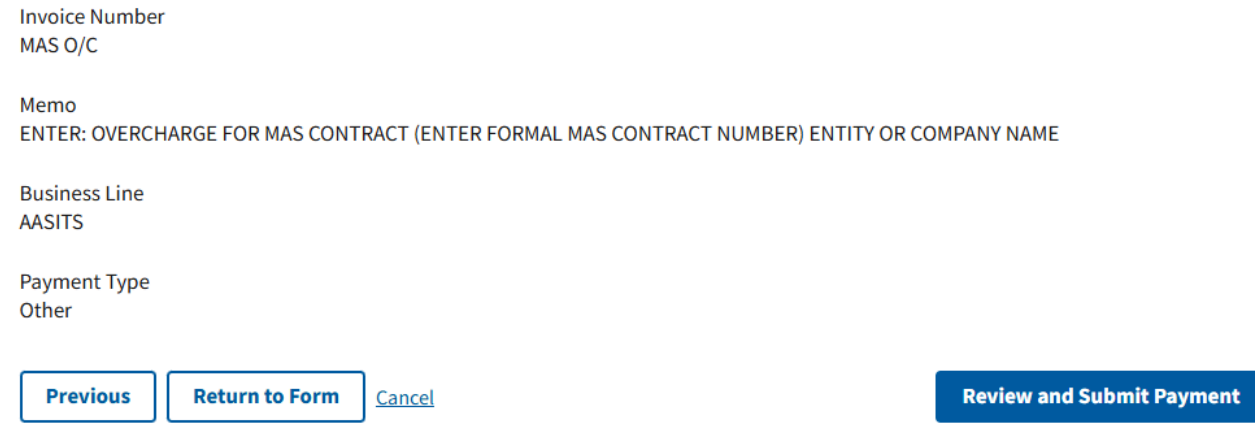
* Expiration Date

Select ...

Select ...

* Security Code

What's this?



10. Review and Submit.

- **a.** Choose **"Review and Submit Payment."**
- **b.** Review the payment information entered.
- **c.** Enter your email address.
- **d.** Choose **"Process Payment."**

11. Receipt.

Once the payment has been processed, a Pay.gov I.D. number will be generated and a receipt will be emailed to you. Write down the Pay.gov I.D. number to reference your payment. Also, keep a copy of the Pay.gov receipt for proof of payment.

12. Refund or Inquiries.

If this payment was processed in error, **call 1-800-624-1373**, within 24 hours of processing the payment. After 24 hours, contact, <**kc-cashreceipts@gsa.gov**.>