**ATTENTION:** General Services Administration

Customers and Debtors

   

For your convenience, the General Services Administration will now accept American Express, Discover, Master Card, and VISA for settlement of outstanding claims and debts.

To pay for the Real Property Utilization and Disposal Training Class, conducted by GSA’s Office of Real Property Utilization and Disposal, with a Federal government GSA SmartPay Purchase Card, **please fill in the yellow highlighted boxes on this form and return to** **gary.jordon@gsa.gov**. The credit card amount cannot be billed until the attendee completes the class. Once the card is billed, a receipt will be generated and sent to the card holder.

If you need assistance, please call Gary Jordon on (202) 841-6995, or email at gary.jordon@gsa.gov

Class Location and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attendee(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RECEIPT

# CREDIT CARD COLLECTION CLAIMS AND DEBTS - REGION 6

**PRIVACY ACT NOTICE:**

Information provided in connection with payment by credit card will be used solely to effect payment through the appropriate banking or other financial institutions.

I HEREBY AUTHORIZE GENERAL SERVICES ADMINISTRATION TO CHARGE MY CREDIT CARD FOR THE AMOUNT SHOWN ON MY CLAIM NUMBER UPON RECEIPT OF THIS MEMO.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLAIM NUMBER/BILL NUMBER/PROJECT NUMBER** | **AMOUNT**$ | **BUSINESS LINE****RPUDD** | **PAYMENT TYPE****OTHER** | **AGENCY NAME** |

# CARDHOLDER INFORMATION

|  |  |  |
| --- | --- | --- |
| CREDIT CARD | CREDIT CARD NUMBER | EXPIRATION DATE OF CARD |
| AMERICAN EXPRESS |  |  |
| DISCOVER |  |  |
| MASTERCARD |  |  |
| VISA |  |  |
| PRINT CARD HOLDER'S NAME AS IT APPEARS ON THE CREDIT CARD | TELEPHONE NUMBER |
| AUTHORIZED SIGNATUREBY PHONE | DATE |

|  |  |
| --- | --- |
| CARDHOLDER’S BILLING ADDRESS | CARDHOLDER’S EMAIL ADDRESS |

**GENERAL SERVICES ADMINISTRATION GSA 3602B-PD**