United States Bankruptcy Court for the District of Columbia



Pay.gov Online Payment Form Instructions for Pro Se Debtors Related to Bankruptcy Cases

New: September 2024

Table of Contents

About online payments through Pay.gov	3
Debit card payment instructions	4
ACH payment instructions	10
PayPal payment instructions	15

The United States Bankruptcy Court for the District of Columbia uses Form payments offered through Pay.gov, a program of the U.S. Department of the Treasury, Bureau of the Fiscal Service. Pay.gov allows individuals who are not registered CM/ECF filers to submit payments to the Court electronically by means of debit card, ACH (electronic payment from a bank account), or PayPal. Registered CM/ECF filers must continue to submit payments through the ECF system.

Current link to filing fees below:

Filing fees

Please contact the clerk's office at (202) 354-3150 to verify the fee amount before the payment is made. Please have your case number ready.

Debit Card Instructions

[Note: Credit cards are not accepted; only debit cards are accepted.]

To begin the payment, click here.

1. Once you click the link to begin, you will be brought to the information page. Click **"Continue to the Form"** when you are ready to begin.

DCB Online Paym	ent Form			
(1)	2	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
About this form				
Use this form to pay filing fe	es and installment payments fo	or the U.S. Bankruptcy Court,	, District of Columbia.	
Accepted Payment Method	ls:			
Bank account (ACH)				
PayPal account				
Debit card				
Preview Form Canc	el			Continue to the Form
This is a secure service prov	ided by United States Departme	ent of the Treasury. The infor	rmation you will enter will re	emain private. <u>Please review</u>
our privacy policy for more i	information.			
We're here to help!				+

2. The information with an asterisk (*) is required to complete the payment. Please **input the Case information**. Then enter **the Payer/ Requester information**. If you are the debtor in the case and are making the payment with your debit card, enter your information in both sections. In the **Payment Information** field, select at least one of the options. Then click **"Continue"**. If you need help determining the total payment, contact the Clerk's Office at **(202) 354-3150**.

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s form may be used for		
ase call the clerk's offic	payments to the U.S. Bankrupt	tcy Court for the District of Columbia onl
ase can the clerk's one	e at (202) 354-3150 to verify fee	es before making any payments.
equired Field		
Case Information		
ase information		
Case Number *		
(Numbers Only XX XX		
(Numbers Only AA-AA.	((()))	
Debtor Name *	rmation	
Debtor Name *	rmation	
Debtor Name *	rmation Middle Initial	Last Name *
Debtor Name *	rmation Middle Initial	Last Name *
Debtor Name *	Middle Initial	Last Name *
Debtor Name * Payer / Requester Info First Name * Address 1 *	mation Middle Initial	Last Name *
Debtor Name *	Middle Initial	Last Name *
Debtor Name *	Middle Initial	Last Name *
Debtor Name *	mation Middle Initial	Last Name *
Debtor Name *	Middle Initial	Last Name *

Payment Information
Filing Fee Installment Chapter 7 - \$338.00
Indicate Filing Fee Chapter 7 Amount *
\$85.00
Filing Fee Installment Chapter 13 [Not Chapter 13 Plan Payment] - \$313.00
Filing Fee Installment Chapter 11 - \$1,738.00
Adversary Proceeding - \$350.00
Amended Schedules D, E and F - \$34.00
Appeal - \$298.00
Debtor's Motion to Convert Chapter 13 Case to Chapter 7 Case - \$25.00
Debtor's Motion to Reopen Chapter 7 Case - \$260.00
Debtor's Motion to Reopen Chapter 13 Case - \$235.00
Total Cost *
\$85.00
Continue View PDF

3. You are brought to the payment information screen. Select **"Debit card"** from the options below and click **"Next"**.

Ø—	(/)	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
Payment Information				
Payment Amount \$85.00				
* I want to pay with my				
Bank account (ACH)				
PayPal account				
O Debit card				
Previous Return	to Form Cancel			Next

4. Now, enter **the billing information** in the required fields. Once finished, click **"Review and Submit Payment"** (see next page).

CB Online Paym	ent Form			
(1)	(⁄)	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
lease provide the payme	ent information below. Require	ed fields are marked with ar	1*	
Payment Amount				
\$85.00				
Cardholder Name				
John Smith				
Cardholder Billing Addr	ess			
illing Address 2				
ity				
Washington				
Country				
United States		0		
State/Province				
Dictrict Of Columbia		^		

20001				
* Card Number				
MasterCard VISA				
We Accept Debit Only Debit cards accept	pted			
• Expiration Date				•
01 - January	0	Select		0
* Security Code				
What's this?				
Case Number				
11-12345				
Debtor Name				
John Smith				
Requestor Name				
John Smith				
Requestor Address	schington	DC 20001		
1234 Example Street, Wa	ishington,	DC, 20001		
Requestor Email example@example.com				
(123) 123-4567				
acted Ontion				
pter 7 Installment - \$85.00				
acted Fee				
cueu ree				
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* 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		

ACH Instructions

Another acceptable form of payment is ACH payment, which is an electronic draft through your bank. For this type of payment, you must have your bank's routing information as well as your account number. Pay close attention and double check all information you enter when using ACH payments.

NOTE: If we receive a returned item, you will be charged a \$53.00 returned item fee.

To begin the payment, click here.

1. Once you click the link to begin, you will be brought to the information page.

Click "Continue to the Form" when you are ready to begin.

()	2	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
out this form				
e this form to pay filing fe	ees and installment payments fo	or the U.S. Bankruptcy Court,	District of Columbia.	
ccepted Payment Method	ds:			
Bank account (ACH)				
PayPal account				
Debit card				
Preview Form Cane	cel			Continue to the Form
	ided by United States Departm	ent of the Treasure The infer	anation and all onto a filler	main minute. Diance muie
his is a secure service prov	nded by United States Departme	ent of the freasury. The mor	mation you will enter will re-	main private. <u>Please revie</u>
ur privacy policy for more	information.			

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2. The information with an asterisk (*) is required to complete the payment. Please **input the Case information**. Then **enter the Payer/ Requester information**. If you are the debtor in the case and are making the payment by ACH, enter your information in both sections. Then click **"Continue".** If you need help determining the total payment, contact the Clerk's Office at **(202) 354-3150**.

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s form may be used f	or payments to the U.S. Bankruph	tcy Court for the District of Columbia of	only
ase call the Genes of	ice at (202) 354-3 150 to verify to	es before making any payments.	
equirea meia			
Case Information			
Case Number *			
Numbers Only XX-X	VVYV		
(Numbers only see	~~~~)		
Debtor Name *			
Debtor Name *			
Debtor Name *			
Payer / Requester In	formation		
Payer / Requester In First Name *	formation Middle Initial	Last Name *	
Debtor Name * Payer / Requester In First Name *	formation Middle Initial	Last Name *	
Payer / Requester In First Name * Address 1 *	formation Middle Initial	Last Name *	
Payer / Requester In First Name * Address 1 *	formation Middle Initial	Last Name *	
Debtor Name * Payer / Requester In First Name * Address 1 * Address 2	formation Middle Initial	Last Name *	
Payer / Requester In First Name * Address 1 * Address 2	formation Middle Initial	Last Name *	
Debtor Name *	formation Middle Initial	Last Name *	
Debtor Name * Payer / Requester In First Name * Address 1 * Address 2 City *	formation Middle Initial State *	Last Name *	

Payment Information
Filing Fee Installment Chapter 7
Filing Fee Installment Chapter 7 Amount *
\$85.00
Filing Fee Installment Chapter 13 [Not Chapter 13 Plan Payment]
Filing Fee Installment Chapter 11
Adversary Proceeding - \$350.00
Amended Schedules D, E and F - \$34.00
Appeal - \$298.00
Debtor's Motion to Convert Chapter 13 Case to Chapter 7 Case - \$25.00
Debtor's Motion to Reopen Chapter 7 Case - \$260.00
Debtor's Motion to Reopen Chapter 13 Case - \$235.00
Total Cost *
\$85.00
Continue View PDF

3. You are brought to the payment information screen. Select "Bank Account (ACH)"

from the options below and click "Next".

Ø—	()	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
Payment Information	n			
Payment Amount \$85.00				
* I want to pay with my	,			
Bank account (ACH				
PayPal account				
O Debit card				
Previous Retu	rn to Form			Next

DCB Online Paym	ent Form			
	(3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
Please provide the payme	ent information below. Require	ed fields are marked with ar	1 *	
* Payment Amount				
\$85.00				
* Payment Date (mm/dd/) 08/08/2024 Earliest Payment Date * Account Holder Name	yyyy) Choose Payment Date	e		
John Smith				
* Select Account Type				
Select		\$		
Jone 5. Honorek 1940 (Jone Annue 1940) 1940 1940 Anthen LSA Anthen LSA Antheantheantheantheantheantheantheanthea	And a second sec			

* Routing Number	7
* Account Number	
]
* Confirm Account Number	_
Case Number	
11-12345	
Debtor Name	
John Smith	
Requestor Name	
John Smith	
Requestor Address	
1234 Example Street, Washington, DC, 20001	
Requestor Email	
example@example.com	
Requestor Phone	
(123) 123-4567	
Selected Option	
Chapter 7 Installment - \$85.00	
Selected Fee	
Previous Return to Form Cancel	Review and Submit Payment

5. On the next screen, **review all information for accuracy** and submit the payment for processing. You must **click the box to allow Pay.gov to execute the transaction and click submit payment.** Pay.gov will email a receipt to the email address that you listed in part 2.

* I agree to the Pay.gov authorization and disclosure statement				
Previous	Return to Form	Cancel	Submit Payment	

PayPal Instructions

The Court also accepts deposited funds from PayPal accounts. **The option to "Pay Later" that is offered through PayPal will not be accepted.** Only funds that you have deposited into your PayPal account will be allowed.

To begin the payment, click here.

1. Once you click the link to begin, you will be brought to the information page. Click **"Continue to the Form"** when you are ready to begin.

(1)	2	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
bout this form				
Ise this form to pay for filin	g fees for associated bankruptc	y cases in the District of Co	lumbia	
Accepted Payment Method	ls:			
Bank account (ACH)				
PayPal account				
Debit card				
Nith an account you can:				
See the payments you n	nade since you created an accou	int.		
Store payment informat	ion so you don't have to re-ente	er it.		
• Copy a form you already	/ submitted the next time you no	eed to make a payment.		
To take advantage of these button.	e benefits, you can <u>Sign In</u> or <u>C</u>	<u>create an Account</u> . To conti	nue as a guest user, click the	e 'Continue to the Form'
Preview Form Cano	<u>cel</u>			Continue to the Form
This is a secure service prov	ided by United States Departme	ent of the Treasury. The infor	mation you will enter will rem	nain private. <u>Please revie</u>

2. The information with an asterisk (*) is required to complete the payment. Please **input the Case information.** Then enter **the Payer/ Requester information.** If you are the debtor in the case and are making the payment through PayPal, enter your information in both sections. Then click **"Continue".** If you need help determining the total payment, contact the Clerk's Office at **(202) 354-3150**.

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s form may be used to ase call the clerk's offi	ce at (202) 354-3150 to verify fe	cy Court for the <u>District of Columbia on</u> es before making any payments.
equired Field		
oquires r lord		
Case Information		
Case Number *		
(Numbers Only XX-XX	XXX)	
Debtor Name *		
-		
Payer / Requester Inf	ormation	
Payer / Requester Info	ormation Middle Initial	Last Name *
Payer / Requester Info	Middle Initial	Last Name *
Payer / Requester Info First Name *	Middle Initial	Last Name *
Payer / Requester Info First Name *	Middle Initial	Last Name *
Payer / Requester Info First Name *	Middle Initial	Last Name *
Payer / Requester Info First Name *	ormation Middle Initial	Last Name *
Payer / Requester Info First Name * Address 1 *	Middle Initial	Last Name *
Payer / Requester Info First Name * Address 1 * Address 2 City *	Middle Initial	Last Name *
Payer / Requester Inf First Name * Address 1 * Address 2 City *	ormation Middle Initial	Last Name *

-

Payment Information
Filing Fee Installment Chapter 7
Filing Fee Installment Chapter 7 Amount *
\$85.00
Filing Fee Installment Chapter 13 [Not Chapter 13 Plan Payment]
Filing Fee Installment Chapter 11
Adversary Proceeding - \$350.00
Amended Schedules D, E and F - \$34.00
Appeal - \$298.00
Debtor's Motion to Convert Chapter 13 Case to Chapter 7 Case - \$25.00
Debtor's Motion to Reopen Chapter 7 Case - \$260.00
Debtor's Motion to Reopen Chapter 13 Case - \$235.00
Total Cost *
\$85.00
Continue View PDF

3. You are brought to the payment information screen. Select **"PayPal Account"** from the options below and click **"Next".**

 (-) 	(/)	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
Payment Information				
Payment Amount \$85.00				
* I want to pay with my				
Bank account (ACH)				
🔿 PayPal account <	(
O Debit card				
Previous Retur	n to Form			Next

4. Now, you will be shown a prompt that lets you know that you are leaving the official Pay.gov website in order to visit PayPal. Click **"OK".**

You are being redirected to Paypal, a non-government website, that may have different privacy policies than Pay.gov. Click 'OK' to proceed.
OK Cancel

5. Here you will be asked to log in to your PayPal account. **Input your associated email address** and the password then click Log In.

	PayPal
	Pay with PayPal
Wit	h a PayPal account, you're eligible for free return shipping, Purchase Protection, and more.
Emai	il or mobile number
Pass	avord
s	itay logged in for faster purchases
	Log In
	Having trouble logging in?
	Create an Account
Cancel a	nd return to Federal Reserve Bank of Cleveland
nalish	Français Español 中文

6. Once you have logged in, you will be presented with your payment information. **Select your checking account that you wish to make the payment from and select Continue.**



7. Now, you will be brought back to the Pay.gov website to complete the payment. **Review all the information for accuracy** and submit the payment for processing. You must **click the box to allow Pay.gov to execute the transaction and click submit payment.** Pay.gov will email a receipt to the email address that you listed in part 2.

* I authoriz	e this PayPal payment	in the above amount in accordance with my PayPal agreement.	
Previous	Return to Form	Cancel	Submit Payment