



Sign In | Create an Account

Explore More Options Find an Agency Online Help

DOTWCF

Search



Alert Message:

[Coronavirus \(COVID-19\) updates](#)



**The secure way to pay U.S.
Federal Government Agencies**

Department of Veterans Affairs

**Make a VA Medical Care
Copayment**

Small Business Administration

**Make a SBA 1201 Borrower
Payment**

United States Coast Guard

Pay a Merchant Mariner User Fee

Type DOTWCF and select "Search"



Search Results for "DOTWCF"

Forms (1)

Agencies (0)

Sort by: Relevance

Filter by Agency

☐ Transportation
(DOT): OST Working
Capital Fund
Miscellaneous (1)

DOT OST Working Capital Fund Miscellaneous Payments

Description: Please use this form when directed by a Working Capital Fund office representative to make a payment deemed miscellaneous.

Form Number: DOTWCF Miscellaneous

Agency: [Transportation \(DOT\): OST Working Capital Fund Miscellaneous](#)

Continue

We're here to help!



We're Available

Monday - Friday
7 a.m. - 7 p.m.
Eastern

Open



[Send Us A Message](#)

You will hear from us
by the end of the
next
business day.



Call Us Toll Free

Inside U.S.A. only
800-624-1373



**International
Number**

Outside the U.S.A.
+1-216-579-2112

Select continue to access form

Please use this form only if directed by a Federal employee of the U.S. Department of Transportation, Office of the Secretary, Working Capital Fund (WCF). Some payments are for Dockets Copying and Certifying, Vendor payments to WCF for overpayments on purchase orders or rebates, and employee payments for personal phone calls.

*** Required fields are indicated with an asterisk**

*** Individual First Name:** _____

*** Individual Last Name:** _____

Company Name: _____

*** Address Line 1:** _____

Address Line 2: _____

*** City:** _____

*** State:** _____ *** Postal Code:** _____

*** Phone Number:** _____

Mobile Number _____

*** E-mail:** _____

Instructions: If payment is from a vendor, please include information such as purchase order number, invoice number, or other pertinent information which will assist in our identifying the reason for your payment. If "other" is chosen, please write a description of the payment you are making in the text box.

*** Payment Reason:** _____

Other and Vendor Information:

*** Payment Amount:** \$ _____