

**Address to send payment for Billable Vaccine Invoices  
and  
to request copy of an invoice**

**Please send payment to:**

Oregon Dept. of Human Services – OFS  
AR & Receipting Units  
PO Box 4325  
Portland, OR 97208-9992

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**To pay with a credit card go to:**

<https://apps.oregon.gov/ecommerce/dhsoha/eps>

and choose Accounts Receivable

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**To request copy of an invoice:**

Send an email request providing the invoice number (AI000000) needed to:

[OFS.AccountReceivable@dhsoha.state.or.us](mailto:OFS.AccountReceivable@dhsoha.state.or.us)

If you don't know the invoice number contact Shannon McFadden at  
[shannon.m.mcfadden@dhsoha.state.or.us](mailto:shannon.m.mcfadden@dhsoha.state.or.us)