

PMF REIMBURSEMENT PROCESS FOR AGENCIES

BACKGROUND: The Presidential Management Fellows (PMF) Program is a government-wide program providing talented recent graduates (Finalists) to participating Federal agencies. Finalists are appointed as Fellows into a 2-year excepted service appointment under the Pathways Programs Schedule D Hiring Authority. The PMF Program Office is administered by the U.S. Office of Personnel Management (OPM), per Executive Order 13562 of December 27, 2010, and 5 CFR 362.

The Presidential Management Fellows (PMF) is a full cost recovery program and as such when an agency initially appoints a Finalist into a PMF position, the agency must reimburse the PMF Program Office via a one-time placement fee that covers the recruitment, assessment, selection, and placement process costs for Finalists entering into PMF appointments; for PMF Program Officer operations, support and training opportunities for stakeholders (e.g., orientation, PMF Leadership and Development Program (LDP) for Fellows); and, for the PMF website and PMF Talent Management System (TMS). **Reimbursement is due within 30-days after a Finalist has been made and accepted a tentative PMF appointment offer (not after onboarding as a Fellow).** PMFs may not be permitted to participate in PMF Program Office sponsored events (e.g., Orientation, PMF Leadership and Development Program (LDP), and/or Graduation) until the reimbursement is received. A large portion of the PMF Program's expenses are incurred during the annual recruitment cycle (e.g., annual PMF application and assessment process, adjudication process, and the selection of Finalists). It is critical for agencies to reimburse the PMF Program Office timely to cover these expenses.

Federal agencies interested in participating in the Pathways Programs (5 CFR 362), including the PMF Program, must enter into a Memorandum of Understanding (MOU) with the U.S. Office of Personnel Management (OPM). Agencies excepted from the competitive service may participate in the PMF Program under a Memorandum of Agreement (MOA) with the PMF Program Office. A list of agency responsibilities can be found under the "Agencies\Agency Responsibilities" section on the PMF website at <https://www.pmf.gov/agencies/agency-responsibilities/>.

To facilitate the reimbursement to the PMF Program Office, an agency is to initiate an Interagency Agreement (IAA) with OPM by utilizing the FS Forms 7600A and B. These FS forms are the preferred method for establishing an IAA per the U.S. Department of Treasury's Bureau of Fiscal Service (FS), previously referred to as the Financial Management Service (FMS), and are the standard forms to be used government-wide for all reimbursable agreements at the trading partner level. **These instructions are based on the FS Forms 7600A and B dated "May 2019" as provided by the Treasury's Bureau of Fiscal Service; please check the PMF website for any updates.**

The IAA is comprised of two sections:

- (1) The FS Form 7600A serves as the "General Terms and Conditions (GT&C) Section" of the form (establishing the agreement), and
- (2) The FS Form 7600B serves as the "Order Requirements and Funding Information (Order) Section" of the form (the funding document).

NOTE: Treasury's FS has mandated use of G-Invoicing by all Federal agencies by June 30, 2021. G-Invoicing is a web-based application created to efficiently manage intra-governmental buy/sell transactions between Federal agencies. Additional information on G-Invoicing can be found at <https://www.fiscal.treasury.gov/g-invoice/index.html>. OPM has *NOT* implemented G-Invoicing; however, the G-Invoicing versions of the FS Forms are preferred and will be accepted.

If your agency prefers to submit payment via a Government Purchase Credit Card, please contact us by sending an email to pmffee@opm.gov for assistance.

The agency/sub-agency’s program office who initially appointed the Finalist into a PMF position is responsible for initiating the reimbursement to OPM’s PMF Program Office. Once a Finalist is recorded as “appointed” in the PMF Talent Management System (TMS), an automated notification email is sent out to both the Presidential Management Fellow’s supervisor as well as the Agency PMF Coordinator with details of the pending reimbursement requirement. Agency PMF Coordinators can view the financial status of Fellows within the PMF Talent Management System (TMS), including any financial documents and/or financial comments associated to the Fellow’s appointment. Additional guidance may be available by contacting your Agency PMF Coordinator. A current list of Agency PMF Coordinators may be found under the “Agencies\List of Coordinators” section on the PMF website at: <https://apply.pmf.gov/coordinators.aspx>.

In the event of a PMF reappointment (which is a PMF’s transfer or reassignment to another PMF position and/or agency within the first 6 months of the initial appointment), 5 CFR 362.406(d) states the original appointing agency may request reimbursement of one-quarter of the placement fee from the new appointing agency. In such cases, the two agencies may come to an agreement on the terms and payment process. The PMF Program office will not assume responsibility or obligation on any such agreement or terms reached by the agencies. The full PMF reimbursement obligation will be the responsibility of the original appointing agency per the agreement.

If you have multiple PMFs being reimbursed, you can list them on the FS Form 7600B by showing their First and Last Name under Box 36. If you are pre-paying for a number of PMFs (e.g., you either anticipate or in the process of hiring multiple PMFs), state “Multiple PMFs” under Box 36; the IAA would be recorded and treated as a “drawdown” where Agency PMF Coordinators can monitor and apply funds upon recording a PMF appointment in the PMF TMS.

INSTRUCTIONS: The FS Forms 7600 A and B may be found under the “Agencies\Resources” section on the PMF website at <https://www.pmf.gov/agencies/resources/>; which are pre-populated with PMF Program specific information. We encourage agencies to utilize the current version of the forms from the PMF website for every submission, as information on the forms or the forms themselves are subject to change. Agencies who submit incomplete or out of date forms may experience delays in processing and/or may be subject to resubmit a complete and updated version of the forms.

FS Form 7600A Instructions – This is the “General Terms and Conditions (GT&C) Section” for creating an IAA.

1. Please review the FS Form 7600A in its entirety. You may need to consult with your financial office on how to properly complete this form for submission to OPM’s PMF Program Office.
2. The 7600A establishes the legal foundation for the relationship between the requesting and servicing agencies. It identifies the agencies entering into the agreement, the authority permitting the agreement, and the agreement action, period, and type. The 7600A may support multiple 7600Bs (Orders).
3. You may use the table below as a checklist and as a reference when completing the forms.
 - a. The version of the FS Form 7600A, located under the “Agencies\Resources” section on the PMF website (<https://www.pmf.gov/agencies/resources/>), has been pre-populated.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
NEW OR MODIFIED GT&C			
	Header	GT&C Number	Enter your agency’s Interagency Agreement Number (and Modification Number when applicable). GT&C # refers to the “General Terms & Conditions” number, purchase order, or obligating document number that your agency may assign.
		Modification Number	If and when applicable, enter the Modification Number.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
AGENCY INFORMATION			
	1	Agency Identifier (AID)	Enter the requesting Agency Identifier Number (AID); a three-digit Treasury Account Symbol.
		Agency Location Code (ALC)	Enter your agency's eight-digit unique Agency Location Code used to report disbursements and collections to Treasury. An ALC is an identifier for an accounting office within your agency.
		Agency Name	Enter the requesting agency's name. Specific office name can be identified on the FS Form 7600B.
		Agency Address	Enter the requesting agency's mailing address. Specific office addresses can be identified on the FS Form 7600B.
		Cost Center	An organizational filter within G-Invoicing. Enter "N/A" as in Not Applicable.
		Business Unit	An organizational filter within G-Invoicing. You may skip this field.
		Department ID	An organizational filter within G-Invoicing. Enter "N/A" as in Not Applicable.
GT&C INFORMATION			
	2	GT&C Title	May be an Agreement Title or anything to help identify the associated GT&C (e.g., PMF fee for [Class Year] [First and Last Name of Fellow]). If multiple PMFs, state "PMF Fees".
	3	Agency Agreement Tracking Number	An internal tracking number for the GT&C. This number is generated and maintained by each Agency's internal system (e.g., Agreement Number (#), Project Code, or combination of the two).
	4	Agreement Period	Enter the period (e.g., start and end dates) during which the requesting agency expects all Orders (FS Form 7600B's) to be completed by the servicing agency. The IAA becomes effective when both parties have signed. The end date can be up to 5 years.
	5	Termination Days	Termination days agreed by both servicing and requesting agency for termination of the contract/agreement (e.g., the standard is 30 days); leave blank if not applicable.
	6	Agreement Type	Identifies whether this GT&C will support one (Single) Order or more than one (Multiple) Orders.
	7	Advance Payment Indicator	Check "Yes" if advance payments are allowed or check "No" if advances are NOT allowed.
	8	Assisted Acquisition Indicator	For the purpose of reimbursing the PMF Program Office for a PMF appointment, this should be checked as "No".
ESTIMATED AGREEMENT AMOUNT			
	9	Total Direct Cost Amount	Enter the total agreed upon direct cost amount for providing the products and/or services.
		Total Overhead Fees and Charges Amount	Enter the total agreed upon overhead fees and charges for providing the products and/or services above and beyond direct costs.
		Total Estimated Amount	The placement fee for each Finalist appointed as a PMF (from the Class of 2011>) is \$7,000. If this GT&C is covering multiple PMF reimbursements, adjust the "Total Estimated Amount" accordingly.
		Enforce Total Remaining Amount	This is specific to G-Invoicing. Leave blank.
ADDITIONAL AGREEMENT INFORMATION			
	10	Explanation of Overhead Fees and Charges	"N/A", as in Not Applicable.
	11	Requesting Scope	A brief high-level description of the services being acquired by the Requesting Agency. For the PMF Program: "Reimbursement to OPM to cover its costs associated to a PMF appointment."
	12	Requesting Roles	A description of the roles and responsibilities of the requesting agency and expectations. For the PMF Program, a link is inserted to show the requesting agency roles and responsibilities.
	13	Servicing Roles	A description of the roles and responsibilities of the servicing agency and expectations. For the PMF Program, a link is inserted to redirect to the policies, regulations, and resources of the PMF Program.
	14	Restrictions	Enter any restrictions agreed upon by both parties or "N/A", as in Not Applicable.
	15	Assisted Acquisition Small Business Credit Clause	No Action. The form is pre-populated with a standard clause.
	16	Disputes	No Action. The form is pre-populated with a standard clause.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
	17	Requesting Assisted Acquisitions	"N/A", as in Not Applicable, for the purpose of reimbursing the PMF Program Office for a PMF appointment.
	18	Servicing Assisted Acquisitions	"N/A", as in Not Applicable, for the purpose of reimbursing the PMF Program Office for a PMF appointment.
	19	Requesting Clause	Enter additional information or clause as it pertains to the requesting agency, if any.
	20	Servicing Clause	Enter additional information or clause as it pertains to the servicing agency. For the PMF Program, we ask the agency to inform its designated Agency PMF Coordinator of any reimbursement.
CLOSE GT&C			
	21	Closing Date/Comments	Enter closing date and explanation, if applicable, or "N/A", as in Not Applicable.
PREPARER INFORMATION			
	22	Preparer Information	Enter the preparer's name, phone number, and email address of the requesting agency.
AGREEMENT APPROVALS (FOR INITIAL AND FINAL APPROVALS)			
	23	Initial Approvals	Requesting Agency's authorized approver fills out and signs the left-hand side and Servicing Agency's authorized approver fills out and signs the right-hand side. Electronic signatures accepted.
	24	Final Approvals	Requesting Agency's authorized approver fills out and signs the left-hand side and Servicing Agency's authorized approver fills out and signs the right-hand side. Electronic signatures accepted.

4. Once the FS Form 7600A is filled out and signed, the requesting agency is asked to email the form to pmffee@opm.gov. Alternatively, Agency PMF Coordinators have the ability to upload the completed financial forms directly to the PMF's records in the PMF TMS; this is the preferred process.
5. Upon receipt, the PMF Program Office will review for accuracy, assign a tracking number, sign, and provide a copy back to the requesting agency.

FS Form 7600B Instructions – This is the "Order Requirements and Funding Information" (Order) used against the 7600A.

1. Please review the FS Form 7600B in its entirety. You may need to consult with your financial office on how to properly complete this form for submission to OPM's PMF Program Office.
2. The 7600B is the funding source that creates the fiscal obligation when the requesting agency appoints a Finalist to a PMF position. The requesting agency must submit a completed 7600 A and B within 30 days of a Finalist accepting a tentative PMF appointment offer (not after onboarding). A 7600B cannot be submitted without a prior or accompanying 7600A.
3. You may use the table below as a checklist and as a reference when filling out the boxes (as applicable).
 - a. The version of the FS Form 7600B, located under the "Agencies\Resources" section on the PMF website (<https://www.pmf.gov/agencies/resources/>), has been pre-populated.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
NEW OR MODIFIED ORDER			
	1	Order/Modification Number	Enter your agency's unique Order Number, or unique Modification Number, which is added to the end of the Order Number that incrementally increases after each modification.
	2	General Terms & Conditions (GT&C)	Enter the GT&C number that the Order is associated to.
	3	Order Date	Enter the date the order was created as YYYY-MM-DD.
PARTNER INFORMATION			
	4	Assisted Acquisition Indicator	For the purpose of reimbursing the PMF Program Office for a PMF appointment, this should be checked as "No".
	5	Period of Performance	Enter the Start and End Dates; dates must fall within the GT&C Agreement Period.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
	6	Agency Location Code (ALC)	Enter your agency's eight-digit unique Agency Location Code used to report disbursements and collections to Treasury. For the PMF Program Office the code is 24000001.
	7	Agency Name	Enter the requesting agency's name.
	8	Cost Center	An organizational filter within G-Invoicing.
	9	Business Unit	An organizational filter within G-Invoicing.
	10	Department ID	An organizational filter within G-Invoicing.
	11	Order Tracking Number	Additional accounting information used by Federal Agencies for internal tracking (e.g., project code, description, fund, organization code, strategic goal).
	12	Agency Business Partner Network (BPN)	Enter the requesting agency's DUNS# (NOTE: The DUNS# is being phased out and those agencies registered with the System for Award Management (SAM.gov) will be issued a Unique Entity Identifier (UEI) or SAMMI (SAM Managed Identifiers) by December of 2020 to use instead.)
AUTHORITY INFORMATION			
	13	Statutory Authority Fund Type Code	Enter your agency's Statutory Authority Fund. The boxes for "Revolving Fund" have been pre-checked; however, the Requesting Agency's Authority may be changed as appropriate.
	14	Statutory Authority Fund Type Title	Enter your agency's Statutory Authority Fund. The boxes have been pre-populated with "Revolving Fund"; however, the Requesting Agency's Authority may be changed as appropriate.
	15	Statutory Authority Fund Type Citation	Enter your agency's citation. The boxes have been pre-populated with "5 USC 1304(e)"; however, the Requesting Agency's Citation may be changed as appropriate.
	16	Program Authority Title	Enter your agency's Statutory Authority Fund. The boxes have been pre-populated with "Revolving Fund"; however, the Requesting Agency's Authority may be changed as appropriate.
	17	Program Authority Citation	Enter your agency's citation. The boxes have been pre-populated with "5 USC 1304(e)"; however, the Requesting Agency's Citation may be changed as appropriate
ADVANCE INFORMATION			
	18	Advance Revenue Recognition	Only applicable on Advance Payments.
	19	Advance Revenue Recognition Description	Only applicable on Advance Payments. Enter "N/A" as in Not Applicable.
	20	Advance Payment Authority Title	Only applicable on Advance Payments. Enter "N/A" as in Not Applicable.
	21	Advance Payment Authority Citation	Only applicable on Advance Payments. Enter "N/A" as in Not Applicable.
	22	Total Advance Amount	Only applicable on Advance Payments. Leave blank.
DELIVERY INFORMATION			
	23	FOB Point	Delivery Information to be completed by the Requesting Agency. Indicate Source/Origin, or Destination, or Other. For the PMF Program, choose "Source/Origin".
	24	Constructive Receipt Days	Calendar Days required if "Other" was selected on Box# 23 above.
	25	Acceptance Point	Choose from "Source/Origin", "Destination", or "Other". For the PMF Program, choose "Source/Origin".
	26	Place of Acceptance	Enter destination for which the goods or services will be accepted, if applicable.
	27	Inspection Point	Choose from "Source/Origin", "Destination", or "Other". For the PMF Program, choose "Source/Origin".
	28	Place of Inspection	Enter the location at which the goods or services will be inspection, if applicable.
ORDER BILLING (Servicing and Requesting Agencies)			
	29	Billing Frequency	Choose "Other".
	30	Explanation	Enter "One Time"
	31	Priority Order Indicator	Choose "Yes" or "No" if the order a high priority; otherwise, select "No".

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
	32	Capital Planning & Investment Control	Only applicable for major IT Investments; otherwise, select "No".
LINE ITEMS (additional lines may be added by using the "+" button after Box 93)			
	33	Line Number	Indicate the Line Number (e.g., enter "1"), additional lines may be added after Box 93.
	34	Order Line Status	Indicate if Order is "Active" or "Cancelled"; for PMF Program, "Active" is pre-populated.
	35	Item Code	Not applicable for PMF Program; otherwise, leave blank.
	36	Item Description	<i>This is where the agency would list the PMF's (by first and last name) being reimbursed.</i>
	37	Line Costs Unit of Measure (UOM)	Enter the unit of measure for each Order Line (e.g., EA-Each, DOL-USD Dollars, etc.). For the PMF Program, use "EA" for each PMF being reimbursed. This box is pre-populated as "EA".
	38	Unit of Measure (UOM) Description	This box is pre-populated to show the current one-time placement fee of "\$7,000 per each PMF being reimbursed."
	39	Total Line Costs	Enter the sum of the line Costs.
	40	Order Line Advanced	Enter Advanced Amount only if applicable from Boxes 18-22; otherwise, leave blank.
	41	Product Service Identifier	Enter "N/A" as in Not Applicable for the PMF Program.
	42	Capital Asset Indicator	Select "No" since not applicable for the PMF Program.
	43	Unique Item Identifier (UID) Required Indicator	Select "No" since not applicable for the PMF Program.
	44	Type of Service Requirements	Select "Severable" for the PMF Program.
SCHEDULE SUMMARY			
	45	Schedule Number	Not applicable for PMF Program; otherwise, enter "N/A".
	46	Advance Pay Indicator	Indicate "True" if Advance Pay is selected or "False" for all others. Default to "False" for PMF Pgm.
	47	Cancel Status (schedule)	Select "Active" or "Cancelled". Default to "Active" for PMF Program.
	48	Schedule Unit Cost/Price	Enter the price of each unit. For the PMF Program, this is defaulted to "\$7,000/PMF".
	49	Order Schedule Quantity	Enter the total number of units (e.g., total number of PMFs being reimbursed).
	50	Order Schedule Amount	Enter the total amount (e.g., Unit Cost x Quantity).
SCHEDULE FUNDING INFORMATION			
	51	Agency Treasury Account Symbol (TAS)	Enter the requesting agency's funding information (fund symbol). NOTE: The PMF version is pre-populated with the OPM\PMF Program Office funding information. Funding information may be different by class\fiscal year. Please check the PMF website for the most current version.
	52	Agency Business Event Type Code (BETC)	BETCs will always be "DISB" for the Requesting Agency and "COLL" for the Servicing Agency.
	53	Agency Business Partner Network (BPN) + 4	Enter the first 4 digits of the Requesting Agency's DUNS #. See previous notes about the use of a DUNS #.
	54	Object Class Code	Enter the first 4 digits of the Object Class number (e.g., "2531").
	55	Additional Accounting Classification	Enter additional accounting information (e.g., FUND, ORG #, Program Code, Strategic Goal, etc.), if applicable. The PMF version has the PMF Program Office's equivalents pre-populated.
	56	Description Products and/or Services	Enough information to describe and support the transaction. <i>For the PMF Program, enter the first and last name of each PMF being reimbursed.</i> The PMF version is pre-populated with general information but may be edited by the Requesting Agency.
SLOA INFORMATION			
	57	Accounting Classification Reference Number	The Requesting Agency may enter additional funding information, if applicable.
	58	Reimbursable Flag	Always select "Yes" for the PMF Program.
	59	Federal Award Identification Number	Enter the Requesting Agency's FAIN, if applicable; otherwise, enter "N/A" as in Not Applicable.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
	60	Unique Record Identifier	Enter the Requesting Agency's URI, if applicable; otherwise, enter "N/A" as in Not Applicable.
	61	Activity Address (AAC)	Not Applicable; leave blank.
	62	Budget Line Item	Not Applicable; leave blank.
	63	Budget Fiscal Year	Enter the Budget Fiscal Year (e.g., "2020").
	64	Agency Security Cooperation (FMS)	Not Applicable; leave blank.
	65	Security Cooperation Implementing Agency Code	Not Applicable; leave blank.
	66	Sub-Allocation	Not Applicable; leave blank.
	67	Accounting Identifier	Not Applicable; leave blank.
	68	Funding Center Identifier	Not Applicable; leave blank.
	69	Cost Center Identifier	Not Applicable; leave blank.
	70	Project Identifier	Not Applicable; leave blank.
	71	Activity Identifier	Not Applicable; leave blank.
	72	Cost Element Code	Not Applicable; leave blank.
	73	Work Order Number	Not Applicable; leave blank.
	74	Agency Functional Area	Not Applicable; leave blank.
	75	Agency Security Cooperation Case Designator	Not Applicable; leave blank.
	76	Parent Award Identifier	Not Applicable; leave blank.
	77	Procurement Instrument Identifier	Enter the unique identifier for each contract, agreement, or order number, if applicable.
SCHEDULE SHIPPING INFORMATION			
	78	Ship to Address Identifier	Enter the mailing address where the service is being performed.
	79	Ship to Agency Title	Name of the Receiving Agency at the ship to location.
	80	Address 1	Shipping Address Line 1
	81	Address 2	Shipping Address Line 2
	82	Address 3	Shipping Address Line 3
	83	Ship to City	City
	84	Ship to Postal Code	Enter the 5-digit ZIP Code
	85	Ship to State	State; defaulted to "District of Columbia" for the PMF version.
	86	Ship to Country Code	Country
	87	Ship to Location Description	Enter the description of the ship to, if applicable.
	88	Delivery/Shipping Information; Special Shipping Information	Enter special shipping information, if applicable.
	89	Delivery/Shipping POC	Enter a Point of Contact (POC) for additional shipping information, if applicable.
	90	Delivery/Shipping Information POC Title	Enter the title of the POC for additional shipping information, if applicable.
	91	Delivery/Shipping Information POC email	Enter the email address of the POC for additional shipping information, if applicable.

<input checked="" type="checkbox"/>	Box #:	Field Name:	Instructions:
	92	Delivery/Shipping Information POC Phone#	Enter the phone number of the POC for additional shipping information, if applicable.
	93	Agency Additional Information	Enter any additional information not covered in the above boxes, if applicable.
AGENCY POINT OF CONTACTS (POC)			
	94	Agency Point of Contact	Enter the Requesting Agency's point of contact information (e.g., name, email, and phone numbers). The Service Agency's information is pre-populated on the PMF version.
AGREEMENT APPROVALS – NOTE: Electronic signatures are preferred.			
	95	Funding Official – Information & Signature	Enter the Requesting Agency's Funding Official's information (e.g., name, title, email, and phone numbers) and signature. The Servicing Agency's information is pre-populated on the PMF version.
PROGRAM OFFICIAL – NOTE: Electronic signatures are preferred.			
	96	Program Official – Information & Signature	Enter the Requesting agency's Program Official's information (name, title, email, and phone number) and signature. The Servicing Agency's information is pre-populated on the PMF version.
AGENCY PREPARER INFORMATION			
	97	Agency Preparer Information	Enter the Requesting Agency's Preparer's name, phone number, and email.

4. Once the FS Form 7600B is filled out and signed, the requesting agency is asked to email the form to pmffee@opm.gov. Alternatively, Agency PMF Coordinators have the ability to upload the completed financial forms directly to the PMF's records in the PMF TMS; this is the preferred process.
5. Agencies are strongly encouraged to complete both the FS Form (7600A) and (7600B) and submit both simultaneously for PMF reimbursements. See instructions above for the FS Form 7600A.
6. Upon receipt, the PMF Program Office will review for accuracy, assign a tracking number, obtain signatures, and provide a copy to the requesting agency.
 - a. The PMF Program Office will process and bill the requesting agency for the transfer of funds via IPAC (Intra-Governmental Payment and Collection).

Any FS Form 7600B (Order Form) that is submitted without an associated FS Form 7600A (attached or already on file), will be suspended until a complete package with both forms is received. Agencies will be notified for incomplete submissions. Please submit any PMF-related financial inquiries via email to pmffee@opm.gov. Thank you!