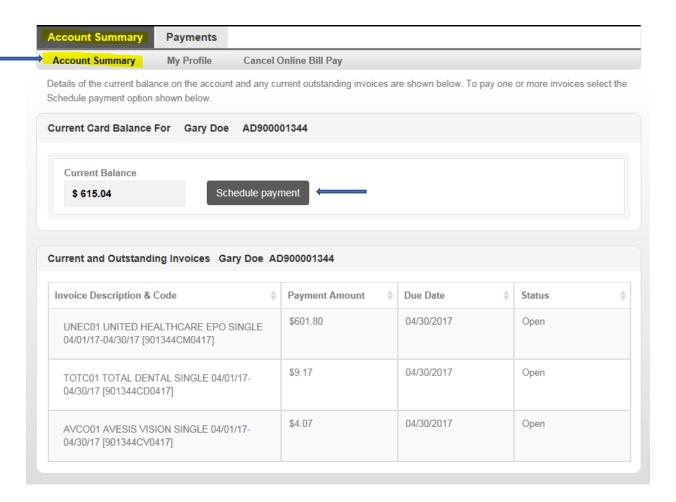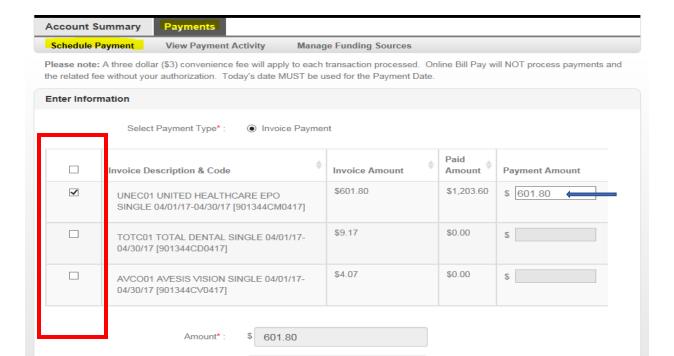## How to Make a Payment

1. Under the Account Summary tab, then click Account Summary, you will be able to view your current and outstanding invoices as well as schedule a payment.

2. When you click on "Schedule a Payment", the following will appear on the screen. On the left-hand side with the boxes, you may select to pay for all the invoices by clicking on the first box or indicate the specific invoice you wish to pay for by selecting the box next to the invoice.
3. The payment amount on the column furthest to the right will be populated automatically with the full payment amount of the invoice and cannot be changed.
4. You may then select the exact funding source type you wish to use and the funding account number. The payment date must be entered as today's date, otherwise you will receive an error at the next step.
5. Hit Continue.

Please note: A three dollar ($3) convenience fee will apply to each transaction processed. Online Bill Pay will NOT process payments and the related fee without your authorization. Today's date MUST be used for the Payment Date.

Enter Information

Select Payment Type* : ● Invoice Payment

	Invoice Description & Code	Invoice Amount	Paid Amount	Payment Amount
☐				
☑	UNEC01 UNITED HEALTHCARE EPO SINGLE 04/01/17-04/30/17 [901344CM0417]	$601.80	$1,203.60	$ 601.80 ←
☐	TOTC01 TOTAL DENTAL SINGLE 04/01/17-04/30/17 [901344CD0417]	$9.17	$0.00	$
☐	AVCO01 AVESIS VISION SINGLE 04/01/17-04/30/17 [901344CV0417]	$4.07	$0.00	$

Amount* : $ 601.80

→ Funding Account Number* : Gary Doe Card A/C-xxxxxxxxxxx ▼

→ Card CVV No* : ●●●   Please enter the CVV number from the back of your card.
What is this?

→ Payment Date* : 🗓 05/2?/2017

Cancel   **Continue**

6. Review the information to ensure that it is accurate and select "Confirm".

By clicking **Confirm** , you authorize us to initiate a debit from the "Payment from Account" to the "Payment to Account", as detailed below. The payment to your account will be made on the Payment Date detailed below and the debit from your account will occur within two business days of that date but not earlier. You also authorize your bank (and its successors or assigns), to process this debit to your account.

Payment Details

Payment Type : Invoice Payment
Payment Date : 05/23/2017
Payment for Account : xxxxxxx1344
Payment from Account : Visa Card - xxxxxxxxxxx9990
Payment Amount : $601.80
Fee Amount : $3.00

Cancel   Edit   **Confirm**

7. Congratulations, you have now made an electronic payment. You may elect to check your payment status or make another payment.

Payment Details

Confirmation Number :	14S5QV14W2
Payment Type :	Invoice Payment
Payment Date :	05/02/2017
Payment for Account :	xxxxxxx1344
Payment from Account :	Visa Card - xxxxxxxxxxxx9990
Payment Amount :	$601.80
Total Amount :	$604.80

Invoices Paid with this Payment

Invoice Description & Code	Payment Amount
UNEC01 UNITED HEALTHCARE EPO SINGLE 04/01/17-04/30/17 [901344CM0417]	$601.80

[Print] [Make Another Payment] [Check Payment Status]