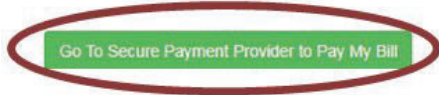



Step 1: Click on 'Go To Secure Payment Provider to Pay My Bill' button to continue to Authorize.Net.

Please note that by clicking this button, you will be leaving the Shared Services website and redirected securely to Authorize.net for entering your credit card information. Authorize.net is certified (PCI level 1 compliant) to securely manage credit card payments.



Step 2: Fill in the 'Amount' field using the amount you calculated in step 2 of the ordering instructions on the website. Enter the security code shown. This code is NOT case-sensitive. Click 'Continue' to proceed.

Note: The University of Michigan does not take credit card payments in excess of \$10,000 or for Sponsored Research invoices. For alternative payment methods or for questions or concerns, please contact the Shared Services at 734-615-2000


 Authorize.Net
SECURE CHECKOUT

Order Information * Required Fields

Item	Description	Amount
1	SSC Invoice Payment SSC Accounts Receivable 1000 Victors Way Suite 1A Ann Arbor, MI 48108-2744	<input type="text"/>

Total: --

Security Code



Please enter the security code above.

Questions? Contact our Shared Services Accounts Receivable Office at 734-615-2000

Note: All payments must be less than 10,000 dollars. If the invoice or payment is greater than \$10,000 - please contact the Shared Services at (734) 615-2000 or electronicpmts@umich.edu for approval.

Step 3: Fill in required fields: (* indicates required fields) and click 'Pay Now'.

Note: The University of Michigan does not take credit card payments in excess of \$10,000 or for Sponsored Research invoices. For alternative payment methods or for questions or concerns, please contact the Shared Services at 734-615-2000

Order Information * Required Fields


Invoice Number:

Description:

Item	Description	Qty	Taxable	Unit Price	Item Total
1	SSC Invoice Payment Customer specified amount	1	N	\$50.00 (USD)	\$50.00 (USD)

Total: \$50.00 (USD)

Payment Information



Card Number: (enter number without spaces or dashes)

Expiration Date: (mmyy)

Billing Information

Customer ID:

First Name: Last Name:

Address:

City:

State/Province: Zip/Postal Code:

Country:

Email:

Phone:

Questions? Contact our Shared Services Accounts Receivable Office at 734-615-2000

Invoice Number = MATH SHIRT
Description* = YOUR NAME

***Please note that although the website does not indicate the description as a required field, the Math department needs this field completed in order to confirm payment and mail your shirt.**

Required Fields:

- Invoice Number/Unique Identifier: **MATH SHIRT**
- Card Number: **YOUR NAME** (e.g. John Doe)
- Expiration Date (Month/Year on card)
- First Name and Last Name is card holder name (full name of the cardholder on the credit card you are using)
- Email
- Phone

If you have any problems using Authorize.net, please call the Shared Services at 734-615-2000 or email electronicpmts@umich.edu

Step 4: Take a screen shot of the payment confirmation page or save your email confirmation for uploading to your order form.