

E-Pay Instructions

CryoCell
INTERNATIONAL

The World's First Cord Blood Bank

700 Brooker Creek Boulevard • Suite 1800 • Oldsmar, Florida
34677 • Tel 1.813.749.2100 • Fax 1.813.855.4745 •
www.cryo-cell.com



E-Pay Instructions

To activate account, select "Register." (Please Note: If you have multiple accounts (children), each account must be registered separately.)

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For instructions please visit: [English](#) | [Español](#)

Online Bill Presentment and Payment

Login to ePay

User Name: Required

Password: Required

OR

[Forgot your username?](#)
[Forgot your password?](#)

POWERED BY NODUS

E-Pay Instructions

Click on "Request Activation Email" to receive activation code.

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For instructions please visit: [English](#) | [Español](#)

Online Bill Presentment and Payment

[Login]

Registration

Customer Number:

E-Mail:

User Name:

Password:

Confirm Password:

Registered Phone Number:

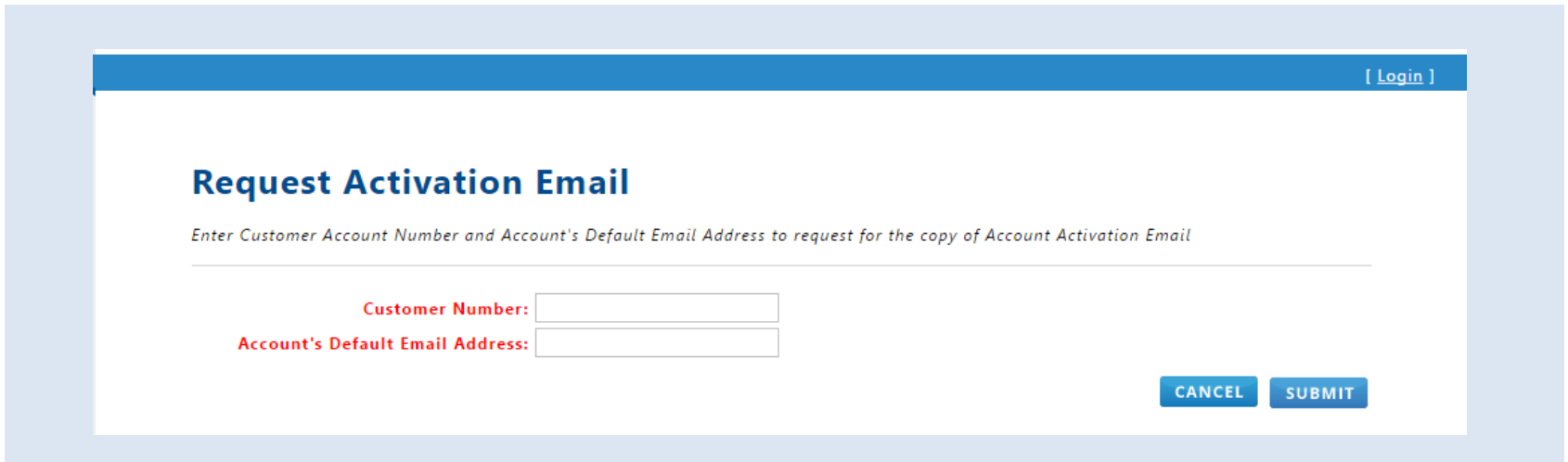
Activation Code:

SUBMIT

[Request Activation Email](#)

E-Pay Instructions

Enter your 12-digit customer number and account's default email and select "Submit". You will receive an Account Activation Email, please select the link to create User Name and Password.



The screenshot shows a web form titled "Request Activation Email". At the top right of the form area is a "[Login]" link. Below the title is a subtitle: "Enter Customer Account Number and Account's Default Email Address to request for the copy of Account Activation Email". There are two input fields: "Customer Number:" and "Account's Default Email Address:". At the bottom right of the form are two buttons: "CANCEL" and "SUBMIT".

E-Pay Instructions

1. Enter email address. (If you have multiple accounts (children), the email address may be the same for each account.)
2. Create a unique UserName that corresponds to its unique Customer Number. (If you have multiple accounts, the UserName for each account must be different.)
3. Create Password. (If you have multiple accounts, the password may be the same for each account).
4. Confirm Password.

[\[Login \]](#)



Registration

Customer Number:

E-Mail:

User Name:

Password:

Confirm Password:

Registered Phone Number:

Activation Code:


SUBMIT

E-Pay Instructions

Under Outstanding Invoices, select “Pay in Full” option and click on “Pay”.

[Home](#) > [Your Account](#) > [Invoices](#) > [Outstanding Invoices](#)

Outstanding Invoices

00000123456 

Note: Outstanding Invoices include any charges on a customer account that is not paid in full, such as: invoices, debit memos, service charges, etc.

Show Transactions: All From: To: Max Results:

TRANSACTION#	CUSTOMER PO #	TRANSACTION DATE	DUE DATE	TRANSACTION AMOUNT	BALANCE DUE	PAY IN FULL	AMOUNT
SCPAY0001431012		8/1/2016	8/15/2016	\$148.00	\$148.00	<input type="checkbox"/>	<input type="text"/>
SCPAY0001431011		7/1/2016	7/15/2016	\$148.00	\$148.00	<input type="checkbox"/>	<input type="text"/>
SCPAY0001431010		6/1/2016	6/15/2016	\$148.00	\$48.00	<input type="checkbox"/>	<input type="text"/>

[Select All](#)

[Export](#)

SELECTED TRANSACTIONS

Empty

PROCESS PREPAYMENT

Note: Use this section to enter an additional payment on account.

COMMENT	PAYMENT
<input type="text"/>	<input type="text" value="\$0.00"/>

TOTAL: \$0.00

E-Pay Instructions

Under Selected Transactions, select "Pay" option.

Your Account
Jane Doe [[Logout](#)]

[Home](#) > [Your Account](#) > [Invoices](#) > [Outstanding Invoices](#)

Outstanding Invoices

Note: Outstanding Invoices include any charges on a customer account that is not paid in full, such as: invoices, debit memos, service charges, etc.

Show Transactions by Transaction Date All From: Max Results: 200

To: SEARCH RESET

[Clear Selected](#) [Select All](#)

TRANSACTION#	TRANSACTION DATE	DUE DATE	TRANSACTION AMOUNT	BALANCE DUE	PAY IN FULL
INV123456	6/1/2011	6/1/2011	\$50.00	\$50.00	<input checked="" type="checkbox"/>

[Export](#)

SELECTED TRANSACTIONS

TRANSACTION #	TRANSACTION BALANCE	PAYMENT(S)
INV123456	\$50.00	\$50.00

TOTAL: \$50.00

PAY

E-Pay Instructions

If credit card information is same, enter Card Security Code, verify billing address, and select "Submit" to pay outstanding invoices. To enter a different credit card, select "Add New Entry."

SELECTED TRANSACTIONS

TRANSACTION #	TRANSACTION BALANCE	PAYMENT(S)
SCPAY0001431012	\$148.00	\$148.00
PREPAYMENT AMOUNT		\$0.00

TOTAL: \$148.00

PAYMENT OPTIONS

Note: The bolded line is primary wallet entry for either credit card or eCheck.

SELECT	WALLET ID	TENDER TYPE	ACCOUNT NUMBER	EXP DATE/ROUTING #
<input checked="" type="radio"/>	VISA	Visa	XXXXXXXXXXXX1117	08/2020

[Add New Entry](#) +

WALLET ENTRY/ EDIT INFORMATION

Wallet ID:

Card Type:

Credit Card Number:

Exp. Date (MM/YY): /

Card Security Code:

Account Holder Name:

Street:

Street 2:

City:

State:

Zip Code:

Country:

Pay Now

Pay Later

CANCEL **SUBMIT**

E-Pay Instructions

To add a new credit card, select "Add New Entry", enter credit card information and check "Save to wallet". Once completed, please select "Submit" to pay invoice(s).

PAYMENT OPTIONS

Note: The bolded line is primary wallet entry for either credit card or eCheck.

SELECT	WALLET ID	TENDER TYPE	ACCOUNT NUMBER	EXP DATE/ROUTING #
<input type="radio"/>	VISA	Visa	XXXXXXXXXXXX1117	08/2020

[Add New Entry](#) +

WALLET ENTRY/ EDIT INFORMATION

Wallet ID:

Card Type:

Credit Card Number:

Exp. Date (MM/YY): /

Card Security Code:

Account Holder Name:

Street:

Street 2:

City:

State:

Zip Code:

Country:

Save to wallet:

Set as Default:

Pay Now

Pay Later



CANCEL

SUBMIT

E-Pay Instructions

Once payment has been processed, a receipt will be sent to the e-mail address entered at the time of activation.

Your Account

Jane Doe

[[Logout](#)]

Confirmation

Cryo-Cell International

700 Brooker Creek Blvd
1800
Oldsmar, FL 34677

Customer Number: 000000123456

Customer Name: Doe, Jane

Payment Number: TWEBPMT000000030

Created Date: 6/24/2014

Status: Processed

Process Date: 6/24/2014

Amount: \$50.00

Transaction Details

Capture Amount: \$50.00

Type: Visa

Card / Account Number: XXXXXXXXXXXX1111

Billing Address: Jane Doe
123 MyStreet
Orlando, FL 33333
USA

Status: Approved

Origination ID: A10A6E460B16

Authorization Code: 219PNI

Paid Invoice List

INVOICE #	AMOUNT APPLIED
INV123456	\$50.00
	Total: \$50.00

E-Pay Instructions

If you have any questions or need any further information, please contact the Billing Department at (800) 786-7235, Option 2. Representatives are available Monday through Friday, 8:30 a.m. to 7:00 p.m. EST.



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