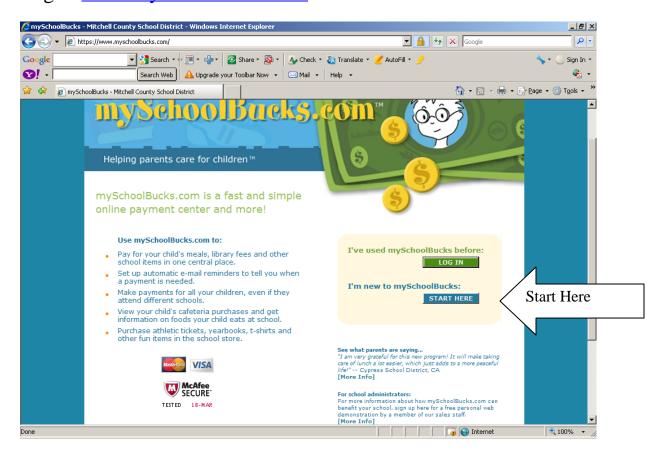
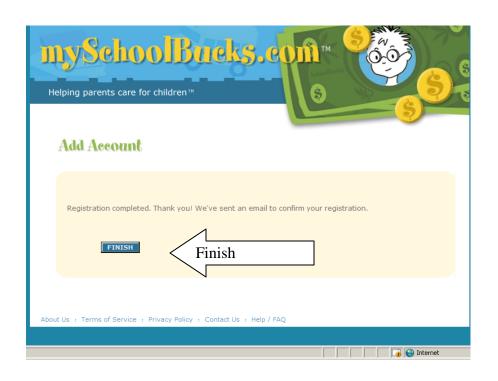
Log in www.myschoolbucks.com

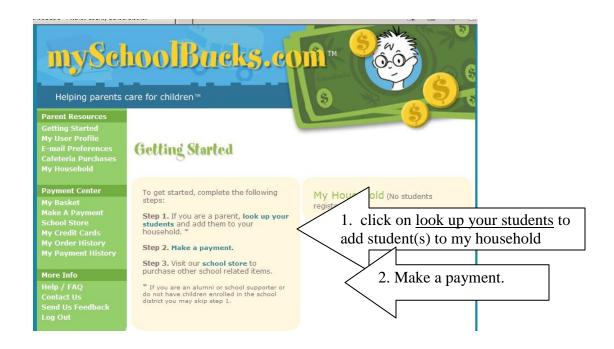


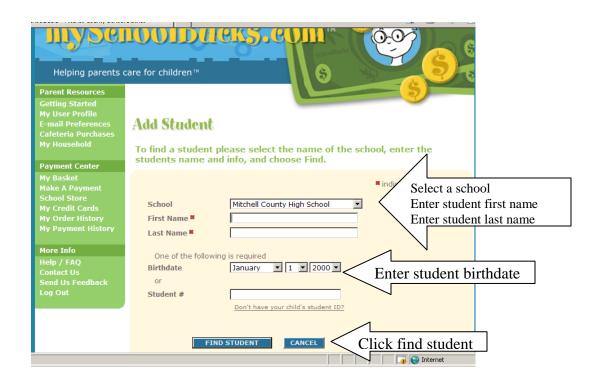




	Complete all of the registration information
First Name #	Note: Please enter your name
Last Name #	here rather than your child's name. You'll be asked to add your children later.
Street Address #	you chiden later.
City #	
State/Province	Georgia
ZIP/Postal code #	
Daytime phone #	(+++-++++++++++++++++++++++++++++++++++
Evening phone #	
E-mail Address #	
Confirm E-mail #	
	(Note: Your email address is held confidential. We will not send you unsolicited emails. A valid email address is required to receive payment confirmations.)
Login ID #	
	(Must be at least 4 characters and may only contain letters, numbers, or underscores.)
Password #	
6 C D 19	(Must be at least 4 characters - case sensitive)
Confirm Password #	
If you forget your passy profile, please choose a	word, we'll ask you for the answer to the security question. To protect your user I question that is memorable for you but difficult for others to guess.
Security Question	What is your mother's maiden name?
Security Answer #	
	(Must be at least 4 characters - case sensitive)
Notice: Your school dist	crict may impose a convenience fee of \$2.00 with each payment order.
□ I am 18	years of age or older and I agree to the Terms of Serv
	When all information is complete
REGISTER	
	click register





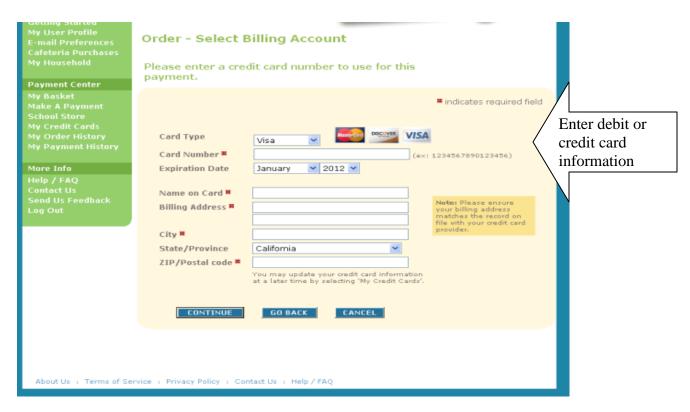








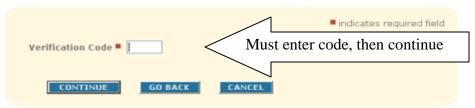




Getting Started My User Profile E-mail Preferences Cafeteria Purchases My Household Payment Center My Basket Make A Payment School Store My Credit Cards My Order History My Payment History More Info Help / FAQ Contact Us Send Us Feedback Log Out

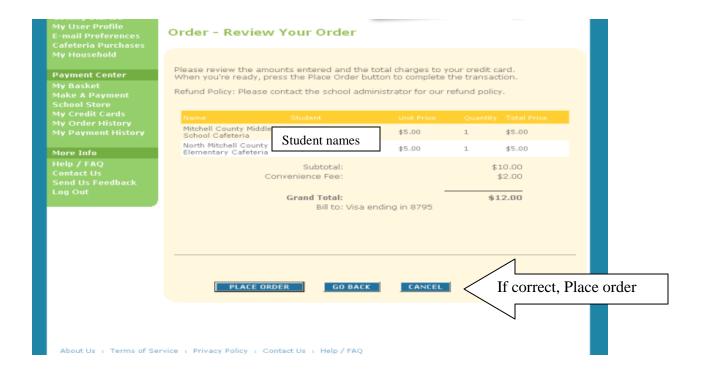
Order - Card Verification

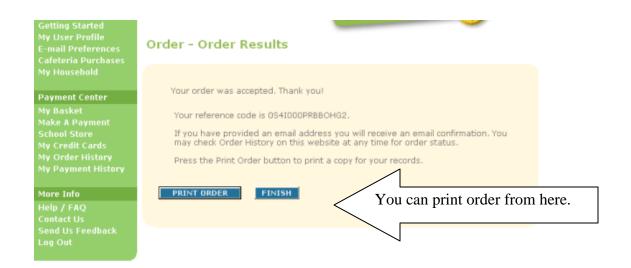
Please enter the card verification number from your credit card.



Note: For your protection, we require that you enter a credit card verification number for all purchases made online. For Visa, MasterCard, or Discover the verification number is the final 3-digit number located on the back of the credit card. For American Express, it is the four digits printed above the account number on the front of the card.







Order

ID: 009JMF0WJ100W00 Date: Feb 17, 2011 8:47 AM

Status: closed

Your County Schools School District: Store: Food Services Store

Name: Smith, Charles Address: PO Box 262

Grays Knob, 41007

Daytime phone: 410-621-9005 410-573-1112 Evening phone:

E-mail Address: charles.smith@gmail.com

Name Student **Unit Price** Quantity Total Price Rosspoint Elementary School \$12.00 \$12.00

Cafeteria

SMITH, TIFFANY

Subtotal: \$12.00 Convenience Fee: \$2.00

Sample MySchoolBucks Receipt

\$14.00 **Grand Total:**

Bill to: Visa ending in 1234