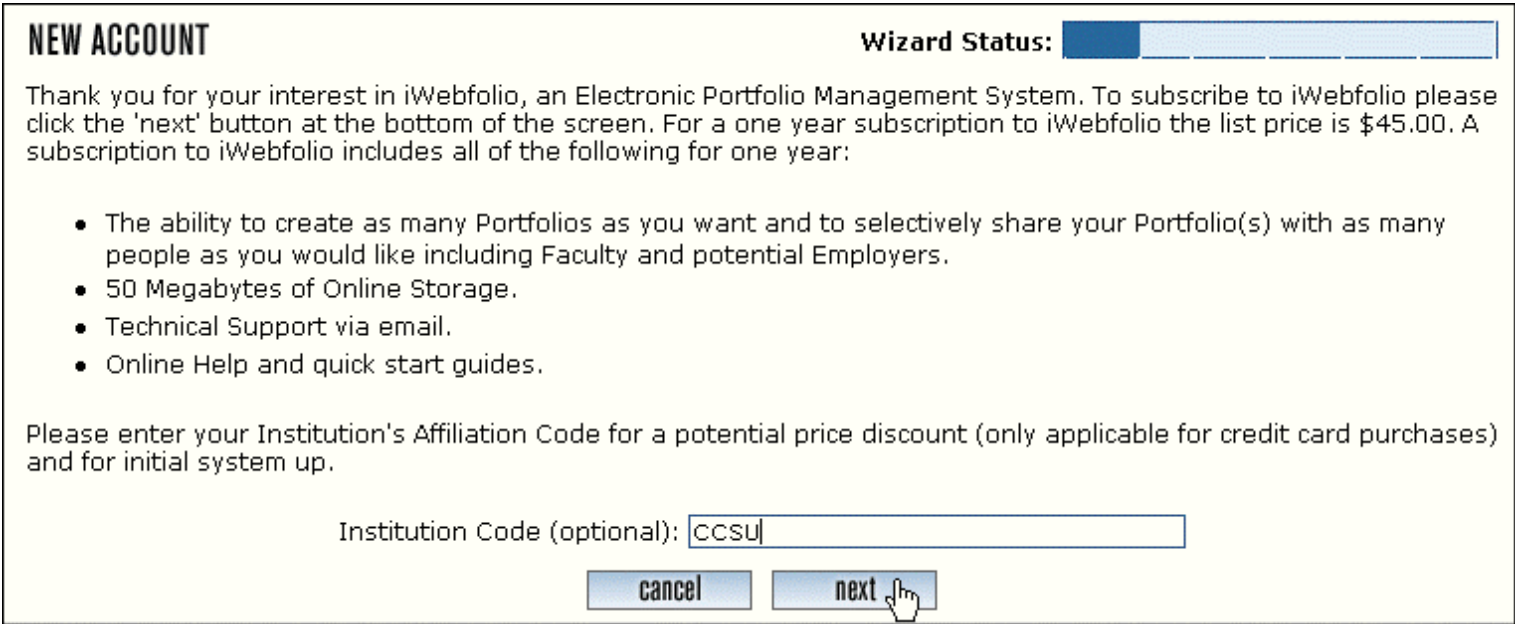


Purchasing a License

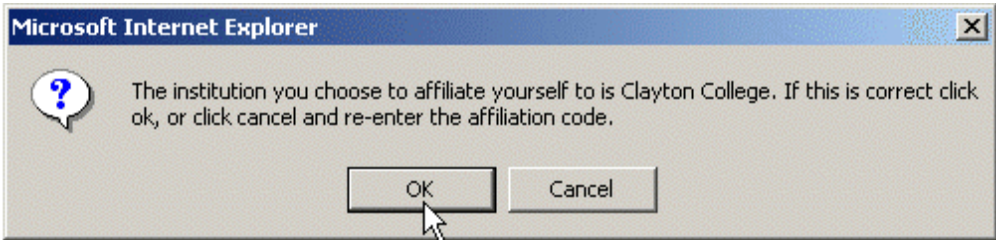
1. Go to <http://www.iwebfolio.com>. Click on the "Sign Up Now!" button.



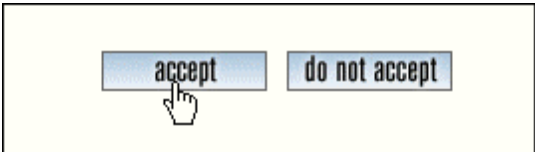
2. Enter "CCSU" for the *Institution Code*, and click on the "Next" button.



3. When prompted to confirm affiliation with *Clayton State*, click on the "OK" button.




4. Read the License Agreement. Scroll down to the bottom of the screen, and click on the "Accept" button.



5. Enter your *iWebFolio Account Information*, and click on the "Next" button.

iWEBFOLIO ACCOUNT INFORMATION

Wizard Status: 


All fields are required unless otherwise noted.

Your First Name:	<input type="text" value="Business"/>	
Your Last Name:	<input type="text" value="Student"/>	
E-Mail Address:	<input type="text" value="csu00000@mail.claytonstate.net"/>	
Confirm E-Mail Address:	<input type="text" value="csu00000@mail.claytonstate.net"/>	
Login Name:	<input type="text" value="Business1"/>	Five-character minimum; no spaces
Password:	<input type="password" value="*****"/>	Five-character minimum; no spaces
Confirm Password:	<input type="password" value="*****"/>	
Secret Question:	<input type="text" value="Your place of birth?"/>	
Secret Answer:	<input type="text" value="Georgia"/>	
Institution Code:	<input type="text" value="ccsu"/>	Optional

Note: Your password will be sent to the above e-mail address when you have completed your transaction.

6. Enter your *Payment Information*, and click on the "Next" button.

PAYMENT INFORMATION

Wizard Status: 

Please select your payment method below.

- Visa *
- MasterCard *
- iWebfolio Registration Card

* Debit cards that may be used as a credit card can be used to purchase iWebfolio.

Please enter the billing information for the credit card you are using to purchase iWebfolio exactly as it appears on your credit card statement.

- \$40.00 - 50 MB of disk space
- \$45.00 - 100 MB of disk space

Card Holder Name:	<input type="text" value="Business Student"/>	Ex: John Doe
Billing Address 1:	<input type="text" value="Clayton College & State University"/>	
Billing Address 2:	<input type="text" value="5900 North Lee Street"/>	
City:	<input type="text" value="Morrow"/>	
State/Province/Region:	<input type="text" value="Georgia"/>	
Zip/Postal Code:	<input type="text" value="30260"/>	
Country:	<input type="text" value="USA"/>	
Card Number:	<input type="text" value="1234567891234567"/>	Do not enter spaces or dashes

Country:

USA

Card Number:

1234567891234567

Do not enter spaces or dashes

Expiration Date:

08

2004

cancel

previous

next

7. Verify the payment information, and click on the "Finish" button.

PAYMENT INFORMATION

Wizard Status:



Please verify the credit card information below is correct. If the information is correct click 'charge my card' otherwise click 'previous' and correct the information that is in error.

Account Type/Price:	\$40.00 - Basic
Card Holder Name:	Martha Wicker
Billing Address 1:	Clayton College & State University
Billing Address 2:	5900 North Lee Street
City:	Morrow
State/Province/Region:	Georgia
Zip/Postal Code:	30260
Country:	USA
Card Number:	1234567891234567
Expiration Date:	0804

cancel

previous

finish