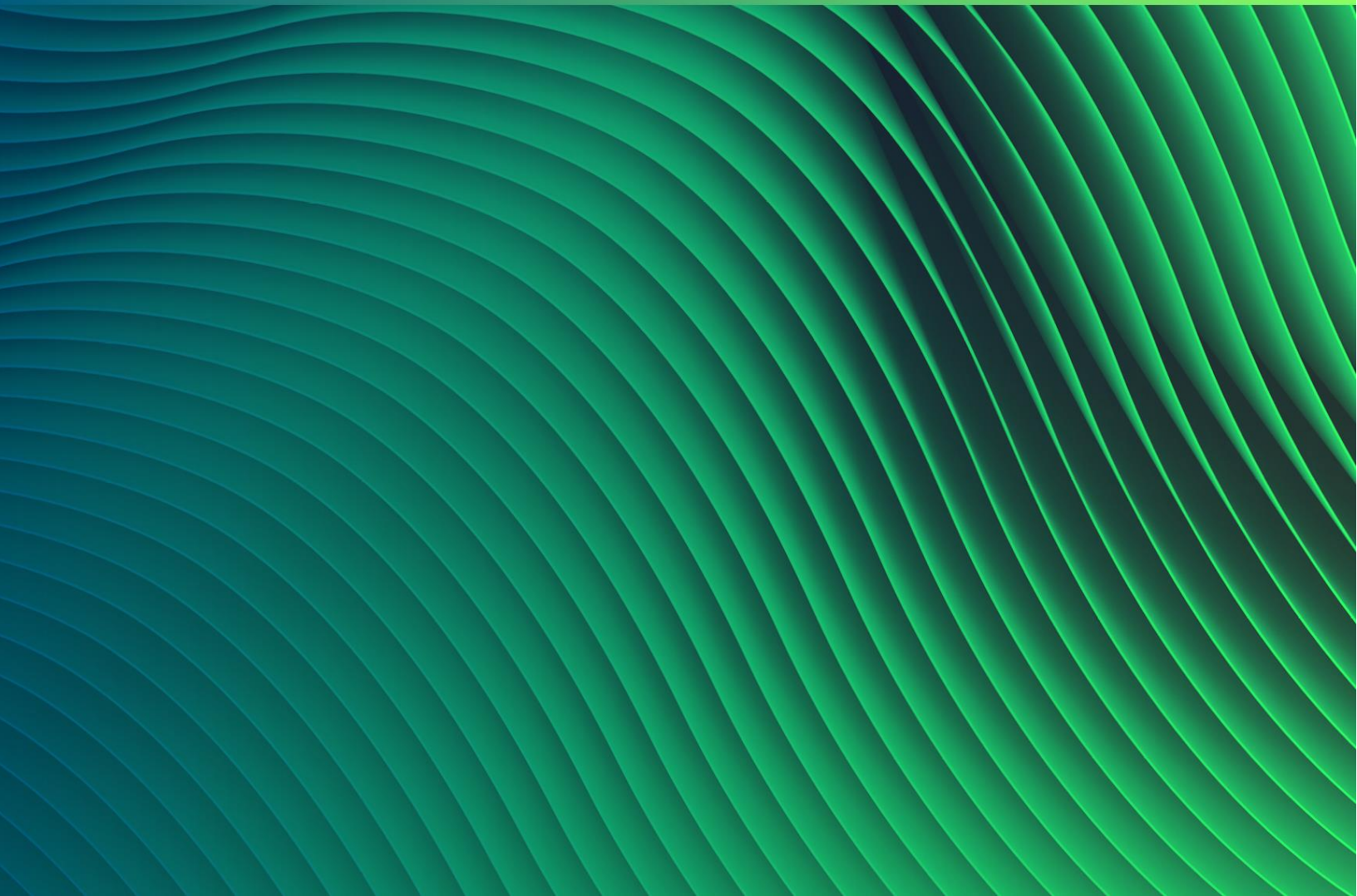




***ebt*EDGESM Provider Portal User Guide**

Release Date: January 17, 2021



Revision History

Release Date	Sections Edited	Description
January 17, 2021		Initial release of the manual.

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1 *Accessing the Provider Portal*

This section includes instructions for Child Care program providers to log in to the Provider Portal and register online.


Logging In



The following procedure is intended for registered users for logging in to the application.

Note: *New users must complete the [First Time Registration](#) procedure before they can log in to the application.*

To log in to the Provider portal:

1. Go to the ebtEDGE home page (www.ebtEDGE.com).



Wednesday, September 30, 20XX

ebtEDGESM offers you direct access to the EBT information you need. Choose your EBT group below and click More Information.

EBT Cardholders

- View the balance on your EBT card
- Review your transactions
- Read helpful hints

[More Information](#)

Agency

- Access EBT services
- View your EBT reports
- Access EBT documentation
- and more ...

[More Information](#)

EBT Merchants

- View your EBT reports
- Access EBT documentation
- Clear vouchers
- and more ...

[More Information](#)

EBT Partners

- Clear vouchers
- Access EBT services
- Access EBT documentation
- and more ...

[More Information](#)

Child Care Providers

- View your deposits
- View your transactions
- Access documentation
- Complete your contract online

[More Information](#)

[Cardholder Login](#)
[Agency Login](#)
[Merchant Login](#)
[Provider Login](#)
[Partner Login](#)
[User Admin Login](#)
[About EBT](#)
[USDA - FNS](#)
[NACHA](#)

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ebtEDGE Home Page

- Click **Provider Login** in the left navigation bar. The *Child Care Provider Log In* page displays.

Provider Log In Page

- You can view relevant documents by selecting from these options in the green banner at the top of the page:
 - Agreements
 - POS Download
 - Manuals
- Enter your **User ID** and **Password** in the respective fields.
- Click the **Login** button.

First Time Registration

You can register as a Child Care provider online or by using a paper form.

Note: Before you can register, you must follow your state's guidance to obtain an **FIS Provider ID**, either from the State or from FIS directly.

Online Registration

The *Provider Registration* screen is used for online registration. Click the **Complete your contract or register online now** link on the Log In page.

The Provider Registration screen displays.

Provider Registration **Required

[Enter your Provider Identification, User Access information and click Continue to begin the online registration process.](#)

Provider Identification

*FIS Provider ID:

*Provider Phone # : - -

*State or Program: [Help?](#)

*Last 4 digits of Provider's Bank Account # : Only used in adding an additional User ID and will gray out after choosing a "Program" in the above drop-down box.

User Access

*User ID: (User ID must be an email address; sample: John_Doe@provider.com)

*Re-enter User ID:

*Password: (Passwords must be at least 8 characters but no more than 14 characters long and must contain at least 1 number, at least 1 lower case and at least 1 upper case letter)

*Confirm Password:

*Challenge Question 1:

*Challenge Response 1:

*Challenge Question 2:

*Challenge Response 2:

*Challenge Question 3:

*Challenge Response 3:

24Vs5Lpo

* Enter the text shown above :

Note: If you have questions or experience problems with the registration process, call 1-800-894-0050.

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Provider Registration Page

Provider Registration

The Provider Registration page displays fields in two sections:

- [Provider Identification](#)
- [User Access](#)

Note: You must enter valid information for all fields in the **Provider Identification** and **User Access** sections, and then click the **Continue** button to begin the online registration process, or error messages will display.

Provider Identification Section

1. Enter the FIS provider identification number in the **FIS Provider ID** field.

***Note:** Follow your State's guidance to obtain your **FIS Provider ID**, either from the State or from FIS directly.*
2. Enter your contact phone number in the **Provider Phone #** field.
3. Select the appropriate item from the **State or Program** drop-down list.
4. Enter the last four digits of your bank account number in the **Last 4 digits of Provider's Bank Account #** field.

***Note:** This field is disabled if you selected "New Provider" from the State or Program drop-down.*

You can hover over the **Help?** link to view how to locate your bank account number.

User Access Section

1. Enter a valid email address in the **User ID** field.

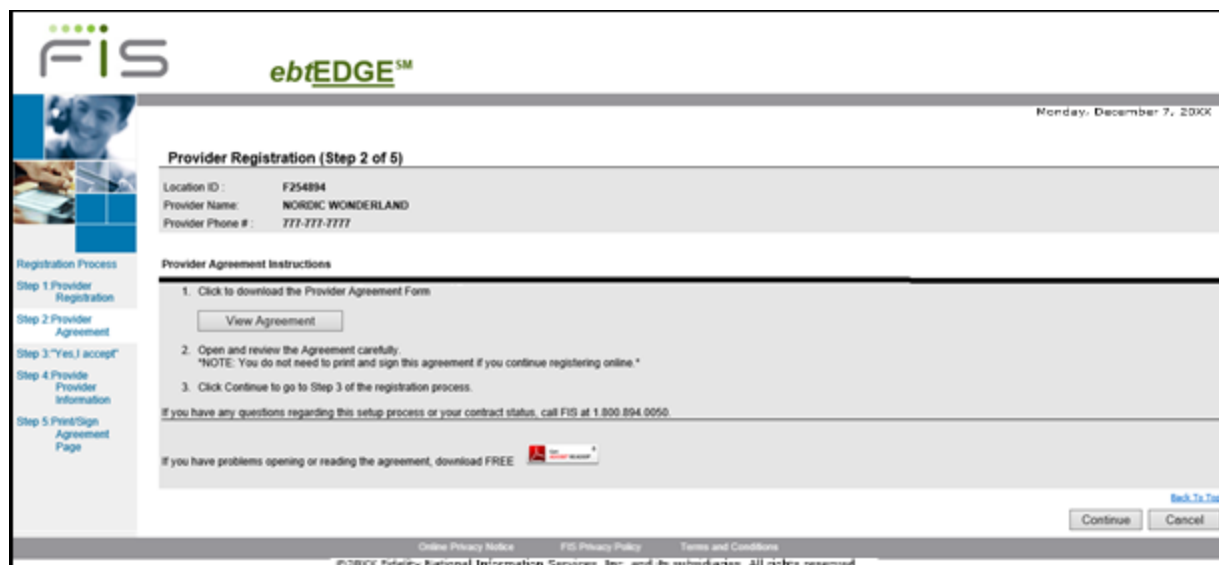
***Note:** The email address must be unique in the Provider Portal. You cannot register using an email that has been registered previously.*
2. Enter the email address that you entered in the User ID field again in the **Re-enter User ID** field.
3. Enter your password in the **Password** field.
4. Enter the password that you entered in the Password field again in the **Confirm Password** field.
5. Select three *different* questions from the **Challenge Question** drop-down lists. There are many Challenge Questions currently in the list; examples are:
 - What is your city of birth?
 - What is your favorite beverage?
 - What is your favorite food?
6. Enter your answers to the selected questions in the **Challenge Response** fields.
7. Enter the CAPTCHA text in the text box.
8. Click the **Continue** button to begin the online registration process. The Provider Registration (Step 2 of 5) screen displays.

or

Click the **Cancel** button if you want to clear the entered fields and enter them again.

Provider Registration (Step 2 of 5)

1. Click the **View Agreement** button. The system displays the State's Agreement form.



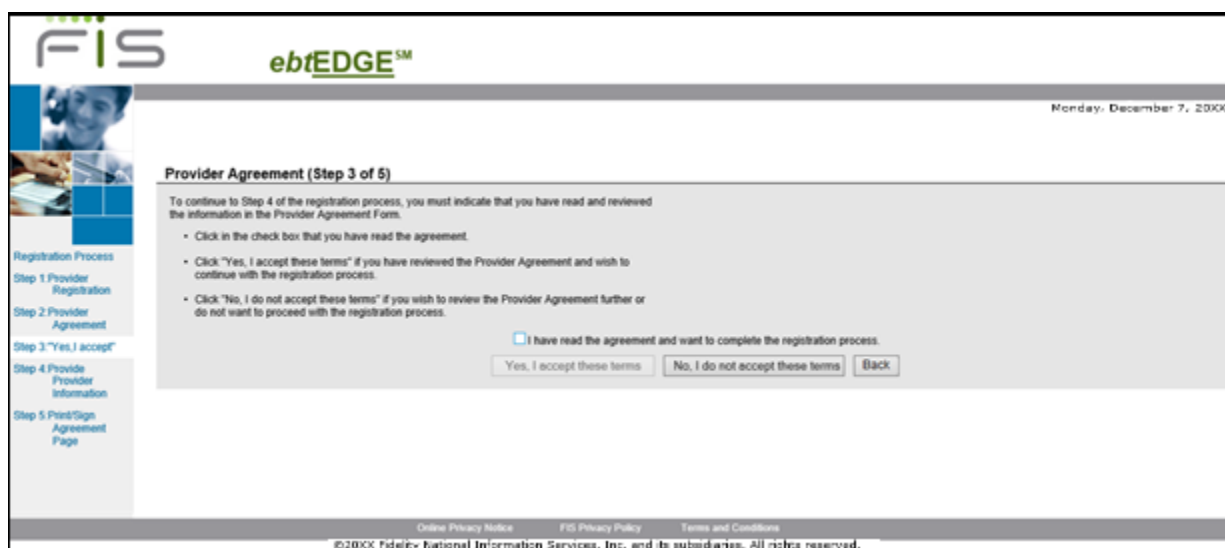
Step 2 of 5 – Provider Registration

2. Click the **Continue** button. The Provider Agreement (Step 3 of 5) screen displays.

Provider Agreement (Step 3 of 5)

Follow the instructions given on the screen.

1. Select the check box to acknowledge that you have read and agreed to the agreement.



Step 3 of 5 – Provider Registration

2. Click the **Yes, I accept these terms** button. The Provider Agreement (Step 4 of 5) screen displays.

Note: If you do not agree and click the **No. I do not accept these terms** button, then you will be directed back to the Log In page. If you click the **Back** button, you will be directed to the previous page to review the agreement.

Provider Agreement (Step 4 of 5)

1. Enter the requested information and select the appropriate options given in the screen.

Provider Information (Step 4 of 5)

Location ID: F254894 Provider Name: NORDIC WONDERLAND Provider Phone #: 777-777-7777

Provider Information

Enter your provider and contact information and click Continue to go to Step 5 of the Registration process.

Address 1: 123 CHILD CARE CIR

Address 2:

City: NORTHWOODS

State: WI

Postal Code: 45454

Provider Contact

* First Name:

* Last Name:

Operations Contact

Phone # (if different):

Email:

Emergency Phone #:

* IRS Legal Filing Name:

* Federal Tax ID or SSN: (No dashes required) ☐ Federal Tax ID ☐ SSN

* Type Of Business: Select

If you check "Foreign Entity", you must complete and provide FIS with a signed form W-8BEN Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding. Download from <https://www.irs.gov/pub/irs-pdf/fw8ben.pdf>

Payment Options

* Three (3) options available are listed below. If you anticipate a lower volume of payments, select the "No POS Terminal needed" option.

* Use of Point of Sale (POS) Terminal:

☐ Payment using the Web (Internet) No Fee

☐ Payment using the Phone (IVR) No Fee

☐ Monthly POS Terminal Fee \$14.50 per month

* Connectivity Type of POS Terminals:

☐ No POS Terminal needed

☐ Dial up only

☐ Broadband Internet with Dial backup

PIN Pad Requirements:

☐ External required (Internal PIN Pad not included unless noted here)

Check Diagram:

CC Provider

Anyplace, 20000

PAY TO THE ORDER OF

ANYPLACE BANK Anyplace, 20000

Routing number: 1234

Account number: 1234

check number: 1234

* Bank Routing Number

* Bank Account Number

* Re-Enter Bank Routing Number

* Re-Enter Bank Account Number

* Account Type: Select

* Transaction Processing Cutoff Time: 00:00 AM

The 24 hour period from one Cutoff Time to the next is your processing day. If your Cutoff Time is before the ACH deposit deadline of 08:00 p.m. CST, your processing day funds will be deposited in your bank account the next business day. If it is after 08:00 p.m., your funds will be deposited in two business days.

[Back To Top](#)

[Continue](#) [Cancel](#)

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Step 4 of 5 – Provider Information

Field Descriptions

Address 1

Display Only

The first line of the Provider's street address.

Address 2

Display Only

The second line of the Provider's street address.

City

Display Only

The Provider's city.

State

Display Only

The Provider's State.

Postal Code

Display Only

The zip code of the Provider's address.

Use of Point of Sale (POS) Terminal

Select the appropriate option:

- Payment using the Web (Internet) / Payment using the Phone (IVR)
- Monthly POS Terminal Fee

Connectivity Type of POS Terminals

Select the appropriate option:

- No POS Terminal needed
- Dial up only
- Broadband Internet with Dial backup

PIN Pad Requirements

Select this option if you require an external PIN pad:

- External required

First Name

Enter the first name of the contact person for the Provider.

Last Name

Enter the last name of the contact person for the Provider.

Phone # (if different)

Enter the phone number of the Provider's contact person if it is different from the primary phone number shown at the top of the page.

Email

Enter the Provider's email address.

Emergency Phone

Enter the emergency contact phone number of the Provider.

IRS Legal Filing Name

Enter the legal name of the Provider's enterprise used for tax filing purposes. If the Provider files with a Social Security Number (SSN), the IRS legal name CANNOT be the name of the company. The SSN must match the person the SSN is assigned to.

Federal Tax ID or SSN

Enter the Federal Tax Identification number or the Social Security Number of the Provider. Then, select the correct option:

- Federal Tax ID
- SSN

Type of Business

Select the type of business. Options include:

- Corporation
- Individual / Sole Proprietor
- Partnership
- Nonprofit / Tax-exempt
- Government Entity
- LLC
- Foreign Entity

Note: If you check "Foreign Entity", you must complete and provide FIS with a signed form W-8BEN Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding.

Download from <https://www.irs.gov/pub/irs-pdf/fw8ben.pdf>

Bank Routing Number

Enter the bank routing number of the Provider.

Re-Enter Bank Routing Number

Re-enter the bank routing number.

Bank Account Number

Enter the bank account number of the Provider.

Re-Enter Bank Account Number

Re-enter the bank account number.

Account Type

Select the type of bank account. Options include:

- Checking
- Prepaid
- Savings

Transaction Processing Cutoff Time

Enter the time of day that the Provider cuts off transaction processing each business day.

Then, select AM or PM.

2. Click the **Continue** button. The Provider Agreement (Step 5 of 5) screen displays.

Provider Agreement (Step 5 of 5)

1. Enter your name in the **Signed By** field and your business title in the **Title** field on the screen.

Provider Agreement (Step 5 of 5)

Please read the following information carefully.

Thank you for submitting your information to Fidelity Information Services, Inc. To complete your Provider Registration process, fill in the fields below.

Signed By:

Title:

Date Signed: May 19, 2020

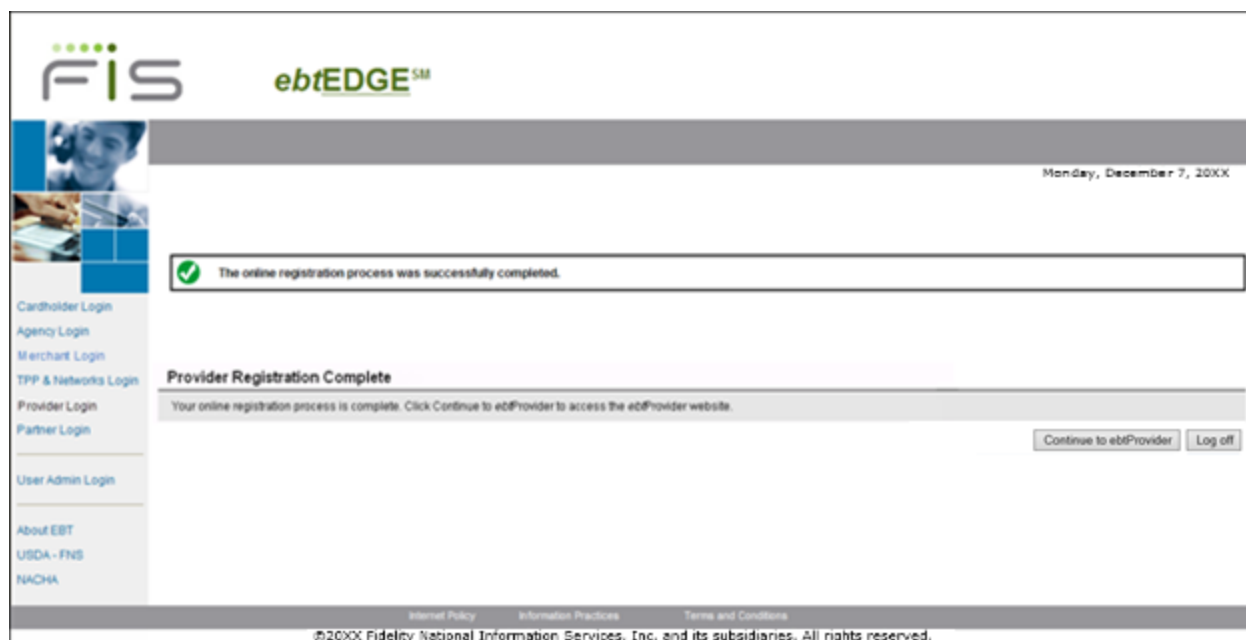
If there are issues with your contract or information provided, FIS will contact you directly. Click "Continue to ebtProvider" to go to the Provider Portal or click "Log Off" if you are done.

[Continue to ebtProvider](#) [Log off](#)

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Step 5 of 5 – Provider Agreement

2. Click the **Continue to ebtProvider** button to submit the contract.



Provider Registration Confirmation

The Provider Registration Complete page displays a confirmation message indicating that the online registration process was successfully completed.

1. Click the **Continue to ebtProvider** button to begin using the application.
2. Click the **Log off** button to return to the Child Care Provider Log In page.

Forgot My Password

If you forget your password, you can request a new one.

To request a new password:

1. Click the **Did you forget your password** link on the Child Care Provider Log In page.

Child Care Provider Log In

***** For VeriFone VX520 POS terminals with menus showing FIS Child Care, click [here](#) for download instructions *****

Enter your user ID and password in the boxes below and click Login.

User ID:

Password:

Login

[Did you forget your password?](#)

Your Password will expire after 45 days.
Your User ID will expire after 90 days of inactivity.

First time logging in? Do you need a User ID and password?
[Complete your contract or register online now](#)

For North Carolina Subsidized Child Care Assistance (SCCA):
Click here for [North Carolina Provider Agreement](#)

For Kansas Child Care Provider (KSDCF):
Click here for [Kansas Provider Agreement](#)

For Wisconsin Provider Child Care Provider (WIDCF):
Click here for [Wisconsin Provider Agreement](#)

Provider Log In Page

The Forgot Your Password page displays:

Forgot Your Password?

Submit Your User ID

* User ID:



* Enter the text shown above :

Next Cancel

Forgot Password – User ID

2. Enter your email address in the **User ID** field.
3. Enter the CAPTCHA text that you see on the screen in the text box.
4. Click the **Next** button or click the **Cancel** button to return to the Child Care Provider Log In page.

The Answer Your Challenge Question(s) page displays

Forgot Password – Challenge Question

5. Answer the challenge question that appears; you must enter the same challenge response that you entered when you registered.
6. Enter the CAPTCHA text in the text box.
7. Click the **Next** button (or click the Cancel button to return to the Forgot Your Password page). After you click **Next**, FIS sends an email to you with a temporary password.

The Log In Using Using Temporary Password page displays:

Confirmation with Instruction

8. Click **OK** to be returned to the Log In page. Log in using the temporary password. The application prompts you to immediately enter and re-enter a new password.
9. You next receive an email with a temporary password. The email address used is the one entered when your security administrator issued your User ID.



Sample Email with New Temporary Password

Your State's contact information will appear in last line of the email. This image is for demonstration only.

10. Log in again to the Agency Portal with your new temporary password and update it when prompted.

2 Application Tabs

Home Tab

Select the **Home** tab to access features and information quickly.

The screenshot shows the ebtEDGE Provider Portal Home Tab. At the top, there is a header with the FIS logo and 'ebtProvider' text. To the right of the header are links for 'ebtedge.com' and 'Log Off'. Below the header is a navigation bar with tabs: 'Home', 'Services', 'Documentation', 'Help Topics', and 'News'. The 'Home' tab is selected. Below the navigation bar, the date 'Monday, October 19, 20XX' is displayed. The main content area is divided into several panels. On the left, there is a 'News' panel with a link 'Test News Item'. Below it is a 'Help Topics' panel with links: 'Accepting Credit Cards on POS Equipment', 'Balance Inquiry', 'Getting Help', 'How to use Provider help topics', and 'Using a Damaged EBT Card'. Below that is a 'Documentation' panel with links: 'Provider No Terminal Quick Reference Guide' and 'Provider Quick Reference Guide'. On the right, there is a 'Services' panel with a link 'List all' and a list of services: 'Provider Information (Open)', 'Provider Contract (Open)', 'Provider Deposits (Open)', 'Provider Transactions (Open)', and 'Supply Requests (Open)'. Above the 'Services' panel, there is a 'Welcome' message for 'MEKONG MARKET, D201234' with a link 'Update my profile' and 'Last Logon: 10/19/20XX 02:48:56 CT'. At the bottom of the page, there is a footer with links for 'Online Privacy Notice', 'FIS Privacy Policy', and 'Terms and Conditions', followed by a copyright notice: '©20XX Fidelity National Information Services, Inc. and its subsidiaries. All rights reserved.'

Home Tab

The **Home** tab displays links to the following features in different panels:

- [News Alerts](#)
- [Help Topics](#)
- [Documentation](#)
- [Update my profile](#)
- [Services](#)

Click the topic links for more information.

Update My Profile

You can change your password and update challenge questions and responses by selecting the **Update my profile** link on the **Home** page.

Update My Profile

Modify the information that needs to be changed and click Update.

User Access

User ID: EBT User

Current Password:

Change Password

New Password: (Passwords must be at least 8 characters but no more than 14 characters long and must contain at least 1 number, at least 1 lower case and at least 1 upper case letter.)

Confirm New Password:

Challenge Question 1:

Challenge Response 1:

Challenge Question 2:

Challenge Response 2:

Challenge Question 3:

Challenge Response 3:

Update My Profile Page

Note: Once you select Challenge Questions and Responses the first time you log in, it is not necessary to change the questions and responses again unless you decide to.

The system allows you to update your profile in the following ways:

- Change your password and answer your existing challenge questions.
- Change your password and the responses to your existing challenge questions.
- Change your password and challenge questions and responses.

In all cases, you must change your password and answer (or change) all three challenge questions.

Services Tab

Select the **Services** tab to access services that you have permission to view and/or update.

ebtedge.com Log Off

FIS ebtProvider

Home Services Documentation Help Topics News

Friday, October 23, 20XX

Services

Service	Options
Provider Information	(Open)
Provider Contract	(Open)
Provider Deposits	(Open)
Provider Transactions	(Open)
Supply Requests	(Open)

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Services Tab

The following services are currently available:

- Provider Information
- Provider Contract
- Provider Deposits
- Provider Transactions
- Supply Requests

Documentation Tab

Select the **Documentation** tab to view the available documentation.

ebtEDGE.com Log Off

Home Services **Documentation** Help Topics News

Tuesday, October 20, 20XX

Documentation

This page contains links to PDF format files. If you do not have the software to view the PDF files, click the Get Acrobat Reader button or follow the link <http://www.adobe.com/products/acrobat/readstep2.html>

Select a Type: All Select a Service: All Search

Title	Type	Service	Release Date	Version
Provider No Terminal Quick Reference Guide	Quick Reference	Provider Information	May 1, 2004	1.0
Description: This is a test provider quick reference document				
Provider Quick Reference Guide	Quick Reference	Provider Information	May 1, 2004	1.0
Description: This is a test provider quick reference document				

[Back to Top](#)

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Documentaion Tab

To filter your document selection

1. Select the type of document from the drop-down list next to the **Select a Type** field.
2. Select a service from the drop-down list next to the **Select a Service** field.
3. Click the **Search** Button. The selected documents display.

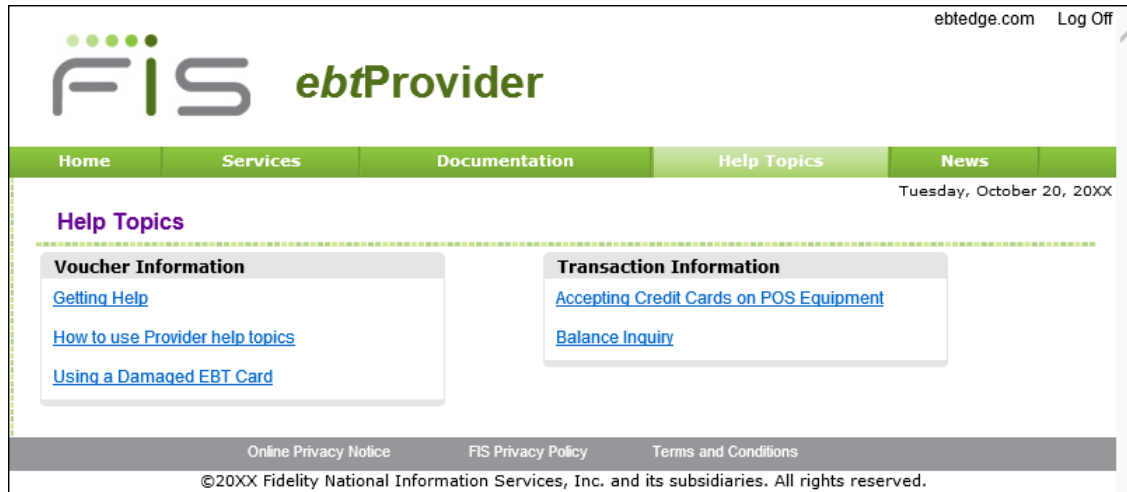
To view the document

Click the document name below the **Title** field. The PDF of the selected document displays.

Click the **Back To Top** link to scroll to the top of the Documentation tab.

Help Topics Tab

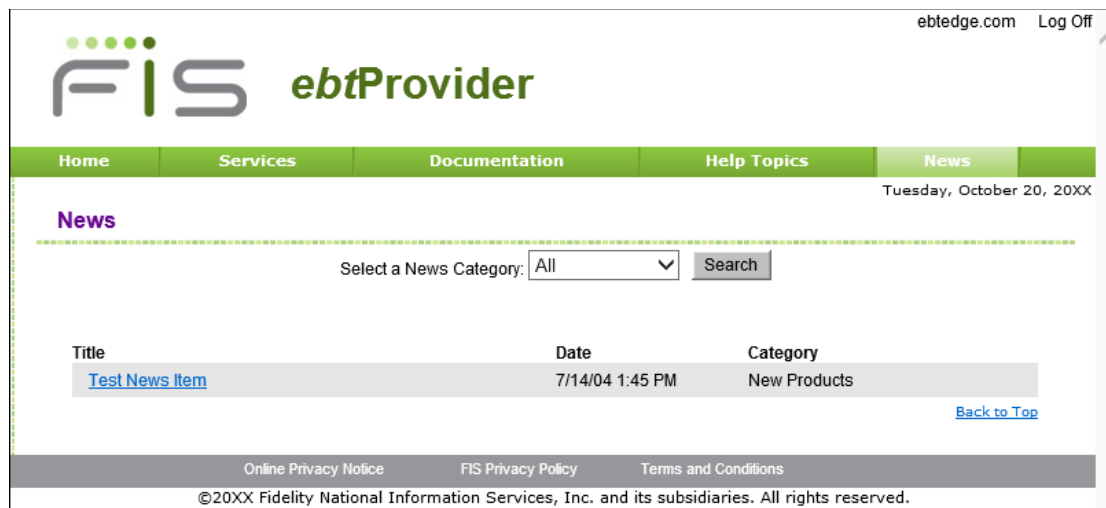
Select the **Help Topics** tab to go to the Help Topics page. Click the required link to go to a specific Help Topic.



Help Topics Tab

News Tab

Select the **News** tab to go to the News page. Click the required link in the News section to go to a specific news item.



News Tab

Choose a category from the **Select a News Category** drop-down and click on **Search**. Click on a news title to view the item.


3 Provider Services

Child Care providers can perform the following tasks online:

- View and update Provider Information
- Review Provider Contract
- View Provider Deposits
- View Provider Transactions
- Request Supplies

View and Update Provider Information

Select the link on the **Services** tab to access a page that displays the information about the provider that was entered upon registration:


ebtedge.com Log Off

Home
Services
Documentation
Help Topics
News

Tuesday, October 20, 20XX

Provider Information [Back to Services](#)

Contract Status: **Signed**
Location ID #: D201234
Update

Provider Information *Required

Name:	MEKONG MARKET	Phone #:	123-456-7890
Address 1:	1640 N BROADWAY	Fax #:	<input type="text" value="122"/> - <input type="text" value="111"/> - <input type="text" value="2222"/>
Address 2:			
City:	WICHITA		
State:	KS		
Postal Code:	67214		

Provider Hours

[Click Yes, if open 24x7, or enter your daily store hours in your local time zone.](#)

Open 24x7: ☒ Yes ☐ No

OR

Monday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	<small>Enter the time your transaction processing cuts off each day.</small> <small>*Transaction Processing Cutoff Time:</small> <input type="text" value="12:00"/> AM ▼
Tuesday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	
Wednesday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	
Thursday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	
Friday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	
Saturday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	
Sunday:	<input type="text" value="12:00"/> am To <input type="text" value="11:59"/> pm	

(The 24 hour period from one Cutoff Time to the next is your processing day. If your Cutoff Time is before the ACH deposit deadline of 06:00 p.m. CST your processing day funds will be deposited in your bank account the next business day. If it is after 06:00 p.m., your funds will be deposited in two business days.)

Provider Contact

*First Name:

*Last Name: ✕

Home Phone #: - -

[Back To Top](#)
Update

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Provider Information Page

To update Provider Information:

1. Modify the required information on the Provider Information page.
2. Click the **Update** button.

Note: The Update button displays only with the required permission(s), otherwise the information is read-only and cannot be updated.

If information is updated, a page displays a confirmation message.

Review Provider Contract

Select the link on the **Services** tab to access a page that displays the Provider Contract. The Provider Contract will open in the word format in a new window.

View Provider Deposits

Select the link on the **Services** tab to view and print the Provider Deposits list, and view and print your deposit details.

ebtedge.com Log Off

FIS ebtProvider

Home Services Documentation Help Topics News

Tuesday, October 20, 20XX

Provider Deposits [Back to Services](#)

*Choose

Date: ☒ Click on calendar icon to select date

Date Range: ☐

Show Deposits

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Provider Deposits with Date Selection

Select the **Date** radio button, and click the calendar icon to select the date for which you want to display the Provider Deposits,

or

Select the **Date Range** radio button, and click the calendar icons next to the **From** and **To** fields to select the date range of deposits you want to display.

Note: By default, the Date radio button is selected.

Click the **Show Deposits** button to view all deposits in order by settlement date, most recent first (or click the **Back to Services** link at the top of the page to return to the **Service** tab).

ebtEDGE.com Log Off

Home Services Documentation Help Topics News

Tuesday, October 20, 20XX

Save Search Result as ☐ Excel ☒ PDF

Provider Deposits

[Back to Services](#) [Back to DateSelection](#)

Location: D201234 - MEKONG MARKET

Deposit List [Printer Friendly Version](#)

Settlement Date	Settlement Amount	Deposit Type
04/03/20XX	\$700.00	Merchant Deposits Credit-DD
04/03/20XX	\$1480.25	Merchant Deposits Credit-DD
04/03/20XX	\$410.00	Merchant Deposits Credit-DD
11/17/20XX	\$700.00	Merchant Deposits Credit-DD
11/17/20XX	\$1480.25	Merchant Deposits Credit-DD
11/17/20XX	\$410.00	Merchant Deposits Credit-DD

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Provider Deposits

Click the **Next** link on the page to view the next set of Provider Deposits.

Click the **Back to Services** link at the top of the page to return to the Services tab.

Click the **Back to Date Selection** link at the top of the page to return to the Provider Deposits - Date Range page.

To save a search result

1. Select the category from the drop-down list next to the **Save Search Result** field. By default, the value "Summary-This Page" displays in the Save Search Result field.
2. If you select the **Excel** radio button next to the **Save Search Result** field and click the **Save** button, the displayed Provider Deposits list opens in an Excel format:

The screenshot shows an Excel spreadsheet with the following content:

	A	B	C	D	E	F
1						
2	Search Criteria					
3						
4	Location:	D201234 - MEKONG MARKET				
5	Agency:	KSSRS				
6	Date/Date Range:	10/01/20XX to 10/08/20XX				
7						
8	Transaction Summary					
9						
10	Settlement Date	Settlement Amount	Deposit Type			
11	04/03/20XX	\$700.00	Merchant Deposits Credit-DD			
12	04/03/20XX	\$1480.25	Merchant Deposits Credit-DD			
13	04/03/20XX	\$410.00	Merchant Deposits Credit-DD			
14	11/17/20XX	\$700.00	Merchant Deposits Credit-DD			
15	11/17/20XX	\$1480.25	Merchant Deposits Credit-DD			
16	11/17/20XX	\$410.00	Merchant Deposits Credit-DD			
17						
18						
19						
20						

At the bottom of the spreadsheet, there is a tab labeled "Provider" and a status bar showing "Ready" and "100%".

Search Result – Excel

- If you select the **PDF** radio button next to the **Save Search Result** field and click the **Save** button, the displayed Provider Deposits list opens as a PDF file.

Search Criteria

Location: D201234 - MEKONG MARKET
 Agency: KSSRS
 Date/Date Range: 10/01/20XX to 10/08/20XX


Transaction Summary

Settlement Date	Settlement Amount	Deposit Type
04/03/20XX	\$700.00	Merchant Deposits Credit-DD
04/03/20XX	\$1480.25	Merchant Deposits Credit-DD
04/03/20XX	\$410.00	Merchant Deposits Credit-DD
11/17/20XX	\$700.00	Merchant Deposits Credit-DD
11/17/20XX	\$1480.25	Merchant Deposits Credit-DD
11/17/20XX	\$410.00	Merchant Deposits Credit-DD

Search Result – PDF

Print page

You can also print directly from the Providers Deposits page, by clicking on the **Printer Friendly Version** link:


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Save Search Result

Summary - This Page

as

☐ Excel
 ☒ PDF

Save

Provider Deposits

[Back to Services](#) [Back to DateSelection](#)

Location: D201234 - MEKONG MARKET

Deposit List Printer Friendly Version

Settlement Date	Settlement Amount	Deposit Type
04/03/20XX	\$700.00	Merchant Deposits Credit-DD
04/03/20XX	\$1480.25	Merchant Deposits Credit-DD
04/03/20XX	\$410.00	Merchant Deposits Credit-DD
11/17/20XX	\$700.00	Merchant Deposits Credit-DD
11/17/20XX	\$1480.25	Merchant Deposits Credit-DD
11/17/20XX	\$410.00	Merchant Deposits Credit-DD

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Search Result – Printer Friendly Option

The printable page contains instructions to click the Print icon on your browser and a link to **Back to Deposit List** to return to the regular view:

Click the Print icon on your browser window or click File and then Print

Provider Deposits

[Back to Deposit List](#)

Deposit List

Settlement Date	Settlement Amount	Deposit Type
04/03/20XX	\$700.00	Merchant Deposits Credit-DD
04/03/20XX	\$1480.25	Merchant Deposits Credit-DD
04/03/20XX	\$410.00	Merchant Deposits Credit-DD
11/17/20XX	\$700.00	Merchant Deposits Credit-DD
11/17/20XX	\$1480.25	Merchant Deposits Credit-DD
11/17/20XX	\$410.00	Merchant Deposits Credit-DD

Provider Deposits – Printable Page

To view the deposit details

Click on the **Settlement Date** link in the Provider Deposits page to view the Provider Deposits Detail page:

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Save Search Result Summary - This Page as ☐ Excel ☒ PDF

Provider Deposits Detail

[Back to Services](#) [Back to Deposit List](#)

Location: D201234 - MEKONG MARKET

Deposit Detail [Printer Friendly Version](#)

Date	Time	TranType	First Name	Last Name	Card	Amount
04-03-20XX	09:49 AM	CASH PURCHASE	MARY	SMITH	XXXXXXXXXXXX3998	\$1.00
04-03-20XX	09:34 AM	CASH PURCHASE	MARY	SMITH	XXXXXXXXXXXX3998	\$1.00

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Provider Deposits Detail

The Providers Deposit Detail page contains the same options as the Provider Deposit page to open the page in **Excel** or **PDF** to print or save to your computer. There is also a **Printer Friendly Version** link to open a page for printing.

[Click the Print icon on your browser window or click File and then Print](#)

Provider Deposits Detail

[Back to Deposit List](#)

Location: D201234 - MEKONG MARKET

Deposit Detail [Printer Friendly Version](#)

Date	Time	TranType	First Name	Last Name	Card	Amount
04-03-20XX	09:49 AM	CASH PURCHASE	MARY	SMITH	XXXXXXXXXXXX3998	\$1.00
04-03-20XX	09:34 AM	CASH PURCHASE	MARY	SMITH	XXXXXXXXXXXX3998	\$1.00

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Provider Deposits Detail – Printer Friendly Option

View Provider Transactions

Select the link on the **Services** tab to view the Provider Transactions list.

The screenshot shows the ebtEDGE Provider Portal interface. At the top, there's a navigation bar with tabs: Home, Services, Documentation, Help Topics, and News. Below this, there's a filter section with a 'Filter By' dropdown set to 'Approved', a 'Save Search Result' dropdown set to 'Summary - This Page', and radio buttons for 'Excel' (selected) and 'PDF'. There are 'Export' and 'Refresh' buttons. The main section is titled 'Provider Transactions' and contains a table with the following data:

Date	Time	Tran Type	Method	First Name	Last Name	Case Number	Card	Amount	Confirmation #
12/02/20XX	17:50	CHILD CARE TRANSFER	WEB	MARY	SMITH	8116085883	XXXXXXXXXXXX42459	\$873.80	778579
12/02/20XX	14:32	CHILD CARE TRANSFER	ARU	RYAN	KRUEGER-SEELOW	7188327271	XXXXXXXXXXXX84907	\$890.31	777734
12/02/20XX	13:22	CHILD CARE TRANSFER	WEB	MARY	SMITH	5113407054	XXXXXXXXXXXX42459	\$650.15	777436

Provider Transactions

Select an option from the **Filter By** drop-down selector to show the following transactions in the list:

- Approved
- Declined
- All

Click the **Next** link on the page to view the next set of Provider Transactions.

Click the **Refresh** button to refresh the list using the options you have currently selected.

To export a search result

1. Select the category from the drop-down list next to the **Save Search Result** field. By default, the value "Summary-This Page" displays in the Save Search Result field.
2. If you select the **Excel** radio button next to the **Save Search Result** field and click the **Export** button, the displayed Provider Transactions list opens in an Excel format:

The screenshot shows an Excel spreadsheet with the following data:

Date	Time	Tran Type	Method	First Name	Last Name	Case Number	Card	Amount	Confirmation #
12/02/20XX	17:50	CHILD CARE TRANSFER	WEB	MARY	SMITH	8116085883	XXXXXXXXXXXX42459	\$873.8	778579
12/02/20XX	14:32	CHILD CARE TRANSFER	ARU	MORGAN	BAAKE	7188327271	XXXXXXXXXXXX84907	\$890.31	777734
12/02/20XX	13:22	CHILD CARE TRANSFER	WEB	MARY	SMITH	5113407054	XXXXXXXXXXXX42459	\$650.15	777436

Search Result – Excel

3. If you select the **PDF** radio button next to the **Save Search Result** field and click the **Export** button, the displayed Provider Transactions list opens as a PDF file.

Provider Transactions

Date	Time	Tran Type	Method	First Name	Last Name	Case Number	Card	Amount	Confirmation #
12/02/20XX	17:50	CHILD CARE TRANSFER	WEB	MARY	SMITH	8116085883	XXXXXXXXXXXX42459	\$873.80	778579
12/02/20XX	14:32	CHILD CARE TRANSFER	ARU	MORGAN	BAAKE	7188327271	XXXXXXXXXXXX84907	\$890.31	777734
12/02/20XX	13:22	CHILD CARE TRANSFER	WEB	MARY	SMITH	5113407054	XXXXXXXXXXXX42459	\$650.15	777436

Search Result – PDF

Supply Requests

Select the link on the **Services** tab to order products, submit your order form, and request for the ordered products to be shipped to your mailing address.

There is also a link to **View Previous Orders**.

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Supply Requests [Back to Services](#)

On this page:

- Order Supplies
- [View Previous Orders](#)

Order Supplies

Select the product(s), enter the quantity, and click Add>>.

Product:

Quantity:

Note: Off-line Vouchers must be ordered in quantities of 50 (i.e.: 50, 100, 150 etc.). Quantity restrictions do apply.

Orders placed for the same product(s) must be more than 24 hours apart.

Item Description :

Child Care Provider Non Traditional Quick Reference Guide.

Add >>

Order this

Create Order Form

Remove

Clear All

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Supply Requests

Order Supplies

1. Select the product(s) from the drop-down list next to the **Product** field. The description of the selected product item(s) to be ordered display in the **Item Description** box.
2. Enter the number of products that you want to order in the **Quantity** field.
3. Click the **Add** button. The ordered product(s) list display in the **Order this** box.

To *remove* selected products from the displayed list:

Click on a product in the **Order this** list box, and click the **Remove** button. The removed products are moved back from the **Order this** box to the **Item Description** box.

To remove *all* the products from the displayed list:

Select all the products by clicking on each in the **Order this** box, and click the **Clear All** button. All the products are moved back from the **Order this** box to the **Item Description** box.

4. Click the **Create Order Form** button. The Supply Requests – Shipping Information page displays:

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Supply Requests *Required

Shipping Information

i Verify shipping information before submitting your order to ensure prompt delivery of your supplies.

*Shipping Address 1: 1640 N BROADWAY

Shipping Address 2:

*City: WICHITA

*State: KS

*Postal Code: 67214 -

Store Name: MEKONG MARKET

*Contact Name:

Note: Do not use a P.O. Box for a shipping address. Supplies cannot be mailed to a P.O. Box.

Order Detail

To delete an item from the order, select the checkbox next to the product name and click Delete Checked Items.

Delete	Product	Quantity	Order Date
<input type="checkbox"/>	ChildCare Non Trad QRG	100	10/20/XX

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Supply Requests – Shipping Information

The Supply Requests – Shipping Information page has two sections:

- Shipping Information
- Order Detail

Shipping Information Section

The Shipping Information section displays the shipping information data from the database. Verify the shipping address before submitting the order to ensure prompt delivery of the products that you ordered.

Note: You cannot update the shipping address details, as address information is a one time event for shipment of the order.

Order Detail Section

In the Order Detail section, you can perform the following tasks:

- Delete the ordered product(s) from the list
- Add more products to the ordered list
- Submit the order
- Cancel the order

To delete products from the ordered list

1. Select the checkbox(es) below the **Delete** field for products to be deleted from the displayed list in the Order Detail section of the Supply Requests - Shipping Information page.

The screenshot displays the 'Supply Requests' page in the ebtEDGE Provider Portal. The top navigation bar includes links for Home, Services, Documentation, Help Topics, and News. The page is dated Wednesday, October 21, 20XX. The 'Shipping Information' section contains a form for verifying shipping details, including fields for Shipping Address 1, Shipping Address 2, City, State, Postal Code, Contact Name, and Store Name. The 'Order Detail' section features a table with columns for Delete, Product, Quantity, and Order Date. The table lists one item: 'ChildCare Non Trad QRG' with a quantity of 100 and an order date of 10/20/XX. A 'Delete Checked Items' button is highlighted with a red box. The page also includes a footer with links for Online Privacy Notice, FIS Privacy Policy, and Terms and Conditions, and a copyright notice for ©20XX Fidelity National Information Services, Inc. and its subsidiaries.

Supply Requests – Delete Checked Items

2. Click the **Delete Checked Items** button. The selected ordered products are deleted from the displayed list.


To add more products to the ordered list

1. Click the **Add More Items** button in the Order Detail section of the Supply Requests - Shipping Information page:

Supply Requests – Add More Items

To submit the order

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Supply Requests *=Required

Shipping Information


Verify shipping information before submitting your order to ensure prompt delivery of your supplies.

*Shipping Address 1: 1640 N BROADWAY X

Shipping Address 2:

*City: WICHITA

*State: KS

*Postal Code: 67214 -

Store Name: MEKONG MARKET

*Contact Name:

Note: Do not use a P.O. Box for a shipping address. Supplies cannot be mailed to a P.O. Box.

Update Shipping Address

Order Detail

To delete an item from the order, select the checkbox next to the product name and click Delete Checked items.

Delete	Product	Quantity	Order Date
<input type="checkbox"/>	ChildCare Non Trad ORG	100	10/20/XX

Delete Checked Items

Add More Items

Submit Order

Cancel Order

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Supply Requests – Submit Order

A confirmation message displays on the Supply Requests page indicating that the order was submitted successfully.

To cancel the order

Click the **Cancel Order** button in the Order Detail section of the Supply Requests - Shipping Information page.



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Wednesday, October 21, 20XX

Supply Requests **Required

Shipping Information

i

Verify shipping information before submitting your order to ensure prompt delivery of your supplies.

*Shipping Address 1: ✕

Shipping Address 2:

*City:

*State: ▼

*Postal Code: -

Store Name: **MEKONG MARKET**

*Contact Name:

Note: Do not use a P.O. Box for a shipping address.
Supplies cannot be mailed to a P.O. Box.

Order Detail

To delete an item from the order, select the checkbox next to the product name and click Delete Checked items.

Delete	Product	Quantity	Order Date
<input type="checkbox"/>	ChildCare Non Trad QRG	100	10/20/XX

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Supply Requests – Cancel Order

Your order is cancelled and you are returned to the Supply Requests page.