## Payments > POS Payment - Credit Card Scanner

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## Credit Card Scanner Setup

To start scanning credit cards into SchoolCare Works, plug your card reader device into a USB port on your Windows computer. There is no software or driver to install if your device is already configured in keyboard mode. Supported browsers include Google Chrome, Firefox, and Internet Explorer/Edge.

**Important**: The Credit Card scanner is only available for use with specific payment processors. Contact your Account Manager for more information.

## Using the Credit Card Scanner

- 1. Navigate to the **Payments** > **POS Payments** screen.
- 2. Search for a family by last name, then select the family.

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	me	Family	Payments	Attendance	Lessons	Meals	Connect	Approvals	Reports	Staff	Setup	۹		
ayments > POS Payment														
Sear	rch P	Payer A	Accounts											
Last Name														
Q miller								Include inactive families						
iller Family (Carson, Stephanie, Steve, Steven) - Miller, Steve (ld: 810174)														
🐸 miller Family (Carson, Stephanie, Steve, Steven) - Miller-Baily, Christa (ld: 810175)														

- 3. Enter the **Payment Amount**.
- 4. Swipe the credit/debit card. The following fields will auto-populate:
  - 1. First Name
  - 2. Last Name
  - 3. Card Type
  - 4. Credit/Debit Card Number
  - 5. Expiration Month
  - 6. Expiration Year
- 5. Fill in any missing details (address, phone, etc.).
- 6. Click Make Payment to submit the payment.

Ente	a Bank Check or Credit/	Debit (	Card								
Please	fill in the fields below and click the "	Make Pay	syment" Button. Please verify the information before submitting the payment.								
Payme	nt Method *										
•	Card Payment	-	Paying Account								
Payme	nt Amount *		miller Family (Carson, Stephanie, Steve, Steven) - Miller, Steve (Id: 810174)								
\$	200.00	*	Balance Outstanding: \$ 1575.00 Internal Note -								
Paye	r/Billing Information										
First N	ame *		Last Name *								
	Steve	*	👗 Miller 🖈								
Billing	Address 1 *		Billing Address 2								
•	220 Main St	*	•								
City *			State/Province * Zip/Postal Code *								
•	Rochester	<b>*</b>	Image: MI Michigan Image:	*							
Phone	Number *		Email Address								
S.	(248) 354-1866	*									
Cred	it Card Information										
Card Tv	/pe *		Card Number *								
	Visa	•	<b>#</b> 4111111111111								
Expirat	ion Month *		Expiration Year *								
<b>#</b>	07-July	-	28								
	Make Payment										
	Hake Tayment										