



Place an Order using your Renewal Quote

Based on your order history, your renewal quote is ready for processing. Follow these steps to view and place the order:

1. Log in to cap.org.
2. Click **Shop**.

Important: Review the drop down menu labeled **I'm making purchases for** to ensure you are making the purchase on behalf of the correct organization.

3. Click **Renew Your Order Now** from within the Welcome Bin.
4. Ensure the radio button is selected for the renewal quote.
5. Use the **Actions** drop down menu to **Update Quote** and click **Go** or click **Checkout** to begin your transaction.

ABOUT THE CAP SHOP CONTACT & SUPPORT

JACQUELINE

COLLEGE of AMERICAN PATHOLOGISTS Search

I'm making purchases for 419760101 -- College of American Pathol...

WELCOME PROFICIENCY TESTING/EDA QUALITY MANAGEMENT LEARNING PUBLICATIONS

Help

QUOTES

Please note that system response may be slower when processing multiple items. Please be patient. We apologize for the inconvenience.

Click the quote name to access the quote details.

Select a quote and...

Indicates your current quote

Select	Quote Name	Quote Number	Expiration Date	Updateable	Orderable
<input type="radio"/>	CAP# 4197601-01 : 2020 Renewal Quote	317266	31-JUL-2020	Yes	Yes
<input type="radio"/>	CAP# 4197601-01 : 2020 Renewal Quote	300019	14-SEP-2019	Yes	Yes

Checkout Actions: Update Quote Go

Jacqueline White
Lab Account #
419760101

Address:
325 Waukegan Rd
Northfield IL 60093-2750
UNITED STATES

Log out

RENEW YOUR ORDER NOW

- a. When choosing **Update Quote**, the prepopulated quote is moved into the **Shopping Cart**. Items are now editable and the **Continue Shopping** button can be used to add additional items to the cart.
- b. When you've added all desired items, click **Shopping Cart**.
 - i. Click **Checkout** to begin your transaction.



6. Review **Ship To** and **Shipping Details**.
7. Click **Next**.

The screenshot shows the 'SHIPPING' section of a checkout page. It includes tabs for 'SHIPPING', 'BILLING', and 'ORDER REVIEW'. The 'SHIP TO' section is highlighted with a blue circle containing the number '6'. It contains two rows of information, each with an 'UPDATE' button: 'Ship to Contact' (Ferdinand Rivera, +1 847-832-7294 Ext.7294, rdeleon@cap.org) and 'Ship To Address' (325 Waukegan Rd, Northfield, IL 60093-2750, UNITED STATES). The 'SHIPPING DETAILS' section is highlighted with a blue circle containing the number '7'. It shows a 'Shipping Method' dropdown set to 'Parcel-Ground' with a note: 'Your selected shipping method is only applied to the publication items in the shopping cart.' Three orange callout boxes provide tips: one for updating 'Ship to Contact', one for updating 'Shipping Method', and one for updating 'Ship to Address'. At the bottom, there are links for 'Shopping Cart', 'Actions', 'Save Cart', 'GO', and 'NEXT' (highlighted with a blue circle containing '7').

TIP: You may update **Ship to Contact** by clicking **Update**.

TIP: **Shipping Method** updates affect publication purchases only. This option is only visible if you have added publications to your cart.

TIP: You may update **Ship to Address** by clicking **Update**.



8. Review **Bill To** and make any required edits.

SHIPPING **BILLING** ORDER REVIEW

CHECKOUT: BILLING AND PAYMENT INFORMATION

Required Fields Shopping Cart Actions Save Cart GO BACK Step 2 of 3 NEXT

Bill To

Bill To Customer: College of American Pathologists,419760102

Bill To Contact: Russell De Leon
+1 847-832-7000 Ext.7227
christine.d.angelo@leehealth.org

Bill To Address: 325 Waukegan Rd
Northfield,IL 60093-2750
UNITED STATES

Payment

Credit Card ?

Add A New Card

Please enter the required information for your credit card.

Card Holder Name:

Type: American Express

Number:

Expiration: 05 2019

Please ensure all credit card information is correct before continuing.

Wire Transfer ?

Purchase Order ?

Tax Information ?
Add Tax Exempt Certificate

Description	Category	Added Date	Remove
-------------	----------	------------	--------

Shopping Cart Actions Save Cart GO BACK Step 2 of 3 NEXT

TIP: To update your **Bill to Customer** by using the dropdown list of values. To update your **Bill to Contact** or **Bill to Address**, click the corresponding **Update**.

TIP: To Save Cart or Print Quote, select your option from **Actions** drop down menu and click **GO**.

9. Use the **Payment** radio buttons to select your payment type.

10. After you have added your payment information, click **Next**.

SHIPPING **BILLING** ORDER REVIEW

CHECKOUT: BILLING AND PAYMENT INFORMATION

Required Fields Shopping Cart Actions Save Cart GO BACK Step 2 of 3 NEXT

Bill To

Bill To Customer: College of American Pathologists,419760102

Bill To Contact: Russell De Leon
+1 847-832-7000 Ext.7227
christine.d.angelo@leehealth.org

Bill To Address: 325 Waukegan Rd
Northfield,IL 60093-2750
UNITED STATES

Payment

Credit Card ?

Add A New Card

Please enter the required information for your new credit card.

Card Holder Name:

Type: American Express

Number:

Expiration: 05 2019

Please ensure all credit card information is correct before continuing.

Wire Transfer ?

Purchase Order ?

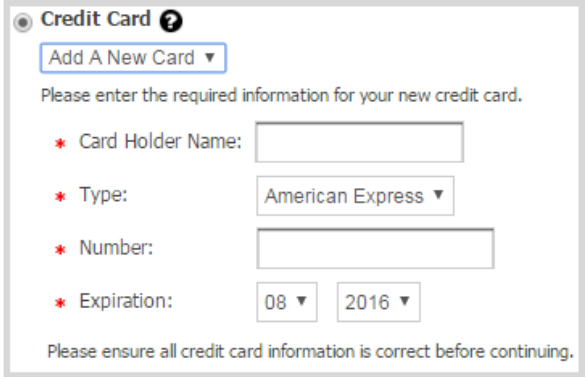
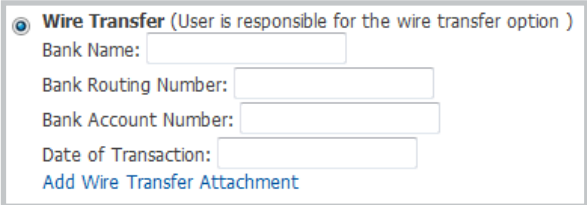
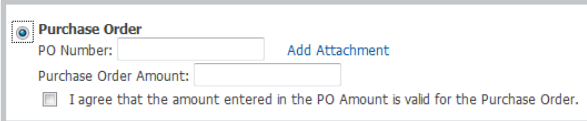
Tax Information ?
Add Tax Exempt Certificate

Category	Added Date	Remove
----------	------------	--------

Shopping Cart Actions Save Cart GO BACK Step 2 of 3 NEXT

TIP: Selecting different payment options will change the fields required. See table on next page for details.



Payment Type	Description	Image
Credit Card	Select a previously used credit card or click the drop down menu to add a new credit card.	 <p>The screenshot shows a 'Credit Card' payment form. It includes a radio button to select 'Credit Card', a dropdown menu for 'Add A New Card', and a text prompt: 'Please enter the required information for your new credit card.' Below this are four required fields: 'Card Holder Name' (text input), 'Type' (dropdown menu with 'American Express' selected), 'Number' (text input), and 'Expiration' (two dropdown menus for month and year, with '08' and '2016' selected). A final note states: 'Please ensure all credit card information is correct before continuing.'</p>
Wire Transfer	Enter Bank Name, Bank Routing Number, Bank Account Number, and Date of Transaction. You must also Add Wire Transfer Attachment.	 <p>The screenshot shows a 'Wire Transfer' payment form. It features a radio button to select 'Wire Transfer (User is responsible for the wire transfer option)'. Below are four text input fields: 'Bank Name', 'Bank Routing Number', 'Bank Account Number', and 'Date of Transaction'. A blue link 'Add Wire Transfer Attachment' is located at the bottom of the form.</p>
Purchase Order	Enter PO Number and Purchase Order Amount; and agree to the terms. You may also Add Attachment.	 <p>The screenshot shows a 'Purchase Order' payment form. It includes a radio button to select 'Purchase Order', a text input for 'PO Number', and a blue link 'Add Attachment'. Below is a text input for 'Purchase Order Amount' and a checkbox with the text: 'I agree that the amount entered in the PO Amount is valid for the Purchase Order.'</p>



11. Review the contents of your order.
12. Agree to the [Terms & Conditions](#) by checking the box.
13. Click [Place Order](#) to complete your transaction.

[SHIPPING](#) [BILLING](#) **[ORDER REVIEW](#)**

CHECKOUT: REVIEW AND PLACE ORDER

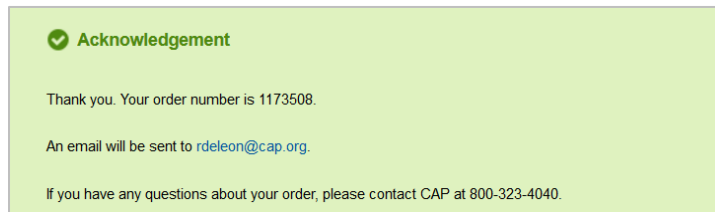
TIP: To make changes to your order, click **Back**.

Shopping Cart Actions Save Cart Step 3 of 3

Customer Information				
Customer: College of American Pathologists				
Shipping Information				
<input type="button" value="UPDATE"/>				
Ship To: Ferdinand Rivera 325 Waukegan Rd Northfield,IL 60093-2750 UNITED STATES rdeleon@cap.org +1 847-832-7294 Ext.7294	Bill To: Eleonora Savitchi, MD 1683 Renfroe Pl Brookhaven,GA 30319 UNITED STATES			
Shipping Method: Parcel-Ground	Payment Type: Purchase Order PO Number: 12345 Purchase Order Amount: 652.00			
Special Instructions:				
Payment Term: NET 30 DAYS				
File	Description	Category	Added Date	
No attachments have been added.				
Item Number	Item Name	UOM	Quantity	Price
AQ	CRITICAL CARE BLOOD GAS	Each	1	\$486.00
PUB210	COLOR ATLAS OF HEMATOLOGY: AN ILLUSTRATED FIELD GUIDE BASED ON PROFICIENCY TESTING	Each	1	\$125.00
Sub-Total: \$611.00				
Fuel Surcharge: \$4.86				
Shipping and Handling: \$0.00				
Tax: \$36.12				
Total: \$651.98				
Terms And Conditions				
<input type="checkbox"/> You must check this box to accept the CAP's Terms & Conditions to proceed with your order.				

Important: Do not click the back button or navigate away from the page.

When your order has processed, the acknowledgement message will appear.



A separate order confirmation will be emailed to the shipping contact once the order has been confirmed.