

To make a payment on the portal:

Go to www.partners-mo.com

Click on “Make a Payment”

Please be aware:

YOU ARE NOT ON A WEBSITE OWNED OR OPERATED BY PARTNERS FINANCIAL SERVICES - WE ARE NOT RESPONSIBLE FOR AND WE HAVE NO CONTROL OVER CONTENT THAT APPEARS BEYOND THIS POINT. Please call 800-926-1303 Option 3 if you have any questions or concerns. Our hours of operation: Monday – Friday 8:00am to 5:00pm Central Time By continuing to make a payment on this website, you understand and agree that you may be contacted via email, cell phone, or electronic dialer. Payments entered after 2:00 pm Central time may be processed the following business day.*** If your account has been placed with an attorney, the balance information on this webpage is NOT accurate. Correct information MUST be obtained by contacting the attorney. If you need the contact information for the attorney, or if you are unsure if your account has been placed with an attorney, please call our office - we will be happy to assist you.

Pay by Check



Please provide us with the following information so that we can retrieve your account information

Account Number

Last 4 of your SSN

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This communication is from a debt collector and is an attempt to collect a debt. Any information obtained will be used for that purpose.

Select the payment method at the top of the page. Enter your full 9-digit account number (leading zeroes are required) and the last four digits of your Social Security Number

“Click Retrieve Info”



Pay by Credit Card

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This communication is from a debt collector and is an attempt to collect a debt. Any information obtained will be used for that purpose. Please review this information and Make Full Payment or Arrange Payment.

Personal Information

Name: Consumer_Test
 Address: 575 Rudder Street
 FENTON, MO 63026
 Phones: (555) 321-5555
 (000) 000-0000
 Tax ID/SSN 123-45-6789
 Drivers License # 987654321
 Date of Birth 06-01-1993

Account Information

Account Number 000000255
 Other Account Number

Financial Information

Initial Referred Amount **\$ 1210.00**
 Other / Misc Charges **\$ 0.00**
 Interest Due **\$ 130.71**
 Payments / Credits **\$ -278.95**
 Payoff **\$ 1621.02**

Loan Information

| | | | |
|---------------------------|------------|-----------------------------|------------|
| Payoff as of 09/19/2018 | \$ 1621.02 | Monthly Payment | \$ 50.00 |
| Due Date | 05 | Due Date 2 | |
| Past due as of 09/19/2018 | \$ 1247.62 | Amount due as of 09/19/2018 | \$ 1276.57 |

Original Creditor [expand](#)

Make a Full Payment in the amount of: \$ 1621.02

Continue >>

Make a One Time Payment in the Amount of \$

Continue >>

Choose your option from the bottom section and click the appropriate "Continue" button

Pay by Check

1 payments in the amount of \$100.00 + \$2.00 convenience fee

Enter your billing information as displayed on your Bank Statements:

| | | | | |
|------------------|---|------------------------------------------------|---------------------|------------------------------------|
| First Name | * | <input type="text"/> | | |
| Last Name | * | <input type="text"/> | | |
| Address | * | <input type="text" value="575 Rudder Street"/> | | |
| City | * | <input type="text" value="FENTON"/> | | |
| State | * | <input type="text" value="MO"/> | Zip * | <input type="text" value="63026"/> |
| Phone | * | <input type="text" value="5553215555"/> | | |
| Email Address | * | <input type="text"/> | | |
| Bank Name | * | <input type="text"/> | Check No. * | <input type="text"/> |
| Bank Account No. | * | <input type="text"/> | ABA / Routing No. * | <input type="text"/> |

Your payment will be charged within 1 business day.

by checking this box you agree to the above terms.

Pay by Credit Card

1 payments in the amount of \$100.00 + \$0.00 convenience fee

Enter your billing information as displayed on your Credit Card Statements:

| | | | | |
|-----------------|---|-----------------------------------------------------------------|-------|------------------------------------|
| First Name | * | <input type="text"/> | | |
| Last Name | * | <input type="text"/> | | |
| Address | * | <input type="text" value="575 Rudder Street"/> | | |
| City | * | <input type="text" value="FENTON"/> | | |
| State | * | <input type="text" value="MO"/> | Zip * | <input type="text" value="63026"/> |
| Phone | * | <input type="text" value="5553215555"/> | | |
| Email Address | * | <input type="text"/> | | |
| Credit Card No. | * | <input type="text"/> | | |
| Expiration | * | <input type="text" value="01"/> <input type="text" value="18"/> | | |

Your payment will be charged within 1 business day.

by checking this box you agree to the above terms.

Fill out the appropriate information, click the box agreeing to terms and then click schedule payment.

Thank you for your payment.

This payment will post to your account within 24 hours.

If you have any further questions regarding your account please contact us.