

**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1327186

**Vendor Name:** Physicians Immediate Care - Chicago

**Check Details:**

**Check Number:** 0336427

**Check Amount:** \$ 1,772.00

**Check Date:** 3/4/2025

**Invoice Details:**

**Invoice Number:** 4445306

**Invoice Date:** 2/6/2025

**PO Number:** B0002406

**Voucher Number:** V0874970

**Document Type:** AP Invoice

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**Document Below**

# INVOICE DUE STATEMENT

**i** Have questions about your bill?  
Hours: 8:00-4:30 (EST) Mon-Fri  
Email us at: [picemployersupport@wellnow.com](mailto:picemployersupport@wellnow.com)

## Addressee



COLLEGE OF DUPAGE TRUCK SCHOOL  
301 S SWIFT RD STE 6  
ADDISON IL 60101-1492

# Online Bill Pay

Make a fast, secure one-time  
payment today.



Pay Online: [www.personapay.com/wellnowoccmcd](http://www.personapay.com/wellnowoccmcd)

Account Number	Due Date	Amount Due	Amount Paid
15236	Upon Receipt	\$1,772.00	\$

Please make checks payable and remit to:



Physicians Immediate Care  
P.O. Box 1986  
Albany NY 12201

Please detach and return top portion with payment.

Account Number	Employer Name	Invoice Date	Due Date
15236	COLLEGE OF DUPAGE TRUCK SCHOOL	02/06/2025	Upon Receipt

Date	Service Description	Status	Charges	Payments/ Adjustments	Patient Balance
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**AMOUNT DUE: \$1,772.00**

**"Vegetabile, Jim"** <vegetabilej@cod.edu>

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**Physicians Inv**

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**"Vegetabile, Jim"** <vegetabilej@cod.edu>

Mon, Feb 17, 2025 at 03:02 PM UTC

CC: Hasse, Debra <hassed@cod.edu>

BCC:

Good Morning,

Could you please process the attached invoice.

Thanks,

**Jim Vegetabile**

CDL Program Manager

College Of DuPage Truck Driving School

301 S. Swift Road, Door #6, Addison, IL 60101

630-942-2275 | [vegetabilej@cod.edu](mailto:vegetabilej@cod.edu) | Fax – 630-953-9105

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**1 attachment**

1642\_001.pdf