

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1327186

Vendor Name: Physicians Immediate Care - Chicago

Check Details:

Check Number: 0342699

Check Amount: \$ 1,292.00

Check Date: 9/23/2025

Invoice Details:

Invoice Number: 4472795

Invoice Date: 9/10/2025

PO Number: B0003119

Voucher Number: V0904495

Document Type: AP Invoice

Document Below

physicians
immediate care

Now part of
wellnow.
Urgent Care

P.O. Box 10157 | Albany NY 12201-5157

INVOICE DUE STATEMENT

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

Addressee

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

Page 1 of 2

Online Bill Pay

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payment today.

Pay Online: www.personapay.com/wellnowoccmcd

Account Number	Due Date	Amount Due	Amount Paid
15236	Upon Receipt	\$1,103.00	\$

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	09/10/2025	Upon Receipt

Date	Service Description	Status	Charges	Payments/ Adjustments	Patient Balance	
Invoice #: 4472795						
07/16/2025	CUEVAS, LUIS NIDA DRUG SCREEN	Due Now	\$79.00	\$0.00	\$79.00	
07/16/2025	DOT EXAM		\$110.00	\$0.00	\$110.00	
08/05/2025	FOLEY, KONNER NIDA DRUG SCREEN		\$79.00	\$0.00	\$79.00	
08/05/2025	DOT EXAM		\$110.00	\$0.00	\$110.00	
Invoice Total:					\$378.00	
Invoice #: 4477248						
08/12/2025	HERNANDEZ, JORGE NIDA DRUG SCREEN	Due Upon Reciept	\$79.00	\$0.00	\$79.00	
08/14/2025	LOPEZ, ALEJANDRO NIDA DRUG SCREEN		\$79.00	\$0.00	\$79.00	
08/14/2025	DOT EXAM		\$110.00	\$0.00	\$110.00	
08/18/2025	HARDIN, JOSHUA NIDA DRUG SCREEN		\$79.00	\$0.00	\$79.00	
08/18/2025	SAINT LOVE, AARON NIDA DRUG SCREEN		\$79.00	\$0.00	\$79.00	
08/18/2025	DOT EXAM		\$110.00	\$0.00	\$110.00	

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www.personapay.com/wellnowoccmcd

AMOUNT DUE: \$1,103.00

"Vegetable, Jim" <vegetablej@cod.edu>

Physicians Invoice

"Vegetable, Jim" <vegetablej@cod.edu>

Tue, Sep 16, 2025 at 02:13 PM UTC

CC: Konczyk, Julie <konczyk@cod.edu>

BCC:

Good Morning,

Could you process the attached invoice, thank you.

Jim Vegetable

CDL Program Manager

College Of DuPage Truck Driving School

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

630-942-2275 | vegetablej@cod.edu | Fax – 630-953-9105

1 attachment

1895_001.pdf

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1327186

Vendor Name: Physicians Immediate Care - Chicago

Check Details:

Check Number: 0342699

Check Amount: \$ 1,292.00

Check Date: 9/23/2025

Invoice Details:

Invoice Number: 4476043

Invoice Date: 9/10/2025

PO Number: B0003119

Voucher Number: V0904499

Document Type: AP Invoice

Document Below

INVOICE DUE STATEMENT

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Email us at: picemployersupport@wellnow.com

Addressee

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

Online Bill Pay

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Account Number	Due Date	Amount Due	Amount Paid
1481998	Upon Receipt	\$189.00	\$

Please make checks payable and remit to:

Physicians Immediate Care
P.O. Box 1095
Albany NY 12201

Please detach and return top portion with payment.

Account Number	Employer Name	Invoice Date	Due Date
1481998	COLLEGE OF DUPAGE TRUCK SCHOOL	09/10/2025	Upon Receipt

Date	Service Description	Status	Charges	Payments/ Adjustments	Patient Balance
Invoice #: 4476043					
08/21/2025	DURAN, BENEDIKT NIDA DRUG SCREEN	Due Upon Reciept	\$79.00	\$0.00	\$79.00
08/21/2025	DOT EXAM		\$110.00	\$0.00	\$110.00
	Invoice Total:				\$189.00

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Enroll today at

www.personapay.com/wellnowocmed

AMOUNT DUE: \$189.00

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

Physicians Invoice

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

Tue, Sep 16, 2025 at 02:14 PM UTC

CC: Konczyk, Julie <konczyk@cod.edu>

BCC:

Good Morning,

Could you process the attached invoice, thank you.

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 | Fax – 630-953-9105

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