

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1327186  
Vendor Name: Physicians Immediate Care - Chicago  
Invoice Number: 4310280  
Invoice Date: 3/3/2023  
PO Number: B0000993  
Check Number: 0311871  
Check Amount: \$ 4,753.00  
Check Date: 05/09/2023  
Voucher Number: V0783264  
Document Type: AP Invoice

Document Below



**Customer Copy**

**Physicians Immediate Care - Chicago**  
**Billing Department**  
**PO BOX 8799**  
**CAROL STREAM, IL 60197-8799**  
**Phone: 855-631-4563**  
**Tax ID: 470902244**

<b>Statement Date</b>	<b>3/3/2023</b>
<b>Statement Number</b>	<b>4310280</b>
<b>Account Number</b>	<b>4138</b>
<b>Page Number</b>	<b>1</b>

**HR - Physicians Immediate Invoice 4310280**

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"Collsen, Dana" <collsend@cod.edu>

Mon, Apr 3, 2023 at 04:27 PM UTC

CC: Collsen, Dana <collsend@cod.edu>

BCC:

Invoicing,

Please pay attached FY23 invoice approved by Human Resources – Physicians Immediate Invoice #4310280 for **\$640.00** ONLY (Other charge is being disputed) with **B0000993**.

Thanks,

**Dana Collsen**

*Human Resources/Administrative Assistant*

**College of DuPage**

425 Fawell Blvd.

Human Resources: SRC 2134

Glen Ellyn, IL 60137

[collsend@cod.edu](mailto:collsend@cod.edu)

Phone: 630-942-2460

FAX: 630-942-4027

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**1 attachment**

\_2.3.2023 EPS statement PICCHAccount Number \_4138.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1327186  
Vendor Name: Physicians Immediate Care - Chicago  
Invoice Number: 4315863  
Invoice Date: 5/9/2023  
PO Number: B0000959  
Check Number: 0311871  
Check Amount: \$ 4,753.00  
Check Date: 05/09/2023  
Voucher Number: V0785170  
Document Type: AP Invoice

Document Below



Physicians Immediate Care - Chicago  
Billing Department  
PO BOX 8799  
CAROL STREAM, IL 60197-8799  
Phone: 855-631-4563  
Tax ID: 470902244

Please return with remittance

Statement Date	4/4/2023
Statement Number	4315863
Account Number	15236
Page Number	2

COLLEGE OF DUPAGE TRUCK SCHOOL  
301 S. SWIFT RD #6  
ADDISON, IL 60101, USA

2023 PO#0000959

Indicate	
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Physicians Immediate Care - Chicago  
Billing Department  
PO BOX 8799  
CAROL STREAM, IL 60197-8799  
Phone: 855-631-4563  
Tax ID: 470902244

COLLEGE OF DUPAGE TRUCK SCHOOL  
301 S. SWIFT RD #6  
ADDISON, IL 60101, USA

Please return with remittance

Statement Date	4/4/2023
Statement Number	4315863
Account Number	15236
Page Number	1

2023 PO#0000959

Indicate	
Amount Paid \$	



Physicians Immediate Care - Chicago  
Billing Department  
PO BOX 8799  
CAROL STREAM, IL 60197-8799  
Phone: 855-631-4563  
Tax ID: 470902244

Please return with remittance

Statement Date	4/4/2023
Statement Number	4315863
Account Number	15236
Page Number	3

COLLEGE OF DUPAGE TRUCK SCHOOL  
301 S. SWIFT RD #6  
ADDISON, IL 60101, USA

2023 PO#0000959

Indicate Amount Paid	\$
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"Vegetabile, Jim" <vegetabilej@cod.edu>

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**Physicians Immediate Care**

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

Tue, Apr 25, 2023 at 12:52 PM UTC

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

BCC:

Good Morning,

Please find attached the current statement/invoice for Physicians Immediate Care. This will get us up-to-date.

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**

Physicians Invoice.pdf

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1327186  
Vendor Name: Physicians Immediate Care - Chicago  
Invoice Number: 4315814  
Invoice Date: 4/4/2023  
PO Number: B0000993  
Check Number: 0311871  
Check Amount: \$ 4,753.00  
Check Date: 05/09/2023  
Voucher Number: V0785172  
Document Type: AP Invoice

Document Below

## Employer Paid Services Account Summary

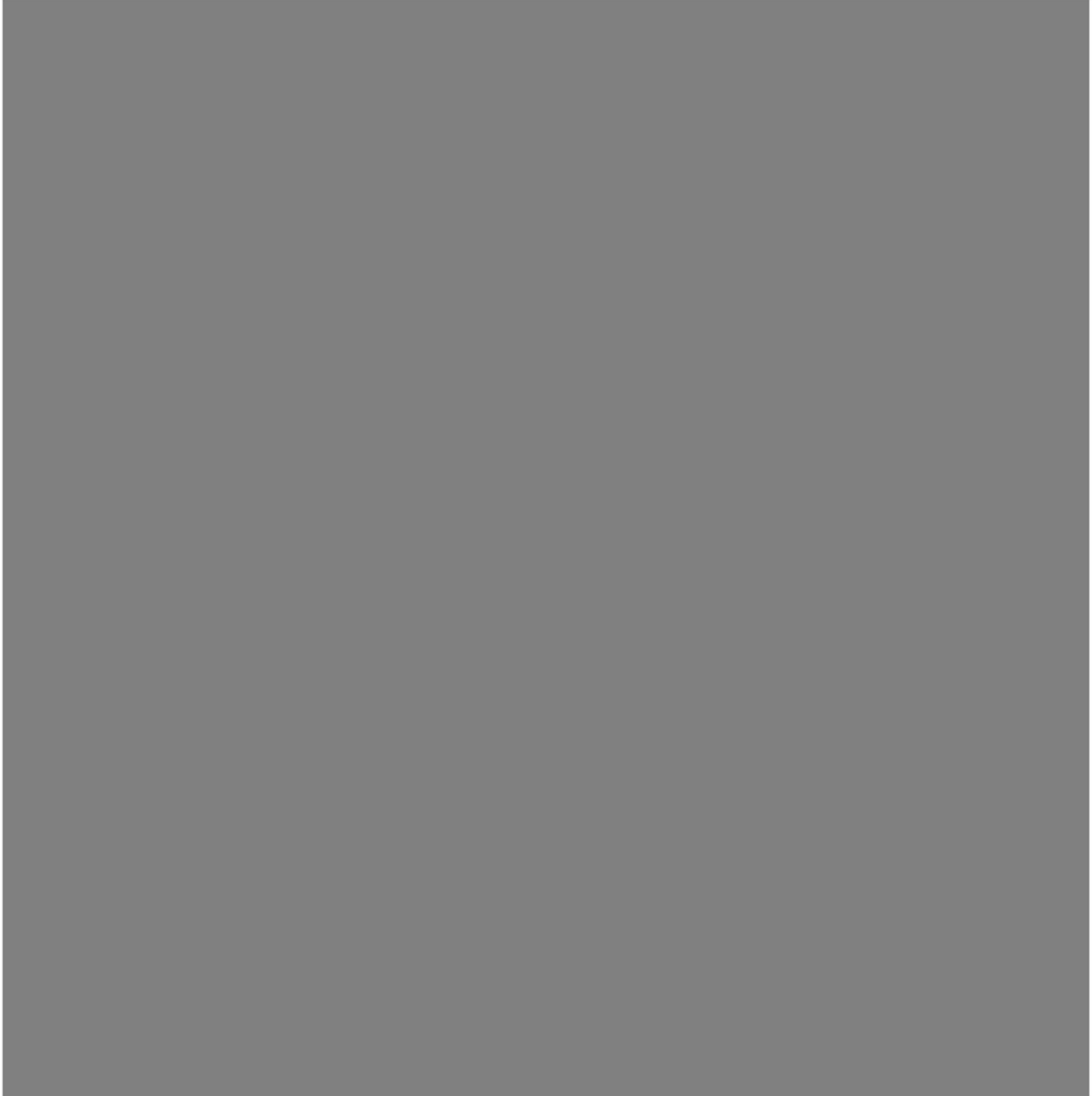
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Physicians Immediate Care - Chicago  
Billing Department  
PO Box 8799  
Carol Stream, IL 60197-8799  
855-631-4563  
Tax ID: 470902244

OK to PAY for Invoice Statement #4315814  
\$354.00 ONLY (Other charges have been paid  
previously.)

Date Range: 4/4/2023 - 4/4/2023

PO #B0000993



## Employer Paid Services Account Summary

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Physicians Immediate Care - Chicago  
Billing Department  
PO Box 8799  
Carol Stream, IL 60197-8799  
855-631-4563  
Tax ID: 470902244

Date Range: 4/4/2023 - 4/4/2023

PO #B0000993

COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137, USA  
630-942-2993

Account Number: 4138  
Page Number: 2



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**HR - Physicians Immediate Invoice - April Account Statement 4315814**

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"Collsen, Dana" <collsend@cod.edu>

Fri, Apr 21, 2023 at 04:23 PM UTC

CC: Collsen, Dana <collsend@cod.edu>, Barrios, Isabel <barriosi142@cod.edu>

BCC:

Invoicing,

Please pay approved for Human Resources – Physicians Immediate Invoice #4315814 with B0000993, or forward to Michelle Olson for final HR approval through Chrome River.

ISABEL: We have highlighted the current charges to pay, and the total (\$354.00) that should be the ONLY amount paid at this time, as other charges are assumed already paid/approved charges from previous months' billings. **This account statement was sent instead of the monthly Invoice, as they are currently experiencing a glitch in their billing systems.**

NOTE: Some charges on this statement are from previous billings that were already approved, and should have already been paid from those previously approved invoices. **Please recheck that all previous HR Physicians Immediate Invoices have been paid.**

Thanks,

**Dana Collsen**

*Human Resources/Administrative Assistant*

**College of DuPage**

425 Fawell Blvd.

Human Resources: SRC 2134

Glen Ellyn, IL 60137

[collsend@cod.edu](mailto:collsend@cod.edu)

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**1 attachment**

\_OCM\_24\_EPSStatements PICCH4.4.2023 eps statement\_PICCH-Account Number\_ 4138.pdf