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**MED-STOP MRO SERVICES**  
**9950 LAWRENCE AVE STE 403**  
**SCHILLER PARK IL 60176**  
**PHONE: (877) 633-3633**  
**FAX: (847) 647-6608**  
**EMAIL: mro@med-stop.com**

# MRO RESULT

**TO:**

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**ZIGI FREIGHT INC**  
**6850 W 63RD STREET**  
**CHICAGO IL 60638**  
**PHONE: (630) 485-7370**  
**FAX: (630) 485-6980**

**ATTENTION TO:**

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**NIKOLA STAMENKOVIC**

**SUBJECT:**

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**URINE DRUG TESTING RESULTS**

**DOCUMENT CREATED AT:**

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**03/22/2024 11:10 AM CDT UTC-5**

**PAGES:**

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**2**

**THIS SECURE FAX NUMBER HAS BEEN PROVIDED TO MED-STOP MRO SERVICES BY EMPLOYERS  
REPRESENTATIVE IDENTIFIED AS SAFETY OFFICER**

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**PLEASE FORWARD TO THE SAFETY OFFICER**

**CONFIDENTIAL**

**RESULTS OF SAMSHA (NIDA) CONTROLLED TEST**

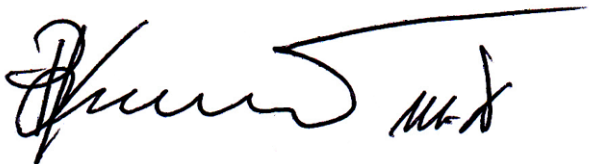
PURPOSE OF TEST:	SPECIMEN ID:	MED-STOP MRO SERVICES
<b>PRE-EMPLOYMENT</b>	<b>7937860015</b>	<b>9950 LAWRENCE AVE STE 403</b>
COLLECTION DATE / TIME:	TESTING AUTHORITY:	<b>SCHILLER PARK IL 60176</b>
<b>03/19/2024 03:55 PM</b>	<b>DOT FMCSA</b>	<b>PHONE: (877) 633-3633</b>
<b>EDT UTC-4</b>		<b>FAX: (847) 647-6608</b>
TEST RESULT:		<b>EMAIL: mro@med-stop.com</b>

**NEGATIVE**

TEST LAB PANEL:

65304N

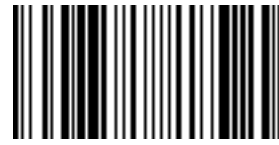
THIS TEST WAS PERFORMED ACCORDING TO 49CFR.40 REGULATIONS

**EMPLOYEE / APPLICANT:**  
**LEON FUENTES, MARCOS A****DONOR ID:**  
**FLL515541664250****NAME OF COMPANY / LOCATION:****ZIGI FREIGHT INC**  
**6850 W 63RD STREET**  
**CHICAGO IL 60638****LOCATION / COLLECTION SITE:**  
**XPRESS URG CARE - MARGATE**  
**6101 W ATLANTIC BLVD**  
**MARGATE FL 33063**  
**PHONE: (954) 869-4320****LABORATORY PERFORMING TEST:**  
**QUEST DIAGNOSTICS**  
**10101 RENNER BLVD**  
**LENEXA KS 66219**  
**PHONE: (866) 697-8378****MEDICAL REVIEW OFFICER:**  
**KWIECINSKI PAWEL K****SIGNATURE:****LAB RESULT RECEIVED AT:**  
**03/21/2024 04:25 PM CDT UTC-5****MRO COPY BECAME AVAILABLE AT:**  
**03/21/2024 04:25 PM CDT UTC-5****DATE / TIME THE RESULT BECAME AVAILABLE:**  
**03/21/2024 04:26 PM CDT UTC-5**

THIS TEST WAS PERFORMED ACCORDING TO 49CFR.40 REGULATIONS

RETAIN IN EMPLOYEE'S CONFIDENTIAL FILE





**Expires On:** 03/22/2024 03:15 PM Central

**QPassport ID:** Q11110310

## Organization

XPRESS URG CARE - MARGATE  
6101 W ATLANTIC BLVD STE 101  
MARGATE FL 33063  
Phone: (954) 869-4320

## Donor Details

**Donor Name:** MARCOS A LEON FUENTES  
**Donor ID:** CDL FL L515541664250  
**Test Reason:** PRE-EMPLOYMENT  
**Ordered Date:** 03/19/2024 01:42 PM Central  
**Ordered By:** ZIGI FREIGHT INC

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**Account:** ZIGI FREIGHT INC - DOT - 10624350  
6850 W 63RD STREET  
CHICAGO IL 60638  
DER: NIKOLA STAMENKOVIC  
Phone: (630) 485-7370 Fax: (630) 485-6980

**Collection Service(s):** Split

**Test Type(s):** 65304N DOT URINE NOT OBSERVED

**Donor Instructions:** Please bring this confirmation and your driver's license or other government issued photo ID to the collection site for identification.

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## Collection Site:

To find a collection site location and to make an appointment, visit  
[www.questdiagnostics.com/psc](http://www.questdiagnostics.com/psc)

For questions on what to expect at your drug test, visit our website at  
[www.EmployerSolutions.com/mydrugtest](http://www.EmployerSolutions.com/mydrugtest)

## Test to be Completed on or Before:

**03/19/2024 03:15 PM EDT UTC-4**

## Medical Review Officer:

**PAWEL KWIECINSKI**  
Phone: (877) 633-3633  
Fax: (847) 647-6608