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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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**02/10/2025 08:08 AM CST UTC-6**

**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>CF20708626</b>	<b>9950 LAWRENCE AVE STE 403</b>
COLLECTION DATE / TIME:	TESTING AUTHORITY:	<b>SCHILLER PARK IL 60176</b>
<b>02/06/2025 02:53 PM</b>	<b>DOT FMCSA</b>	<b>PHONE: (877) 633-3633</b>
<b>EST UTC-5</b>		<b>FAX: (847) 647-6608</b>
TEST RESULT:		<b>EMAIL: mro@med-stop.com</b>

**NEGATIVE**

TEST LAB PANEL:

W215

THIS TEST WAS PERFORMED ACCORDING TO 49CFR.40 REGULATIONS

EMPLOYEE / APPLICANT:  
**SAMUELS, CHESTER RAE**

DONOR ID:  
**FL060360739**

NAME OF COMPANY / LOCATION:

**ZIGI FREIGHT INC**

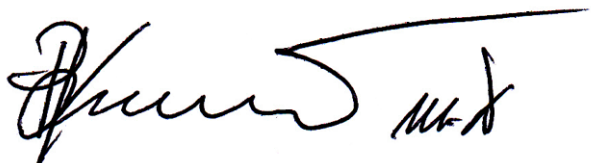
**6850 W 63RD STREET**  
**CHICAGO IL 60638**

LOCATION / COLLECTION SITE:  
**ASSOCIATES MD URGENT CARE - C**  
**2122 W CYPRESS CREEK RD STE 11**  
**FT LAUDERDALE FL 33309-1866**  
**PHONE: (954) 353-3180**

LABORATORY PERFORMING TEST:  
**CLINICAL REFERENCE LABORATORY**  
**8433 QUIVIRA**  
**LENEXA KS 66215**  
**PHONE: (800) 452-5677**

MEDICAL REVIEW OFFICER:  
**KWIECINSKI PAWEL K**

SIGNATURE:



LAB RESULT RECEIVED AT:  
**02/07/2025 02:33 PM CST UTC-6**

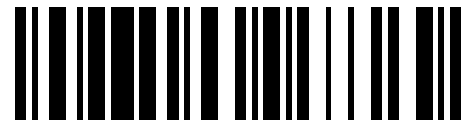
MRO COPY BECAME AVAILABLE AT:  
**02/06/2025 02:00 PM CST UTC-6**

DATE / TIME THE RESULT BECAME AVAILABLE:  
**02/07/2025 02:35 PM CST UTC-6**

THIS TEST WAS PERFORMED ACCORDING TO 49CFR.40 REGULATIONS

RETAIN IN EMPLOYEE'S CONFIDENTIAL FILE





99285954



Experiencing issues? Please contact our support team at 877-376-3691

## DONOR INFORMATION

### CHESTER RAE SAMUELS

CDL: 060360739

### YOUR SITE IS:

ASSOCIATES MD URGENT CARE - CYPRESS CREEK  
2122 W CYPRESS CREEK RD STE 110  
FT LAUDERDALE, FL 33309-1866  
(954) 353-3180

### INSTRUCTIONS:

- CALL the site to confirm hours and if an appointment is needed at (954) 353-3180.
- BRING THIS FORM and a VALID PHOTO ID to the site.
- Your visit must be completed before 03:00 PM on Feb 06, 2025 EST UTC-5.

## CLINIC INFORMATION

### INSTRUCTIONS:

You must enter/scan the authorization number above and complete the services below in FormFox to be automatically paid for these Marketplace services.

### GUARANTOR/RESPONSIBLE PARTY: CRL/FormFox Marketplace

Do not invoice the client/TPA for these Marketplace services.

### SERVICES TO PROVIDE:

DRUG TEST DOT FMCSA  
CRL

### REASON FOR TEST:

PRE-EMPLOYMENT SPLIT URINE  
\*NOT OBSERVED\*

### ACCOUNT #:

YMS.DOT1.D2828543

*Do not write in services below.*

### EMPLOYER:

ZIGI FREIGHT INC  
6850 W 63RD STREET  
CHICAGO, IL 60638

### DER:

NIKOLA STAMENKOVIC  
(630) 485-7370

### TPA: