RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY
SALES REGISTER

PAGE 1 - 1 SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 12/16/11

				SALE	SREGISTE	K		BILL MEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176365	12/09/11	000082	SENIOR HEALTH	PARTNERS	BROOKS, NATALIE CARRILLO, MARIA COLON, RAYMUNDA DABU, JUANITA DABU, JUANITA FENTON, JESSIE FENTON, JESSIE GHILOTTY, FLORE	23.75		311.13	I	
176366	12/09/11	000082	SENIOR HEALTH	PARTNERS	CARRILLO, MARIA	27.75		363.53	I	
176367	12/09/11	000082	SENIOR HEALTH	PARTNERS	COLON, RAYMUNDA	39.00		510.90	I	
176368	12/09/11	000082	SENIOR HEALTH	PARTNERS	DABU, JUANITA	16.00		209.60	I	
176369	12/09/11	000082	SENIOR HEALTH		DABU, JUANITA	4.00		52.40	I	
176370	12/09/11	000082	SENIOR HEALTH	PARTNERS	FENTON, JESSIE	8.00		104.80	I	
176371	12/09/11	000082	SENIOR HEALTH	PARTNERS PARTNERS	FENTON, JESSIE	4.00		52.40	I	
176372	12/09/11	000082	SENIOR HEALTH	PARTNERS	GHILOTTY, FLORE	14.00		183.40	I	
176373	12/09/11	000082	SENIOR HEALTH	PARTNERS	GUTIERREZ, LUCI	20.00		262.00	I	
176374	12/09/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, KHAMAT	33.00		432.30	I	
176375	12/09/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, RAMDIA	135.00		1,768.50	I	
176376	12/09/11	000082	SENIOR HEALTH	PARTNERS	HERNANDEZ, FRAN	16.00		209.60	I	
176377	12/09/11	000082	SENIOR HEALTH	PARTNERS	LEPORE, CLAIRE	5.00		65.50	I	
176378	12/09/11	000082	SENIOR HEALTH	PARTNERS	MOROCHO, MANUEL	76.00		995.60	I	
176379	12/09/11	000082	SENIOR HEALTH	PARTNERS	PERALTA, RAMONA	76.00		995.60	I	
176380	12/09/11	000082	SENIOR HEALTH	PARTNERS	SIERRA, MIRIAM	25.00		327.50	I	
176381	12/09/11	000082	SENIOR HEALTH	PARTNERS	SIMON, LUPE	8.00		104.80	I	
176382	12/09/11	000082	SENIOR HEALTH	PARTNERS	TORRESCAMPOS, J	40.00		524.00	I	
176383	12/09/11	000082	SENIOR HEALTH	PARTNERS	VASQUEZ, CORNEL	8.00		104.80	I	
176384	12/09/11	000082	SENIOR HEALTH	PARTNERS	VIDOT-LINARES,	40.00		524.00	I	
176385	12/09/11	000082	SENIOR HEALTH	PARTNERS	WOO, LUZ	12.00		157.20	I	
176386	12/09/11	000082	SENIOR HEALTH	PARTNERS	GHILOTTY, FLORE GUTIERREZ, LUCI HARIDIN, KHAMAT HARIDIN, RAMDIA HERNANDEZ, FRAN LEPORE, CLAIRE MOROCHO, MANUEL PERALTA, RAMONA SIERRA, MIRIAM SIMON, LUPE TORRESCAMPOS, J VASQUEZ, CORNEL VIDOT-LINARES, WOO, LUZ	4.00		52.40	I	
					CUSTOMER	634.50	0.00	8,311.96		
					CATEGORY	634.50		8,311.96		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	2
	·	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176387 12/09/11	000008 VISITING NURSE SERVICE	ABBOTT, FAY	9.00		131.22 I	
		CATEGORY	9.00	0.00	131.22	

RUN DATE 12/14/11 -						PAGE 1 -	3
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176388 12/09/11 176389 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	56.75 8.00		827.42 I 116.64 I	
			CUSTOMER	64.75	0.00	944.06	
			CATEGORY	64.75	0.00	944.06	

RUN DAT	E 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	4
SALES J	RNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	V/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	12/16/11
		GTTGT 370	GUGEOLER MANE		******		11101DT	G11D D7 11G
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176390	12/09/11	000008	VISITING NURSE SERVICE	ACINA TOCK	35.25		513.95 I	
1/6390	12/09/11	000008	VISITING NURSE SERVICE	ACUNA, JOSE	35.45		513.95 1	
				CATEGORY	35.25	0.00	513.95	

RUN DATE 12/14/11			DEG NU NU				-	5
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			VCP CHOICE LE		12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
INVOICE# DATE	COSI NO	COSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT	IIP	SURPLUS
176391 12/09/11	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
176392 12/09/11	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
176393 12/09/11	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	70.00		1,020.60	I	
176394 12/09/11	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	24.00		349.92	I	
176395 12/09/11	800000	VISITING NURSE SERVICE	AFZAL, AMIR	7.50		109.35	I	
			CUSTOMER	161.50	0.00	2,354.67		
			СОВТОНЫК	101.50	0.00	2,331.07		
			CATEGORY	161.50	0.00	2,354.67		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER		PAGE 1 - 6 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176396 12/09/11	000008 VISITING NURSE SERVICE	AGUILAR, ZORAID	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

			YSIDE CITYWIDE	DDG 199				-	7
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	1		VCP CHOICE LI BILL WEEK ENI		12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176397	12/09/11	000008	VISITING NURSE SERVIC	E AGUILAR-PROCE,	18.00		262.44	I	
176398	12/09/11	800000	VISITING NURSE SERVIC	E AKBAR, NASEEM	8.00		116.64	I	
176399	12/09/11	800000	VISITING NURSE SERVIC	E ALFEREZ, GLORIA	24.50		357.21	I	
176400	12/09/11	800000	VISITING NURSE SERVIC	E ALVAREZ, NAZARE	54.00		787.32	I	
176401	12/09/11	000008	VISITING NURSE SERVIC	E ANDRADE, LOLA	56.00		816.48	I	
176402	12/09/11	800000	VISITING NURSE SERVIC	E ANDREWS, JOHNNI	56.00		816.48	I	
				CUSTOMER	216.50	0.00	3,156.57		
				CATEGORY	216.50	0.00	3,156.57		

			YSIDE CITYWIDE				-	-	8
SALES JRN	IL # 0259	LOC 001		REG NY NY SALES REGISTER			ADU ADULT BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176403	12/09/11	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER				- 9 HOMEW/O WALLS (LT DING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176404 12/09/11 176405 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ANGULO, ELCY ANUT, ALICE	20.00 61.00		291.60 889.38	I I
			CUSTOMER	81.00	0.00	1,180.98	
			CATEGORY	81.00	0.00	1,180.98	

RUN DATE 12/14/11 -						PAGE 1 -	10
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176406 12/09/11	800000	VISITING NURSE SERVICE	ANZALONE, LAWRE	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	11
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176407	12/09/11	800000	VISITING NURSE SERVICE	AOUN, ODETTE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176408 12/09/11	800000	VISITING NURSE SERVICE	ARIAS, CARLOTA	20.00		291.60	I
			CATEGORY	20.00	0.00	291.60	

		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		13
SALES OIG	иш # 0233	DOC 001		SALES REGISTER			BILL WEEK ENI		12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176409 176410	12/09/11 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	-, -	45.75 4.00		667.04 58.32	I	
				CUSTOMER	49.75	0.00	725.36		
				CATEGORY	49.75	0.00	725.36		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 14 LTC NURSING HOMEW/O W BILL WEEK ENDING 12/	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
176411 12/02/11 176412 12/02/11 176413 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ASHLEY, CLYDE ASHLEY, CLYDE ASHLEY, CLYDE	14.00 8.00 42.00		204.12 I 116.64 I 612.36 I	
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

RUN DATE 12/14/11 -	SUP SUNNYS	IDE CITYWIDE				PAGE 1 -	15
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		S	SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176414 12/09/11	000008 V	ISITING NURSE SERVICE	AVILA, ENIDIA	19.75		287.96 I	
			CATEGORY	19.75	0.00	287.96	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	16
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	MEW/O WALLS (LT
		5	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176415 10/28/11	000008	VISITING NURSE SERVICE	AZAD, ABUL	12.00		174.96 I	- -
176416 12/02/11	800000	VISITING NURSE SERVICE	AZAD, ABUL	9.50		138.51	<u>-</u> -
176417 12/02/11	000008	VISITING NURSE SERVICE	AZAD, ABUL	8.00		116.64	- -
176418 12/09/11	800000	VISITING NURSE SERVICE	AZAD, ABUL	22.00		320.76	<u>-</u> -
			CUSTOMER	51.50	0.00	750.87	
			CATEGORY	51.50	0.00	750.87	

RUN DATE 12/14/11 -						PAGE 1 -	17
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			ADU ADULT BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176419 12/09/11	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	18
SALES JRI	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				VCP CHOICE L	ICSA	
			S	ALES RE	GISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
									_	
176420	12/09/11	000008	VISITING NURSE SERVICE	BAEZ, J	UAN	35.00		510.30	I	
				_						
				C	ATEGORY	35.00	0.00	510.30		

RUN DATE 12/1	4/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19
SALES JRNL #	0259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
		S	BALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
176421 12/0	9/11 000008	VISITING NURSE SERVICE	BALLAS, VIOLA	25.00		364.50	I
176422 12/0	9/11 000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	56.00		816.48	I
176423 12/0	9/11 000008	VISITING NURSE SERVICE	BARDEANU, VICTO	44.75		652.46	I
176424 12/0	9/11 000008	VISITING NURSE SERVICE	BATTLE, JEANETT	49.00		714.42	I
176425 12/0	9/11 000008	VISITING NURSE SERVICE	BECERRA, FELIPE	1.00		14.58	I
			CUSTOMER	175.75	0.00	2,562.44	
			CATEGORY	175.75	0.00	2,562.44	

	12/14/11 - JL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	20 T
DALLED OICH	√Ш π ∪255	100 001		SALES REGIST	E R		BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176426	12/09/11	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	37.75		550.40 I	
				CATEGORY	37.75	0.00	550.40	

RUN DATE 12/14/11		YSIDE CITYWIDE				PAGE 1	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
		S	SALES REGISTER	2		BILL WEEK END	ING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
176427 12/09/11	000008	VISITING NURSE SERVICE	BEGUM, IOBAL	4.00		58.32	I
176428 12/09/11	800000	VISITING NURSE SERVICE	BELLOROFONTE, M	139.00		2,026.62	I
			CUSTOMER	143.00	0.00	2,084.94	
			CATEGORY	143.00	0.00	2,084.94	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - : ADU ADULT BILL WEEK ENDING	22
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176429 12/09/11	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 23 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176430 12/09/11 176431 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	- ,	10.00	145.80 I 437.40 I
		CUSTOMER	40.00 0.00	583.20
		CATEGORY	40.00 0.00	 583.20

RUN DATE 12/14/11 -		YSIDE CITYWIDE				PAGE 1 -	24
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	0 10/16/11
		· ·	SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176432 12/09/11	000008	VISITING NURSE SERVICE		30.00		437.40 I	
176433 12/09/11	000008	VISITING NURSE SERVICE	BIANCO HOPKINS,	20.25		295.25 I	
			CUSTOMER	50.25	0.00	732.65	
			CATEGORY	50.25	0.00	732.65	

RUN DATE 12/14/1							25	
SALES JRNL # 025	59 LOC 001		REG NY NY			LTC NURSING HOMEW		
		5	SALES REGISTER			BILL WEEK ENDING	12/16/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
INVOICE# DATE	COSI NO	COSTONER NAME	KELEKENCE	1100105	IAX ANI	AMOUNT TIF	DORFILOD	
176434 12/09/1	1 000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I		
			CARECODY	40.00	0.00			
			CATEGORY	40.00	0.00	583.20		

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	26
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE		
			2	SALES REGISTER			BILL WEEK E	NDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176435	12/09/11	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	21.50		313.47	I	
				CATEGORY	21.50	0.00	313.47	-	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	27
			SALES REGISTER			BILL WEEK ENDI	NG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176436 12/09/11	800000	VISITING NURSE SERVICE	BOCANEGRA, GLAD	20.00		291.60	I
176437 12/02/11 176438 12/09/11	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BONILLA, ESPERA BONILLA, ESPERA	7.00 49.00		102.06 714.42	I
			CUSTOMER	76.00	0.00	1,108.08	
			CATEGORY	76.00	0.00	1,108.08	

		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	28
DALLS ON	иш н 0255	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176439	12/09/11	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		PAGE 1 - 29 LTC NURSING HOMEW/O WALLS (LT
		SALES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP SURPLUS
176440 12/09/11	000008 VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00	364.50 I
		CATEGORY	25.00 0	.00 364.50

			YSIDE CITYWIDE				PAGE 1 -	30
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB	
			:	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176441	12/09/11	800000	VISITING NURSE SERVICE	BOPP, ANNA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	31
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
		S	ALES REGISTER			BILL WEEK ENDI	NG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176442 12/09/11	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96	I
			CATEGORY	12.00	0.00	174.96	

RUN DATE 12/14/11 -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	32 w/o wat.t.g (t.T
DALLO ORGE # 0255	100 001		SALES REGISTER			BILL WEEK ENDING	· ·
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176443 12/09/11	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30 I	
			CATEGORY	35.00	0.00		

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN	HCSA	33 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176444 12/09/11 176445 12/09/11 176446 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BOYLAN, FRANK BURGOS, RAFAELA BURNS, MARGARET	63.00 9.00 52.50		918.54 131.22 765.45	I I I	
			CUSTOMER	124.50	0.00	1,815.21		
			CATEGORY	124.50	0.00	1,815.21		

RUN DATE 12/14/11 SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LAD NURSING HOM BILL WEEK ENDIN	ME W/O WALLS LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
176447 12/09/11	000008	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		816.48	I
			CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1	- 35	
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		_
				SALES REGISTER			BILL WEEK END	ING 12/16/13	l
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU:	S
176448	12/09/11	000008	VISITING NURSE SERVICE	CABA, PURA	8.00		116.64	I	
176449	12/09/11	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	40.00		583.20	I	
				CUSTOMER	48.00	0.00	699.84		-
				CATEGORY	48.00	0.00	699.84		_

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDING	36 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176450 12/09/11	800000	VISITING NURSE SERVICE	CALDERON, ELISA	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 12/14/11 -		YSIDE CITYWIDE				PAGE 1	-	37
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
		:	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176451 12/09/11	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.00		626.96	I	
176452 12/09/11	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	41.50		605.08	I	
			CUSTOMER	84.50	0.00	1,232.04		
			0021011211	01.50	0.00	1,202.01		
				04.50		1 020 04		
			CATEGORY	84.50	0.00	1,232.04		

RUN DATE 1	2/14/11 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	38	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE	ADULT		
			S	SALES	REGISTER			BILL WEEK EN	DING	12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
176453 1	2/09/11	800000	VISITING NURSE SERVICE	CA	LKOSZ, JOSEFI	63.00		918.54	I		
					CATEGORY	63.00	0.00	918.54			

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176454 12/09/11	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	40
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
156455	10/00/11				05 00		264.50 -	
176455	12/09/11	000008	VISITING NURSE SERVICE	CANO, ADELINA	25.00		364.50 I	
				CARECODY	25 00	0.00	364 50	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176456	12/09/11	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,224.72 I	•
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE 12/14/11 - S	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 42
SALES JRNL # 0259 L	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LAD NURSING HOME W/O WALLS LT
		SALES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176457 12/09/11 0	000008 VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00	510.30 I
		CATEGORY	35.00 0.00	510.30

			YSIDE CITYWIDE						43
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	_		VCP CHOICE L		10/16/11
				SALES REGISTE	R		BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176458	11/25/11	000008	VISITING NURSE SERV	ICE CARDONA, MARIA	8.50		123.93	I	
176459	12/02/11	000008	VISITING NURSE SERV	ICE CARDONA, MARIA	20.00		291.60	I	
176460	12/09/11	000008	VISITING NURSE SERV	ICE CARDONA, MARIA	70.00		1,020.60	I	
176461	12/09/11	000008	VISITING NURSE SERV	ICE CARDOSO, ORLAND	56.00		816.48	I	
176462	12/02/11	000008	VISITING NURSE SERV	ICE CARELA-REYES, M	10.00		145.80	I	
176463	12/09/11	000008	VISITING NURSE SERV	ICE CARELA-REYES, M	20.00		291.60	I	
176464	12/09/11	800000	VISITING NURSE SERV	ICE CARRALERO, ROSA	36.00		524.88	I	
				CUSTOMER	220.50	0.00	3,214.89		
				CATEGORY	220.50	0.00	3,214.89		

RUN DATE 12/14/11 - SUP SALES JRNL # 0259 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER		PAGE 1 - 44 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE CUST	I NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176465 12/09/11 0000	008 VISITING NURSE SERVICE	CARTAFALSA, NEL	69.50	1,013.32 I
		CATEGORY	69.50 0.00	1,013.32

- 1	RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 45 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11	
	INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	176466 12/09/11	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	55.00		801.91 I	
				CATEGORY	55.00	0.00	801.91	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 – 46 ADU ADULT
SALES URNL # 0239	TOC 001		SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176467 12/09/11 176468 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARTY, LUISA CASTANO, MARIA	32.00 4.00		466.56 I 58.32 I
			CUSTOMER	36.00	0.00	524.88
			CATEGORY	36.00	0.00	524.88

RUN DATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176469 12/09/11	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I	
176470 12/09/11	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	19.00		277.02 I	
			CUSTOMER	39.00	0.00	568.62	
			CATEGORY	39.00	0.00	568.62	

RUN DATE :			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY S A L E S	NY R E G I S T E R			PAGE 1 CCL CONGREGAT BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPI	LUS
176471	12/09/11	000008	VISITING NURSE SERVICE	CEF	RNY, ELIZABET	9.00		131.22	I	
					CATEGORY	9.00	0.00	131.22		

	SUP SUNNYSIDE CITYWI LOC 001 SUNNYSIDE		·			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NA	AME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
176472 10/28/11 176473 12/09/11		JRSE SERVICE JRSE SERVICE	CHAPPLE, VICKIE CHAPPLE, VICKIE	5.00 4.00		72.90 58.32	I I
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	50
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
		S	ALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176474 12/09/11	000008	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
170474 12/09/11	000008	VISITING NORSE SERVICE	CHARLES PIERRE,	30.00		437.40 1	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	51
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
		S	ALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176475 12/09/11	800000	VISITING NURSE SERVICE	CHARLES, JOSE	15.00		218.70 I	
			 CATEGORY	15.00	0.00	218.70	
			CIIIDOINI		0.00	220.70	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	52
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		S	ALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176476 12/09/11	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 53 ADU ADULT
BALLO ORGE # 0255	HOC 001		SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176477 12/09/11 176478 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	6.00 35.00		87.48 I 510.30 I
			CUSTOMER	41.00	0.00	597.78
			CATEGORY	41.00	0.00	 597.78

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R		PAGE 1 - 54 VCP CHOICE LHCSA BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176479 12/09/11	000008 VISITING NURSE SERVICE	E CHIPA, PANAGIOT	15.00	218.70 I
		CATEGORY	15.00 0.00	218.70

RUN DATE 12/14/11 -						PAGE 1 -	55
SALES JRNL # 0259	LOC 001		REG NY NY			LTC NURSING HOME	•
		S	BALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176480 12/09/11	800000	VISITING NURSE SERVICE	CHO, MOGEE	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 12/14/2	11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	_	56
SALES JRNL # 025	59 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
		S	SALES REGISTER	₹.		BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
							_	
176481 12/09/3	11 000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	48.25		703.50	I	
176482 12/09/3	11 000008	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
176483 12/09/3	11 000008	VISITING NURSE SERVICE	CHUCK, ENA	26.00		379.08	I	
			CUSTOMER	114.25	0.00	1,665.78		
			CATEGORY	114.25	0.00	1,665.78		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER		PAGE 1 - 57 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176484 12/09/11	000008 VISITING NURSE SERVICE	CIPRIAN, FREDEV	55.50	809.19 I
		CATEGORY	55.50 0.00	809.19

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 5 ADU ADULT	8
SALES URNL # 0259	LOC 001		SALES REGISTER				12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176485 12/09/11 176486 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 6.00		116.64 I 87.48 I	
			CUSTOMER	14.00	0.00	204.12	
			CATEGORY	14.00	0.00	204.12	

RUN DATE 12/14/11			222 221 221			PAGE 1		59
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE	R		LTC NURSING I	,	
								, .,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176487 12/09/11	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I	
176488 12/09/11	000008	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I	
176489 12/09/11	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I	
176490 12/09/11	800000	VISITING NURSE SERVICE	COLON, ISABEL	30.00		437.40	I	
				105.00		1 560 06		
			CUSTOMER	107.00	0.00	1,560.06		
			CATEGORY	107.00	0.00	1,560.06		

ı	RUN DATE 1	L2/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 60	
ı	SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
ı				٤	SALES REGISTER			BILL WEEK ENDING 12/16/11	
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
ı									
ı	176491 1	L2/09/11	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
ı									
ı									
ı					CATEGORY	168.00	0.00	2,449.44	
ı								•	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	61
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176492 12/09/11	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176493 12/09/11	000008 VISITING NURSE SERV	ICE COSTA, ANTOINET	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	

RUN DATE 12/14/11 SALES JRNL # 0259		UNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI		WALLS (LT
INVOICE# DATE	CUST NO CU	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176494 11/25/11 176495 12/09/11		SITING NURSE SERVICE SITING NURSE SERVICE		6.00 30.00		87.48 437.40	I I	
			CUSTOMER	36.00	0.00	524.88		
			CATEGORY	36.00	0.00	524.88		

				YSIDE CITYWIDE	220				. –	64
S.	ALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK EN	DING	12/16/11
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
1	76496	12/09/11	800000	VISITING NURSE SERVICE	COTTON, MARCUS	1.00		14.58	I	
					CATEGORY	1.00	0.00	14.58		

RUN DATE	12/14/11 - 9	SUP SUNNY	SIDE CITYWIDE				PAGE 1 -	65
SALES JRN	L # 0259 I	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S	G 7 T 5		VCP CHOICE LHC	
			-				BIDD WEEK ENDI	, .,
INVOICE#	DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176497	12/09/11	800000	VISITING NURSE SERVICE	COVALIU, SIM	MION 20.00		291.60	I
				CATEGO	ORY 20.00	0.00	291.60	

	12/14/11 - NL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY SALES R	NY E G I S T E	R		PAGE 1 HOA HOSPICE A BILL WEEK ENI	-	/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP ST	URPLUS
176498	12/09/11	000008	VISITING NURSE SERVICE	COX,	PETRA	15.00		218.70	I	
					- CATEGORY	15.00	0.00	218.70		

RUN DATE 12/14/11 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 67
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LAD NURSING HOME W/O WALLS LT
		SALES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
INVOICE# DATE	CUSI NO CUSTOMER NAME	REFERENCE	HOURS TAX AMI	AMOUNT TYP SURPLUS
176499 12/09/11	000008 VISITING NURSE SERVICE	E CRUZ, HECTOR	38.75	564.98 I
		CATEGORY	38.75 0.00	564.98

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 68
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176500 12/09/11	000008	VISITING NURSE SERVICE	CRUZ, JUANA	20.00		291.60 I
176501 12/09/11	800000	VISITING NURSE SERVICE	CURLEY, INGEBOR	24.50		357.21 I
			CUSTOMER	44.50	0.00	648.81
			CATEGORY	44.50	0.00	648.81

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
176502 12/09/11 176503 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	22.75 56.00		331.70 816.48	I I
			CUSTOMER	78.75	0.00	1,148.18	
			CATEGORY	78.75	0.00	1,148.18	

RUN DATE 12/14/11 - SALES JRNL # 0259		UNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176504 12/09/11	000008 VIS	SITING NURSE SERVICE	DAVIS, LOUELLEN	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 12/14/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	71
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
		S	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176505 12/09/11	000008	VISITING NURSE SERVICE	DEL CARPIO, FEL	32.00		466.56 I	
			CATEGORY	32.00	0.00	466.56	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 72 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176506 12/09/11 176507 12/09/11	000008 VISITING NURSE SERVICE VISITING NURSE SERVICE	- · ·	38.00 35.00		554.04 I 510.30 I
		CUSTOMER	73.00	0.00	1,064.34
		CATEGORY	73.00	0.00	1,064.34

RUN DATE 12/14/11 -						PAGE 1 -	73
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		i	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176508 12/09/11	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	23.75		346.28 I	
176509 12/09/11	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	20.00		291.60 I	
			CUSTOMER	43.75	0.00	637.88	
			COSTOMER	13.73	0.00	037.00	
			CATEGORY	43.75	0.00	637.88	

RUN DATE 12/14/11 - SALES JRNL # 0259			REG NY NY			PAGE 1 - ADU ADULT	74
, and the second		S	ALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176510 12/09/11	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	28.00		408.24 I	
			CATEGORY	28.00	0.00	408.24	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER		PAGE 1 - 75 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176511 12/09/11	000008 VISITING NURSE SERVICE	DELVALLE, JESUS	35.00	510.30 I
		CATEGORY	35.00 0.00	510.30

RUN DATE 12/14/11 SALES JRNL # 0259			DEC NY NY			PAGE 1 -	-	76
SALES URNL # 0259	TOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK END	ING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	ГҮР	SURPLUS
176512 12/09/11	800000	VISITING NURSE SERVICE	DESENA, FRED	8.50		123.93	I	
			CATEGORY	8.50	0.00	123.93		

RUN DATE 12/14/11 - SALES JRNL # 0259			REG NY NY			PAGE 1 - VCP CHOICE LHCS	77
DALLO ORUL # 0239	HOC 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176513 12/09/11	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	44.00		641.54 I	
			CATEGORY	44.00	0.00	641.54	

RUN DATE 12/14/11							78
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEV	
			SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176514 12/09/11	800000	VISITING NURSE SERVICE	DIAZ, HILDA	24.75		360.86 I	
			CATEGORY	24.75	0.00	360.86	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	79
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
		5	SALES REGISTER			BILL WEEK ENDI	NG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
176515 12/09/11	800000	VISITING NURSE SERVICE	DIAZ, MARIA	35.00		510.30	I
176516 12/09/11	800000	VISITING NURSE SERVICE	DIAZ, OLGA	42.00		612.36	I
176517 12/09/11	800000	VISITING NURSE SERVICE	DIAZ, ROSA	36.00		524.88	I
176518 12/09/11	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	66.00		962.28	I
			CUSTOMER	179.00	0.00	2,609.82	
			CATEGORY	179.00	0.00	2,609.82	

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	80 G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176519 12/09/11	000008	VISITING NURSE SERVICE	DOMINGUEZ, ANA	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RU	IN DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	81
SA	ALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY N	_			VCP CHOICE L		
				:	SALES RE	GISTER			BILL WEEK EN	DING	12/16/11
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
17	6520	12/09/11	800000	VISITING NURSE SERVICE	DOMING	UEZ, MARI	41.75		608.72	I	
						 CATEGORY	41.75	0.00	608.72		

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	2
SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			Š	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176521	12/09/11	800000	VISITING NURSE SERVICE	DOMINICK, GINA	53.25		776.39 I	
				CATEGORY	53.25	0.00	776.39	

RUN DATE 12/14/11 -	SUP SUNNYSIDE CITYWIDE				PAGE 1 -	83
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE				VCP CHOICE LHCS	
		SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	TP SURPLUS
176522 12/09/11	000008 VISITING NURSE SERV	ICE DUGLUS, MAY RUT	36.00		524.88 I	
		CATEGORY	36.00	0.00	524.88	

RUN DATE 12/14/	11 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 -	84
SALES JRNL # 02	59 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	N/O WALLS (LT
		5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176523 12/09/	11 000008	VISITING NURSE SERVICE	DUTAN, SELINDA	33.00		481.14 I	
			CATEGORY	33.00	0.00	481.14	

			YSIDE CITYWIDE				PAGE 1 - 85	
SALES	JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PR	OGRAM
			:	SALES REGISTER			BILL WEEK ENDING 12/1	6/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
176524	4 12/09/11	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CIT	YWIDE REG NY SALES R	NY EGISTER		PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFE	RENCE HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176525 12/09/11	000008 VISITING NURSE	SERVICE ECHEG	ARAY, MARI 42.75		623.30 I	
			CATEGORY 42.75	0.00	623.30	

RUN D	ATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	87	7
SALES	JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
				SALES REGISTER			BILL WEEK ENDI	NG 1	12/16/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	ΥP	SURPLUS
17652	6 12/09/11	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176527 12/09/11	000008	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

			YSIDE CITYWIDE				PAGE 1 - 89	
SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRA	
			2	SALES REGISTER			BILL WEEK ENDING 12/16/11	L
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
176528 1	12/09/11	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	-

RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE			PAGE 1 - 90
SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176529 12/09/11 000008 VISITING NURSE SERV	ICE ESPEJO, GRACIEL	20.00	291.60 I
	GAEDGODA		201 60
	CATEGORY	20.00 0.00	291.60

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	91
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	BALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176530	12/09/11	800000	VISITING NURSE SERVICE	ESPINOSA, CLORI	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	92 G 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176531 12/09/11	000008 VISITING NURSE SERVICE	E ESPINOZA, OLGA	6.00		87.48 I	
		CATEGORY	6.00	0.00	87.48	

DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE		PAGE 1 - 93
JES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY		VCP CHOICE LHCSA
SALES REGISTER		BILL WEEK ENDING 12/16/11
OICE# DATE CUST NO CUSTOMER NAME REFERENCE H	HOURS TAX AMT	AMOUNT TYP SURPLUS
		001 60 -
532 12/09/11 000008 VISITING NURSE SERVICE EVERETT, SHIRLE 2	20.00	291.60 I
CATEGORY 2	0.00	291.60

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	94
BILLED GIGIE II GEGS	200 001		SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176533 12/09/11 176534 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	56.00 12.00		816.48 I 174.96 I	
170334 12709/11	000000	VISITING MORSE SERVICE	CUSTOMER	68.00	0.00	991.44	
			COSTOMER	00.00	0.00	JJ1.44	
			CATEGORY	68.00	0.00	991.44	

RUN DATE 12/14	/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	95
SALES JRNL # 0	259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
		:	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176535 12/09	/11 000008	VISITING NURSE SERVICE	FARO, JOSEPH	15.00		218.70 I	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176536 12/09/11	000008	VISITING NURSE SERVICE	FAY, JULIA	15.00		218.70 I	
176537 12/09/11	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	62.50		911.25 I	-
176538 11/18/11	800000	VISITING NURSE SERVICE	FERNANDEZ, ENRI	4.00		58.32 I	-
176539 12/09/11	800000	VISITING NURSE SERVICE	FERNANDEZ, ENRI	10.00		145.80 I	
			CUSTOMER	91.50	0.00	1,334.07	
			CATEGORY	91.50	0.00	1,334.07	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	97
SALES JRN	ъ # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	
			\$	SALES REGIST	E R		BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176540	12/09/11	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
				CATEGORY		0.00	218.70	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNI LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	98
TARIOT CELL DATE	CHICE NO		SALES REGISTER	HOHDG	may amm	BILL WEEK ENDING	, .,
INVOICE# DATE 176541 12/09/11	O00008	CUSTOMER NAME VISITING NURSE SERVICE	REFERENCE FERNANDEZ, MATI	HOURS 39.75	TAX AMT	AMOUNT TYP 579.56 I	SURPLUS
170311 12703711	000000	VIBILING NORDE BERVICE	TERMANDEZ, FATT				
			CATEGORY	39.75	0.00	579.56	

			YSIDE CITYWIDE				PAGE 1 -	99
SALES	JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
17654	2 12/09/11	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	•
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
176543 11/25/11 176544 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	FIUMARA, ROSE FIUMARA, ROSE	8.00 52.75		116.64 I 769.10 I	
		CUSTOMER	60.75	0.00	885.74	
		 CATEGORY	 60.75	0.00	885.74	

RUN DATE 12/14/1						PAGE 1 - 10	
SALES JRNL # 025	9 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGATE CAF BILL WEEK ENDING	
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176545 12/09/1	1 000008 V	/ISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

- 1			SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	
	176546	12/09/11	800000	VISITING NURSE SERVICE	FOLLETTO, ROSIN	32.25		470.21 I	
					CATEGORY	32.25	0.00	470.21	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWI	DE REG NY NY			PAGE 1 - 103 CCL CONGREGATE CARE PROGRA	M
		SALES REGISTE	R		BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176547 12/09/11	000008 VISITING NURSE SE	RVICE FONSECA, EUGENI	35.00		510.30 I	
		- CATEGORY	35.00	0.00	510.30	

RUN DATE 12/14/11 SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 104 VCP CHOICE LHCSA BILL WEEK ENDING 1	2/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176548 12/09/11 176549 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	35.00 6.00		510.30 I 87.48 I	
			CUSTOMER	41.00	0.00	597.78	
			CATEGORY	41.00	0.00	597.78	

RUN DATE 12/14/11 - SALES JRNL # 0259		REGNY NY SALES REGISTER			PAGE 1 - 105 ADU ADULT BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176550 12/09/11	000008 VISITING NURSE SERVICE	FRANKEL, LISA	9.00		131.22 I	
		CATEGORY	9.00	0.00	131.22	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CI	TYWIDE REG NY NY	GISTER		LTC NURSING	- 106 HOMEW/O WALLS (LT DING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFEREI	NCE HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176551 12/09/11 176552 12/09/11	000008 VISITING NURS		O, ROSA 46.00 GEORGINA 35.00		670.68 510.30	I
		Cī	JSTOMER 81.00	0.00	1,180.98	
		CA	ATEGORY 81.00	0.00	1,180.98	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - ADU ADULT BILL WEEK ENDIN	107 G 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TY	P SURPLUS
176553 12/09/11	000008 VISITING NURSE SERVICE	FUOCO, ROSALIND	6.00	87.48 I	
		CATEGORY	6.00 0	.00 87.48	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
176554 12/09/11 176555 12/09/11 176556 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GAID, ASILA GALLARDO, ZOILA GALLINA, VIRGIN	25.00 30.00 9.00		364.50 I 437.40 I 131.22 I	
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	1		PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	109 MEW/O WALLS (LT NG 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
176557 12/02/11 176558 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		4.00 15.50		58.32 225.99	I I
		CUSTOMER	19.50	0.00	284.31	
		CATEGORY	19.50	0.00	284.31	

RUN DATE 12/14/11 - SU: SALES JRNL # 0259 LO		REG NY NY		PAGE 1 - 110 ADU ADULT
	S A	LES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE CU	UST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176559 12/09/11 00	00008 VISITING NURSE SERVICE	GARCIA, ADRIANO	28.25	411.89 I
		CATEGORY	28.25 0.00	411.89

RU	N DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	111
SA	LES JRN	JL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	Į.
				5	SALES REGIS:	ΓER		BILL WEEK ENDING	3 12/16/11
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
17	6560	12/09/11	800000	VISITING NURSE SERVICE	GARCIA, JOSEF	IN 55.75		812.84 I	
					CATEGOR	Y 55.75	0.00	812.84	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING	- 112 HOMEW/O WALLS (LT DING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176561 12/09/11 176562 12/09/11 176563 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GARCIA, OLGA GARY, MIKE GEBHARDT, DOROT	30.00 28.00 32.00		437.40 408.24 466.56	I I
			CUSTOMER	90.00	0.00	1,312.20	
			CATEGORY	90.00	0.00	1,312.20	

RUN	DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 11	3
SAL	ES JRN	rL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA	
				S	SALES REGISTER			BILL WEEK ENDI	ING	12/16/11
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	ΓΥΡ	SURPLUS
176	564	12/09/11	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	42.00		612.36	I	
					CATEGORY	42.00	0.00	612.36		

RUN DATE 12/14/11						PAGE 1 - 114	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LTBILL WEEK ENDING 12/16/11	Ľ
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176565 12/09/11	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	44.75		652.46 I	
			CATEGORY	44.75	0.00	652.46	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 115 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	AMT AMOUNT TYP SURPLUS
176566 12/09/11	000008 VISITING NURSE SERVICE	GLYPTIS, ARIADN	3.00	43.74 I
		CATEGORY	3.00 0.	00 43.74

RUN DATE 12/14/						PAGE 1 - 116	
SALES JRNL # 02	59 LOC 001		REG NY NY			CCL CONGREGATE CARE PROGRAM	
		:	SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176567 12/09/	11 000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	57.00		831.06 I	
			CATEGORY	57.00	0.00	831.06	

F	RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	117
5	SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				\$	SALES REGISTE	R		BILL WEEK ENDING	12/16/11
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	176568	12/09/11	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	23.00		335.34 I	
					 CATEGORY	23.00	0.00	335.34	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 118 LTC NURSING HOMEW/O WALLS (I BILL WEEK ENDING 12/16/11	LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176569 12/09/11 176570 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	35.00 33.00		510.30 I 481.14 I	
		CUSTOMER	68.00	0.00	991.44	
		CATEGORY	68.00	0.00	991.44	

RUN DATE 12/14/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 119
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176571 12/09/11	000008 VISITING NURSE SERVICE	GONZALEZ, DOLOR	30.00		437.40 I
		CATEGORY	30.00	0.00	437.40

RUN DATE 12/14/11 - SALES JRNL # 0259		REG NY NY SALES REGISTER		PAGE 1 LTC NURSING H BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT	TYP SURPLUS
176572 12/09/11	000008 VISITING NURSE SERVICE	GONZALEZ, ELSA	24.00	349.92	I
		CATEGORY	24.00	0.00 349.92	

			YSIDE CITYWIDE				PAGE 1 - 121
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
			5	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176573	12/09/11	800000	VISITING NURSE SERVICE	GOYES, ELBA	20.00		291.60 I
176574	12/09/11	800000	VISITING NURSE SERVICE	GRAVER, EDNA	24.00		349.92 I
				CUSTOMER	44.00	0.00	641.52
				CATEGORY	44.00	0.00	641.52

RUN DATE 12	2/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 122	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI	AIDS AD	ULT POPUL
			5	SALES REGISTER			BILL WEEK END	ING 12	/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	URPLUS
176575 12	2/09/11	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER			PAGE 1 - 123 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176576 12/09/11	000008 VISITING NURSE SERVICE	GUERRERO, SUSAN	6.00		87.48 I
		CATEGORY	6.00	0.00	87.48

RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	124
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176577	12/09/11	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	84.00		1,224.72	- -
176578	12/09/11	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	39.50		575.92	- -
				CUSTOMER	123.50	0.00	1,800.64	
				CATEGORY	123.50	0.00	1,800.64	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176579 12/09/11 176580 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	20.00 18.00		291.60 I 262.44 I	
			CUSTOMER	38.00	0.00	554.04	
			CATEGORY	38.00	0.00	554.04	

RUN DATE 12/14/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 126	
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176581 12/09/11	000008 VISITING NURSE SERVICE	HENDY, BERNICE	10.00		145.80 I	
		CATEGORY	10.00	0.00	145.80	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 1	27
		:	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176582 12/09/11 176583 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - ,	56.00 40.00		816.48 583.20	I	
170303 12/03/11	000000	VISITING NORSE SERVICE	·					
			CUSTOMER	96.00	0.00	1,399.68		
			CATEGORY	96.00	0.00	1,399.68		

RUN DATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 128
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
		5	SALES REGISTER			BILL WEEK EN	DING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176584 12/09/11	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	32.00		466.57	I
176585 12/09/11	000008	VISITING NURSE SERVICE	HERRERA, HORACI	41.00		597.78	I
176586 12/09/11	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	41.00		597.78	I
			CUSTOMER	114.00	0.00	1,662.13	
			CATEGORY	114.00	0.00	1,662.13	

RUN DATE 1	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 129	
SALES JRNI	և # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			S	SALES REGISTER			BILL WEEK ENDING 12	2/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176587	12/09/11	800000	VISITING NURSE SERVICE	HUTNER, ELEANOR	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 12/14/11 - SUP SALES JRNL # 0259 LOC	SUNNYSIDE CITYWIDE C 001 SUNNYSIDE CITYWIDE REG	NY NY		PAGE 1 - 130 VCP CHOICE LHCSA
SALES OIGH # 0255 LOC	S A L E	=:= =:=		BILL WEEK ENDING 12/16/11
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176588 12/09/11 000	0008 VISITING NURSE SERVICE	IBASCO, SOFIA	20.00	291.60 I
		CATEGORY	20.00 0.00	291.60

RUN DATE 12/14/11 - SALES JRNL # 0259		REGNY NY SALES REGISTER		PAGE 1 - 131 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176589 12/09/11	000008 VISITING NURSE SERVICE	ICIANO, ALFREDO	21.00	306.18 I
		CATEGORY	21.00 0.00	306.18

RUN DATE 12/14/11 - :	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	132
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AII	OS ADULT POPUL
		S	ALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
176590 12/09/11	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	46.75		681.62 I	
				46 85			
			CATEGORY	46.75	0.00	681.62	

RUN DATE 12/14/11 - SALES JRNL # 0259		REGNY NY SALES REGISTER			PAGE 1 - 133 ADU ADULT BILL WEEK ENDING 12	2/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
176591 12/09/11	000008 VISITING NURSE SERVICE	INSERRA, CATHER	45.50		663.41 I	
		CATEGORY	45.50	0.00	663.41	

	12/14/11 - NL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY BALES REGISTE	R		PAGE 1 - CCL CONGREGATI BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
176592	12/09/11	000008	VISITING NURSE SERVICE	IRUSTA, MARIA	4.75		69.26	I
				GA THEODY		0.00	69.26	
				CATEGORY	4.75	0.00	09.20	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 135 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176593 12/09/11 176594 12/09/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	35.00 38.00		510.30 I 554.04 I
			CUSTOMER	73.00	0.00	1,064.34
			CATEGORY	73.00	0.00	1,064.34

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 13 VCP CHOICE LHCSA BILL WEEK ENDING	36 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176595 12/09/11 176596 12/09/11 176597 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JARAMILLO PAL,	10.00 4.00 24.00		145.80 I 58.32 I 349.92 I	
			CUSTOMER	38.00	0.00	554.04	
			CATEGORY	38.00	0.00	554.04	

	TE 12/14/11 JRNL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 HOA HOSPICE A BILL WEEK END	-	
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176598	12/09/11	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

	RUN DATE 12/	14/11 - SUE	P SUNNYS	IDE CITYWIDE				PAGE 1	- 13	8
ı	SALES JRNL #	0259 LOC	C 001 S	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				S	ALES REGISTER			BILL WEEK ENI	DING	12/16/11
ı										
ı	INVOICE# D	ATE CUS	ST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
ı										
ı	176599 12/	09/11 000	0008 V	ISITING NURSE SERVICE	JIMENEZ, ALTAGR	20.00		291.60	I	
ı										
ı					CATEGORY	20.00	0.00	291.60		

RUN DATE 12/14/11 SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK ENI	- 139 DING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176600 12/09/11 176601 12/09/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	JOHNSON, DOROTH JOHNSON, FANNY	20.00		291.60 116.64	I I
			CUSTOMER	28.00	0.00	408.24	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 12/14/11 -	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	140
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176602 12/09/11	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	25.00		364.50 I	
			CATEGORY	25.00	0.00		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	SA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176603 12/09/11 176604 12/09/11 176605 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SHARAN	12.00 43.00 20.00		174.96 626.94 291.60	I I
			CUSTOMER	75.00	0.00	1,093.50	
			CATEGORY	75.00	0.00	1,093.50	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 142 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176606 11/25/11 176607 12/09/11		SITING NURSE SERVICE		4.00 20.00		58.32 I 291.60 I
			CUSTOMER	24.00	0.00	349.92
			CATEGORY	24.00	0.00	349.92

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 143 ADU ADULT
			SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176608 12/09/11 176609 11/18/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	29.75 2.00		433.76 I 29.16 I
170005 11710711	00000	VIBITING NORDE BERVIOL	CUSTOMER	31.75	0.00	462.92
			COSTOMER	31.73	0.00	102.52
			CATEGORY	31.75	0.00	462.92

RUN DATE 12/14/11 - SUP SALES JRNL # 0259 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER		PAGE 1 - 144 VCP CHOICE LHCSA BILL WEEK ENDING 12/16/11
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176610 12/09/11 0000 176611 12/09/11 0000 176612 12/09/11 0000	008 VISITING NURSE SERVICE	KOUTROUBAS, THE LARA-MORA, BELE LE, HO	56.00 54.75 16.00	816.48 I 798.26 I 233.28 I
		CUSTOMER	126.75 0.00	1,848.02
		CATEGORY	126.75 0.00	1,848.02

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWI	DE REGNY NY SALES REGISTE	R		1 - 14 NURSING HOMEW, WEEK ENDING	O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176613 12/09/11 176614 12/09/11	000008 VISITING NURSE SE 000008 VISITING NURSE SE	•	24.50 16.00		357.21 I 233.28 I	
		CUSTOMER	40.50	0.00	590.49	
		– CATEGORY	40.50	0.00	590.49	

RUN DATE 12/	14/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	146
SALES JRNL #	0259 LOC 001		REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176615 12/	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 12/14/11 - SUP SUI SALES JRNL # 0259 LOC 00:		EG NY NY ES REGISTER			PAGE 1 - 147 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE CUST NO	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176616 12/09/11 000008	VISITING NURSE SERVICE	LINARES, MYRIAM	19.50		284.31 I
		CATEGORY	 19.50	0.00	284.31

	E 12/14/11 - RNL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END		
INVOICE:	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	ΓΥΡ	SURPLUS
176617	12/09/11	800000	VISITING NURSE SERVICE	LIRIANO, FRANCI	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 149 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176618 11/18/11 176619 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	4.00		58.32 I 14.58 I
			CUSTOMER	5.00	0.00	72.90
			CATEGORY	5.00	0.00	72.90

	E 12/14/11 - RNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			-		/O WALLS (LT
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176620 176621	12/09/11 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	32.00 32.00		466.56 466.56	I I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE 12/14/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 15	51
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		i	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176622 12/09/11	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	59.00		860.22 I	
			CATEGORY	59.00	0.00	860.22	

RUN DATE 12/14/11 - SUP SU	JNNYSIDE CITYWIDE				PAGE 1 -	152
SALES JRNL # 0259 LOC 00)1 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
		SALES REGISTER			BILL WEEK ENDI	NG 12/16/11
INVOICE# DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176600 10400411 00000			04.00		242 22	_
176623 12/09/11 000008	3 VISITING NURSE SERVICE	LONDONO, MARIA	24.00		349.92	I
			04.00		240.00	
		CATEGORY	24.00	0.00	349.92	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 153 VCP CHOICE LHCSA
SIEED CIAVE (1 023)	100 001		SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176624 12/09/11 176625 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LOOR, MAURA LOPEZ, ANGELICA	12.00 34.75		174.96 I 506.66 I
			CUSTOMER	46.75	0.00	681.62
			CATEGORY	46.75	0.00	681.62

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - 154 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176626 12/09/11	000008 VISITING NURSE SERVICE	LOPEZ, MARIA	41.00		597.78 I
		CATEGORY	41.00	0.00	 597.78

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	155
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176627 12/09/11	000008	VISITING NURSE SERVICE	LOPEZ, VIDA	56.00		816.48 I	- -
176628 12/09/11	800000	VISITING NURSE SERVICE	LORIA, DIANA	24.00		349.92 I	- -
			CUSTOMER	80.00	0.00	1,166.40	
			CODICIEN	00.00	0.00	1,130.10	
			CATEGORY	80.00	0.00	1,166.40	

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNNYSIDE CITYW LOC 001 SUNNYSIDE				CC	AGE 1 - CL CONGREGATI ILL WEEK END	E CARE PROGRAM
INVOICE# DATE	CUST NO CUSTOMER N.	AME	REFERENCE	HOURS TA	X AMT	AMOUNT 7	TYP SURPLUS
176629 12/09/11 176630 12/09/11			LUCES, LETICIA LYMN, ANGIE	19.75 25.00		287.96 364.50	I I
			CUSTOMER	44.75	0.00	652.46	
			CATEGORY	44.75	0.00	652.46	

RUN DATE 12/14/1						PAGE 1 - 157	
SALES JRNL # 025	9 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 12/16/11	
			SALES KEGISIEK			BILL WEEK ENDING 12/10/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176631 12/09/1	1 000008	VISITING NURSE SERVICE	MACCHIA, CATHY	33.00		481.14 I	
			CATEGORY	33.00	0.00	481.14	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		LTC NURSING	- 158 HOMEW/O WALLS (LT DING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUNT	TYP SURPLUS
176632 12/09/11	000008 VISITING NURSE SERVICE	MACK, BETTY	9.75	142.16	I
		CATEGORY	9.75	0.00 142.16	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	159
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176633	12/09/11	800000	VISITING NURSE SERVICE	MADEMARIANO, LU	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER				- 160 TE CARE PROGRAM DING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176634 12/02/11 176635 12/02/11 176636 12/09/11	800000 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAGILLIGAN, LOR MAGILLIGAN, LOR MAGILLIGAN, LOR	10.00 11.00 25.00		145.80 160.38 364.50	I I I
			CUSTOMER	46.00	0.00	670.68	
			CATEGORY	46.00	0.00	670.68	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		61 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176637 12/09/11 176638 12/09/11 176639 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MANGAN, JOHN	84.00 18.50 74.00		1,224.72 269.74 1,078.92	I I I	
			CUSTOMER	176.50	0.00	2,573.38		
			CATEGORY	176.50	0.00	2,573.38		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	162 EW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176640 12/02/11	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	6.00		87.48 I	
176641 12/09/11	800000	VISITING NURSE SERVICE	MANOS, ARCHIE	42.00		612.36 I	
176642 12/02/11	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	3.00		43.74 I	
176643 12/09/11	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	21.00		306.18 I	
			CUSTOMER	72.00	0.00	1,049.76	
			CATEGORY	72.00	0.00	1,049.76	

RUN DATE 12/14/11 -						PAGE 1 - 163
SALES JRNL # 0259	LOC 001		REG NY NY			CCL CONGREGATE CARE PROGRAM
		:	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
186644 10700711	00000		W10.7170 1177	00 00		001 60 7
176644 12/09/11	000008	VISITING NURSE SERVICE	MARINO, ANN	20.00		291.60 I
			CATEGORY	20.00	0.00	291.60

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 16 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176645 12/09/11	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 165
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176646 12/09/11	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	42.00		612.36 I
			CATEGORY	42.00	0.00	612.36

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 166
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
		5	SALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176647 12/09/11	000008	VISITING NURSE SERVICE	MARTIN, ELAUCAD	15.00		218.70	I
176648 12/09/11	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	12.00		174.96	I
			CUSTOMER	27.00	0.00	393.66	
			CATEGORY	27.00	0.00	393.66	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S		NY E G I S T E R			PAGE 1 CCL CONGREGA' BILL WEEK EN		E PROGRAM
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176649	12/09/11	800000	VISITING NURSE SERVICE	MART	INEZ, ELENA	70.00		1,020.60	I	
					CATEGORY	70.00	0.00	1,020.60		

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
176650 12/09/11 176651 11/18/11 176652 12/09/11 176653 12/09/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARTA MARTINEZ, MARTA MARTINEZ, ROSA	30.00 6.00 41.50 84.00		437.40 87.48 605.08 1,224.72	I I I
			CUSTOMER	161.50	0.00	2,354.68	
			CATEGORY	161.50	0.00	2,354.68	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	169
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			SALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYE	SURPLUS
176654 12/09/11	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04 I	
			CATEGORY	38.00	0.00	554.04	

	12/14/11 - NL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - :	Γ
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	SURPLUS
176655	12/09/11	000008	VISITING NURSE SERVICE	MASI, RAFFAELE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	71
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176656	12/09/11	800000	VISITING NURSE SERVICE	MATOS, ROSA	23.75		346.28 I	
				CATEGORY	23.75	0.00	346.28	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 172	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12	2/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
176657 12/09/11	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54 I	
176658 12/09/11	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44 I	
			CUSTOMER	231.00	0.00	3,367.98	
			CATEGORY	231.00	0.00	3,367.98	

RUN DATE 12/14/11 -	SUP SUNNYSIDE CITY	WIDE				PAGE 1 -	173
SALES JRNL # 0259	LOC 001 SUNNYSID	E CITYWIDE REG	NY NY			VCP CHOICE LHCS	SA
		SALE	S REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176659 12/09/11	000008 VISITING	NURSE SERVICE	MCGUIRE, HELEN	48.00		699.84	
			CATEGORY	48.00	0.00	699.84	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 174 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176660 12/09/11	000008 VISITING NURSE SERVICE	MCPARTLAN, CATH	4.00		58.32 I
		CATEGORY	4.00	0.00	58.32

RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 175
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			:	SALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
176661	12/09/11	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	8.50		123.93	I
176662	12/09/11	800000	VISITING NURSE SERVICE	MEJIA, MARINA	23.00		335.34	I
				CUSTOMER	31.50	0.00	459.27	
				CATECORY	31 50	0.00	459 27	
	, ,			MEJIA, MARINA	23.00	0.00	335.34	i

RUN DATE 12	2/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	176
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	G 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
176663 12	2/09/11	800000	VISITING NURSE SERVICE	MEJIA, ROSA	40.25		586.86 I	
				CATEGORY	40.25	0.00	586.86	

RUN DATE 12/14/11 - SUE	P SUNNYSIDE CITYWIDE			PAGE 1 - 177
SALES JRNL # 0259 LOC				VCP CHOICE LHCSA
	S A L E	S REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176664 12/09/11 000	0008 VISITING NURSE SERVICE	MELILLO, GRACE	20.00	291.60 I
		CATEGORY	20.00 0.00	291.60

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		LTC NURSING H	- 178 HOMEW/O WALLS (LT DING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176665 11/18/11 176666 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	4.00 20.00		58.32 291.60	I I
		CUSTOMER	24.00	0.00	349.92	
		CATEGORY	24.00	0.00	349.92	

		TYSIDE CITYWIDE	556 357			PAGE 1 - 179	9
SALES JRNL # 0	1259 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 1	12/16/11
INVOICE# DAT	CE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176667 12/09	9/11 000008	VISITING NURSE SERVICE	MENDOLIA, ANTOI	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 180 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176668 12/09/11	000008 VISITING NURSE SERVICE	MENDOZA, JULIO	35.00	510.30 I
		CATEGORY	35.00 0.00	510.30

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 181 VCP CHOICE LHCSA	
		SALES REGISTER			BILL WEEK ENDING 12/16/1	1
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
176669 12/09/11	000008 VISITING NURSE SERVICE	MENDOZA, VALENT	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	_

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	182 NG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176670 12/09/11	800000	VISITING NURSE SERVICE	MILEO, MARY	11.50		167.67	I
			CATEGORY	11.50	0.00	167.67	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 183	
SALES JRN	ъ # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			:	SALES REGISTER			BILL WEEK ENDING 12	/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
176671	12/09/11	800000	VISITING NURSE SERVICE	MOLINA, ANA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 184
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176672 12/09/11	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	8.00		116.64 I
176673 12/09/11	800000	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40 I
			CUSTOMER	38.00	0.00	554.04
			CATEGORY	38.00	0.00	554.04

RUN DATE 12/14/11 - SUE SALES JRNL # 0259 LOC	C 001 SUNNYSIDE CITYWIDE REG 1	IY NY S REGISTER		E 1 - 185 ADULT L WEEK ENDING 1	
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176674 12/09/11 000	0008 VISITING NURSE SERVICE	MOORE, ALISON 12.00		174.96 I 	
		CATEGORY 12.00	0.00	174.96	

RUN DATE 12/14/	11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	186
SALES JRNL # 02	59 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
		i	SALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176675 12/09/	11 000008	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30 I	
			CATEGORY	35.00	0.00	510.30	

RUN	I DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	187
SAI	LES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				\$	SALES REGISTER			BILL WEEK ENDING	3 12/16/11
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176	5676	12/09/11	800000	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 188 ADU ADULT BILL WEEK ENDING 1	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176677 12/09/11	800000	VISITING NURSE SERVICE	MORALES, GENERO	82.00		1,195.56 I	
			CATEGORY	82.00	0.00	1,195.56	

RUN DATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	89
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		\$	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176678 12/09/11	000008	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36	I	
176679 12/09/11	800000	VISITING NURSE SERVICE	NARANJO, HENRY	55.50		809.19	I	
				97.50	0.00	1 401 55		
			CUSTOMER	97.50	0.00	1,421.55		
			CATEGORY	97.50	0.00	1,421.55		

RUN DATE 12/14/11 - SALES JRNL # 0259		SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - CCL CONGREGATE (
			SALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176680 12/09/11	V 800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	191
SALES JRI	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176681	12/09/11	800000	VISITING NURSE SERVICE	NELLINI, MARY	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	E 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 192	
SALES JE	RNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WAL:	LS (LT
			:	SALES REGISTER			BILL WEEK ENDING 12/16	/11
INVOICE#	† DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
176682	12/09/11	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	47.75		696.20 I	
				CATEGORY	47.75	0.00	696.20	

RUN DATE 1	12/14/11 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 - 19	3
SALES JRNL	4 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176683 1	12/09/11	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	61.75		900.33 I	
				CATEGORY	61.75	0.00	900.33	

				YSIDE CITYWIDE				PAGE 1 -	
SA	ALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				Š	SALES REGISIER			BILL MEEK ENDING	3 12/10/11
IN	WOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
17	76684	12/09/11	000008	VISITING NURSE SERVICE	NIEVES, NANCY	43.00		626.94 I	
					CATEGORY	43.00	0.00	626.94	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - 195 ADU ADULT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176685 12/09/11	800000	VISITING NURSE SERVICE	NIGRO, CATHERIN	10.00		145.80 I
			CATEGORY	10.00	0.00	145.80

	- SUP SUNNYSIDE CITYWIDE				11102	- 196
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
		SALES REGISTER			BILL WEEK ENL	DING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176686 10/07/11	000008 VISITING NURSE SERVICE	E NINO, CARMEN	4.00		58.32	I
176687 12/09/11	000008 VISITING NURSE SERVICE	E NINO, CARMEN	20.00		291.60	I
		CUSTOMER	24.00	0.00	349.92	
		CATEGORY	24.00	0.00	349.92	

RUN DATE 12/14/11 -		YSIDE CITYWIDE				PAGE 1	·
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
		S	ALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176688 12/09/11	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	25.00		364.50	I
176689 12/09/11	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	28.00		408.24	I
			CUSTOMER	53.00	0.00	772.74	
			CATEGORY	53.00	0.00	772.74	

RUN DATE :		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 1 HCSA	98
			:	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176690	12/09/11	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
	12/09/11	800000	VISITING NURSE SERVICE		43.00		626.94	I	
176692	12/09/11	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	22.00		320.76	I	
				CUSTOMER	114.00	0.00	1,662.12		
				CATEGORY	114.00	0.00	1,662.12		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 199 ADU ADULT BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176693 12/09/11	000008 VISITING NURSE SERVICE	ORTIZ, AMALFIS	9.00		131.22 I	
		CATEGORY	9.00	0.00	131.22	

RUN DATE 12/14/11 -		NYSIDE CITYWIDE				PAGE 1 - 20	0
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE DATE	CODI NO	CODIONER WANTE	KET EKENCE	110010	IAM ANI	AMOUNI III	DOM HOD
176694 12/09/11	800000	VISITING NURSE SERVICE	ORTIZ, LILIA	29.50		430.12 I	
			CATEGORY	29.50	0.00	430.12	

RUN DATE 12/14 SALES JRNL # (REGNY NY SALES REGISTER			PAGE 1 - : ADU ADULT BILL WEEK ENDING	
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176695 12/09	9/11 000008	VISITING NURSE SERVICE	ORTIZ, MARIA	1.00		14.58 I	
			CATEGORY	1.00	0.00	14.58	

RUN DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	02
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER	}		BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176696	12/09/11	000008	VISITING NURSE SERVICE	OSPINA, ANA	8.00		116.64	I	
176697	12/09/11	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	39.25		572.27	I	
176698	12/09/11	800000	VISITING NURSE SERVICE	PAPADOPOULOS, M	19.25		280.67	I	
176699	12/09/11	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	49.75		725.36	I	
176700	12/09/11	800000	VISITING NURSE SERVICE	PAPOUTSIS, MARY	3.00		43.74	I	
176701	12/09/11	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
176702	12/02/11	800000	VISITING NURSE SERVICE	PARETTI, MARIE	8.00		116.64	I	
176703	12/09/11	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I	
				CUSTOMER	186.25	0.00	2,715.54		
				CATEGORY	186.25	0.00	2,715.54		

- 1				YSIDE CITYWIDE					203
15	SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			LTC NURSING HOME	
					SALES REGISIER			BILL WEEK ENDING	3 12/10/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
١.	156504	10/00/11	000000		2224 61246	00 00		001 60 T	
-	176704	12/09/11	800000	VISITING NURSE SERVICE	PARK, SUNG	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITY	WIDE REGNY NY SALES REGIST	E R		PAGE 1 - 20 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176705 12/09/11	000008 VISITING NURSE	SERVICE PARTAGAS, ANA	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	

RUN DATE 12/14/11 SALES JRNL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 205 VCP CHOICE LHCSA
		\$	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176706 12/02/11	000008	VISITING NURSE SERVICE	• • • •	1.00		14.58 I
176707 12/09/11	000008	VISITING NURSE SERVICE	,	24.50		357.22 I
176708 12/09/11	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	25.00		364.50 I
			CUSTOMER	50.50	0.00	736.30
			CATEGORY	50.50	0.00	736.30

RUN DATE 12/14/11 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	206
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	3 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176709 12/09/11	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	41.25		601.43 I	
			CATEGORY	41.25	0.00	601.43	

RUN	DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	107
SAL	LES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				:	SALES REGIS	TER		BILL WEEK EN	DING	12/16/11
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176	5710	12/09/11	800000	VISITING NURSE SERVICE	PEREZ, GLADY	S 18.00		262.44	I	
					CATEGO	RY 18.00	0.00	262.44		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 208 ADU ADULT BILL WEEK ENDING 12/16/1	L1
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
176711 12/09/11	000008 VISITING NURSE SERVIO	CE PERSAUD, RITA	49.00		714.42 I	
		CATEGORY	49.00	0.00	714.42	

RUN DATE 12/14 SALES JRNL # 0		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK END	
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176712 12/09 176713 12/09 176714 12/09 176715 12/09	/11 000008 /11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PHILIPPS, MARY PLACIDO, GENARO PLACIDO, MERCED POGGI, EMERITA	48.00 25.00 40.25 35.75		699.84 364.50 586.85 521.24	I I I
			CUSTOMER	149.00	0.00	2,172.43	
			CATEGORY	149.00	0.00	2,172.43	

RUN DATE 12/14/11 -						PAGE 1 -	
SALES JRNL # 0259	LOC 001		REG NY NY			LTC NURSING HOME	•
		S A	ALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176716 12/09/11	800000	VISITING NURSE SERVICE	PONCE, ALICIA	32.00		466.56 I	
			CATEGORY	32.00	0.00		

RUN DATE 12/14/13 SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176717 12/09/13 176718 12/09/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	PUISELLO, CIRA PULLIZA, DIANNE	27.50 35.75		400.96 521.24	I I
			CUSTOMER	63.25	0.00	922.20	
			CATEGORY	63.25	0.00	922.20	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	212 G 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176719 12/09/11	800000	VISITING NURSE SERVICE	QUARTUCCIA, ELI	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN	DATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 213	
SALE	S JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			5	SALES REGISTER			BILL WEEK ENDING 12/16/11	
	TGE!! 53.00	G11GE 110	GUGEOVED WAVE	2552254	*******		11/017FF FUE GUDDI 11/2	
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
1767	20 12/09/11	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	41.75		608.72 I	
1/6/	20 12/09/11	000006	VISITING NURSE SERVICE	QUIZHPI, MARIA	41.75		008.72	
				CATEGORY	41.75	0.00	608.72	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDII	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176721 12/09/11	800000	VISITING NURSE SERVICE	RAFFELLINI, MAR	6.00		87.48	I
			CATEGORY	6.00	0.00	87.48	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 21 LAP LOMBARDI AIDES	PEDIATRIC
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176722 12/09/11	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 216 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176723 12/09/11 176724 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	·	43.00 25.00		626.94 I 364.50 I
		CUSTOMER	68.00	0.00	991.44
		CATEGORY	68.00	0.00	991.44

			YSIDE CITYWIDE				PAGE 1 - 21	L7
SALES J	RNL # 0259	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA	10/16/11
				SALES REGISIER			BILL WEEK ENDING	12/10/11
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
156505	10/00/11				15 00		010 50 -	
176725	12/09/11	800000	VISITING NURSE SERVICE	RAMOS, IRIS	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	218
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB	ONLY
			5	SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176726	12/09/11	800000	VISITING NURSE SERVICE	RAMOS, JENNIFER	35.50		517.59 I	
				CATEGORY	35.50	0.00	517.59	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176727 12/09/11 176728 12/09/11 176729 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RANDAZZO, ROSAL	12.00 19.25 15.25		174.96 I 280.67 I 222.36 I	
			CUSTOMER	46.50	0.00	677.99	
			CATEGORY	46.50	0.00	677.99	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	220
SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	~ 10/16/11
			2	SALES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176730	12/09/11	800000	VISITING NURSE SERVICE	RICCARDELLO, SI	5.75		83.84 I	
				CATEGORY	5.75	0.00	83.84	

RUN DATE 1:	2/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	221
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
			:	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176731 1:	2/09/11	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 1	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	2
SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176732 1	12/09/11	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	55.75		812.84 I	
				CATEGORY	55.75	0.00	812.84	

RUN DATE 12/14/11 SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 223 VCP CHOICE LHCSA BILL WEEK ENDING 12	2/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
176733 12/09/11 176734 11/25/11 176735 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, ERNESTO	15.00 2.00 20.00		218.70 I 29.16 I 291.60 I	
			CUSTOMER	37.00	0.00	539.46	
			CATEGORY	37.00	0.00	539.46	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 224 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176736 12/09/11	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	
176737 12/09/11	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24	I
			CATEGORY	28.00	0.00	408.24	

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 226 LTC NURSING HOMEW/O WALLS (LT
SALES URNL # 0259	TOC 001		BALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176738 12/09/11 176739 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, WANDA ROBERTS, SARAH	36.50 11.75		532.18 I 171.32 I
			CUSTOMER	48.25	0.00	703.50
			CATEGORY	48.25	0.00	703.50

ı	RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	27
ı	SALES JRN	IL # 0259	LOC 001		REG NY NY			VCP CHOICE LHCSA	
ı				S	SALES REGISTER			BILL WEEK ENDING	12/16/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	176740	12/09/11	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	49.00		714.42 I	
					CATEGORY	49.00	0.00	 714.42	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176741 12/09/11	000008 VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		699.84 I	
		CATEGORY	48.00	0.00	699.84	

			YSIDE CITYWIDE					229
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			2	SALES REGISTER			BILL WEEK ENDI	NG 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176742	12/09/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	20.25		295.25	I
				CATEGORY	20.25	0.00	295.25	

			YSIDE CITYWIDE	556 vv.			PAGE 1 - 230	
SALES JE	RNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/16/11	
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176743	12/09/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE 12/14/11 -						PAGE 1 - :	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		2	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176744 12/09/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	

RUN DATE 1:	2/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 232	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			Ş	SALES REGISTER			BILL WEEK END	ING 12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
176745 12	2/09/11	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 233 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CU	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176746 12/09/11 176747 12/09/11		SITING NURSE SERVICE SITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	40.00 39.75		583.20 I 579.56 I
			CUSTOMER	79.75	0.00	1,162.76
			CATEGORY	79.75	0.00	1,162.76

RUN DATE 1 SALES JRNI	12/14/11 - SUP L # 0259 LOC		TYWIDE SIDE CITYWIDE	REG NY	NY			PAGE 1 VCP CHOICE L	- 23	34
511225 61412	_ 0200	OOL BOILLING		SALES	REGISTE	R		BILL WEEK EN		12/16/11
INVOICE#	DATE CUS	r no custome	ER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	11/25/11 0000 12/09/11 0000		NG NURSE SERVICE		MERO, SANTHY MERO, SANTHY	8.00 48.00		116.64 699.84	I	
170749	12/09/11 0000	JUO VISITI	NG NORSE SERVICE	RC	MERO, SANIHI					
					CUSTOMER	56.00	0.00	816.48		
					CATEGORY	56.00	0.00	816.48		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 235 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	I AMOUNT TYP SURPLUS
176750 12/09/11 176751 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	*	56.00 40.00	816.48 I 583.20 I
		CUSTOMER	96.00 0.0	1,399.68
		CATEGORY	96.00 0.0	 0 1,399.68

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	-	NY			ADU ADULT		236
73770 7 GP D 2 FP	G11GE 310	-	ALES RI				BILL WEEK EN		, .,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176752 10/07/11	800000	VISITING NURSE SERVICE		LUZ E	8.00		116.64	I	
176753 12/09/11	000008	VISITING NURSE SERVICE	ROSA,	LUZ E	40.00		583.20	I 	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176754 12/09/11 176755 12/09/11 176756 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSA, MANOLO ROSARIO, ELSA ROSARIO, MARIA	16.00 35.00 22.75		233.28 I 510.30 I 331.70 I	
			CUSTOMER	73.75	0.00	1,075.28	
			CATEGORY	73.75	0.00	1,075.28	

RUN DATE 1:	2/14/11 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 - 238	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 12	2/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
176757 1	2/09/11	800000	VISITING NURSE SERVICE	ROSEN, BESSIE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 1: SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AD BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		YP SURPLUS
176758 13	1/18/11	800000	VISITING NURSE SERVICE	RUBERTO, MARY	3.00		43.74	I
				CATEGORY	3.00	0.00	43.74	

RUN DATE 12/14/11						PAGE 1 - 240	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTER			BILL WEEK ENDING 12/	16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
176759 12/09/11	800000	VISITING NURSE SERVICE	RUBIN, EVGENY	9.00		131.22 I	
176760 12/09/11	800000	VISITING NURSE SERVICE	RUECKHER, PATRI	12.00		174.96 I	
			CHICEOMED	01 00	0.00	306.18	
			CUSTOMER	21.00	0.00	300.18	
			CATEGORY	21.00	0.00	306.18	

RUN DATE 12	2/14/11 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 - 241	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 12/1	6/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
176761 12	2/09/11	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

RUN DATE 12/14/11 - SUP SU	UNNYSIDE CITYWIDE				PAGE 1 -	242
SALES JRNL # 0259 LOC 00	01 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
	S A	LES REGISTER			BILL WEEK ENDIN	G 12/16/11
INVOICE# DATE CUST N	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176762 12/09/11 000008	8 VISITING NURSE SERVICE	RUFFEN, SANDRA	30.00		437.40 I	
		CATEGORY	30.00	0.00	437.40	

RUN DATE 12 SALES JRNL			SIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I	STER		PAGE 1 - ADU ADULT BILL WEEK ENDI	- 243 ENG 12/16/11
INVOICE#	DATE CU	JST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176763 12	/09/11 00	80000	VISITING NURSE SERVICE	RUSSO, MON	ICA 70.00		1,020.60	I
				CATE	GORY 70.00	0.00	1,020.60	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	44
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		•
		\$	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176764 11/11/11	000008	VISITING NURSE SERVICE	SAAVEDRA, STELL	6.00		87.48	I	
176765 12/09/11	800000	VISITING NURSE SERVICE	SAAVEDRA, STELL	31.75		462.92	I	
			CUSTOMER	37.75	0.00	550.40		
			CUSTOMER	3/./5	0.00	550.40		
			CATEGORY	37.75	0.00	550.40		

RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	5
SALES JE	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE‡	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176766	12/09/11	800000	VISITING NURSE SERVICE	SAKELL, CHRYSAN	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

	/14/11 - SUP SUNN					PAGE 1	- 24	16
SALES JRNL #	# 0259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
		\$	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176767 11/	/11/11 000008	VISITING NURSE SERVICE	SALADIN, MARIA	11.00		160.38	I	
176768 12/	/09/11 000008	VISITING NURSE SERVICE	SALADIN, MARIA	77.00		1,122.66	I	
			CUSTOMER	88.00	0.00	1,283.04		
			CATEGORY	88.00	0.00	1,283.04		

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 247	
SALES JRN	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (I	T
			Ş	SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176769	12/09/11	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	11.00		160.39 I	
							1.50.00	
				CATEGORY	11.00	0.00	160.39	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
176770 12/09/11 176771 12/09/11 176772 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SAMPOGNA, LUCY	16.00 16.00 49.00		233.28 233.28 714.42	I I
			CUSTOMER	81.00	0.00	1,180.98	
			CATEGORY	81.00	0.00	1,180.98	

			YSIDE CITYWIDE				PAGE 1 - 249	
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			2	SALES REGISTER			BILL WEEK ENDING 12	/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
176773	12/09/11	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	36.00		524.88 I	
				CATEGORY	36.00	0.00	 524.88	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	250
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		S	ALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176774 12/09/11	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	20.00		291.60 I	• •
			CATEGORY	20.00	0.00	291.60	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 251	
SALES JRN	ъ # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 12/16/1	.1
TATTOTOTOTI	DAME	CITCE NO	CHICHOMED NAME	DEFEDENCE	HOHD	max anm	AMOUNTE EURO CUIDRI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
176775	12/09/11	000008	VISITING NURSE SERVICE	SANDOVAL, FANNY	4.25		61.97 I	
170773	12/05/11	000000	VISITING NORSE SERVICE	SANDOVAL, PANNI	4.23		01.57	
								_
				CATEGORY	4.25	0.00	61.97	
I								

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	252
SALES JRN	IL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176776	12/09/11	800000	VISITING NURSE SERVICE	SCOTT, CATHERIN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNNYSIDE CITYWI LOC 001 SUNNYSIDE		= : =			ADU ADULT	- 253 DING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NA	ME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176777 12/09/11	000008 VISITING NU	RSE SERVICE S	SEGOVIA, BEATRI	30.00		437.40	I
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/14/11 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 254
SALES JRNL # 0259	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S	ALES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176778 12/09/11	000008 VISITING NURSE SERVICE	SEO, INJA	36.00	524.88 I
		CATEGORY	36.00 0.00	524.88

RUN DATE	12/14/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 255
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
			S	SALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176779	12/02/11	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	8.00		116.64	I
176780	12/09/11	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	55.50		809.20	I
176781	12/09/11	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	55.75		812.84	I
176782	12/09/11	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	41.50		605.07	I
176783	12/09/11	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	4.00		58.32	I
				CUSTOMER	164.75	0.00	2,402.07	
				CATEGORY	164.75	0.00	2,402.07	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	256
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176784 12/09/11	800000	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36 I	
			CATEGORY	42.00	0.00	612.36	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 257 VCP CHOICE LHCSA BILL WEEK ENDING 1	7 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176785 12/09/11 176786 12/09/11 176787 12/09/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, JAMOONIE	30.00 15.00 2.00		437.40 I 218.70 I 29.16 I	
			CUSTOMER	47.00	0.00	685.26	
			CATEGORY	47.00	0.00	685.26	

RUN DATE 12/14			REG NY NY			PAGE 1 -	258 MEW/O WALLS (LT
BALLO OIGNE # 0.	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
176788 12/09	11 000008	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90	I
			CATEGORY	5.00	0.00	72.90	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 259
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176789 12/09/11	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I
			CATEGORY	12.00	0.00	174.96

RUN DATE 12/14/11 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	260
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
		S	ALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176790 12/09/11	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

	RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - : ADU ADULT BILL WEEK ENDING	261 12/16/11
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	176791	12/09/11	000008	VISITING NURSE SERVICE	STALZER, STEPHA	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE					-	- 26	2	
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LH			
			S	ALES	REGISTER			BILL WEEK END	ING	12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
176792	12/09/11	000008	VISITING NURSE SERVICE	ST	AMBOULIDIS, V	56.00		816.48	I		
					CATEGORY	56.00	0.00	816.48			

RUN DATE 12 SALES JRNL	1/14/11 - SUP SUNN # 0259 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE A	- 263 DULT
		S A	ALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176793 12	/09/11 000008	VISITING NURSE SERVICE	STEIN, STEPHANI	18.00		262.44	I
			CATEGORY	18.00	0.00	262.44	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 264 ADU ADULT BILL WEEK ENDING 12/16/:	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	
176794 12/09/11	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LHOUSELL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
176795 12/09/11 176796 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.25 30.25		178.61 441.05	I I
			CUSTOMER	42.50	0.00	619.66	
			CATEGORY	42.50	0.00	619.66	

RUN DATE 12/14/11 - S				PAGE 1 - 266
SALES JRNL # 0259 L	LOC 001 SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER		LTC NURSING HOMEW/O WALLS (LT
	S	ALES REGISIER		BILL WEEK ENDING 12/16/11
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176797 12/09/11 0	000008 VISITING NURSE SERVICE	SUAREZ, TULIA	21.00	306.18 I
		CATEGORY	21.00 0.00	306.18

RUN DATE 12/14 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 267 ADU ADULT BILL WEEK ENDING 12/16/11	
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176798 12/09	/11 000008	VISITING NURSE SERVICE	SULLIVAN, FRANC	8.75		127.58 I	
			CATEGORY	8.75	0.00	127.58	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 26	8
SALES JRN	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176799	12/09/11	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 - 269	
SALES JRNL	# 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGR	
			2	SALES REGISTER			BILL WEEK ENDING 12/16/3	11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	US
176800 1	2/09/11	000008	VISITING NURSE SERVICE	TACITO, CONSTAN	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 270	
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176801 12/09/11	800000	VISITING NURSE SERVICE	TADDEO, LENA	56.25		820.13 I	
			====				
			CATEGORY	56.25	0.00	820.13	
			CATEGORY	56.25	0.00	820.13	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWID	E REGNY NY SALES REGISTE	R		PAGE 1 - 271 VCP CHOICE LHCSA BILL WEEK ENDING 12/16/	11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	ÜS
176802 12/09/11	000008 VISITING NURSE SERV	VICE TAVANO, SILVIA	56.00		816.48 I	
		 CATEGORY		0.00	816.48	

RUN DATE 12/14/11 - SUF	P SUNNYSIDE CITYWIDE			PAGE 1 - 272
SALES JRNL # 0259 LOC	C 001 SUNNYSIDE CITYWIDE RE	EG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S A L	ES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE	HOURS TAX AI	IT AMOUNT TYP SURPLUS
176803 12/09/11 000	0008 VISITING NURSE SERVICE	TAVERAS ARIAS,	16.00	233.28 I
		CATEGORY	16.00 0.0	00 233.28

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	ıΤ
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYPE	
176804	12/09/11	000008	VISITING NURSE SERVICE	TEMBELIS, DAPHN	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	274
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
		:	SALES REGISTER			BILL WEEK ENDIN	IG 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176805 12/09/11	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	35.00		510.30	- -
176806 12/09/11	800000	VISITING NURSE SERVICE	TINOCO, INES	35.00		510.30	• •
			CUSTOMER	70.00	0.00	1,020.60	
			CATEGORY	70.00	0.00	1,020.60	

RUN DATE 12/1	4/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 275
SALES JRNL #	0259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		S	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176807 12/0	9/11 000008	VISITING NURSE SERVICE	TISHCOFF, HERTA	9.00		131.22 I
176808 12/0	9/11 000008	VISITING NURSE SERVICE	TORO VEGA, LUZV	20.50		298.90 I
			CUSTOMER	29.50	0.00	430.12
			CATEGORY	29.50	0.00	430.12

RUN DATE 12/14/11 - SALES JRNL # 0259		SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 2 HCSA	76
		2	SALES REGISTER			BILL WEEK ENI	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176809 12/09/11		VISITING NURSE SERVICE	, -	84.00		1,224.72	I	
176810 12/09/11 176811 12/09/11		VISITING NURSE SERVICE VISITING NURSE SERVICE		25.00 69.00		364.50 1,006.02	I	
			CUSTOMER	178.00	0.00	2,595.24		
			CATEGORY	178.00	0.00	2,595.24		

RUN DATE 12/14/11 - St	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 277
SALES JRNL # 0259 LO	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S A	ALES REGISTER		BILL WEEK ENDING 12/16/11
INVOICE# DATE CU	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176812 12/09/11 00	000008 VISITING NURSE SERVICE	TORRES, MARGOT	42.00	612.36 I
		CATEGORY	42.00 0.00	612.36

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176813 12/09/11 176814 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TSOLISOS, FOTIN	20.00 55.50		291.60 809.20	I I
			CUSTOMER	75.50	0.00	1,100.80	
			CATEGORY	75.50	0.00	1,100.80	

RUN DATE 12,	/14/11 - SU	JP SUNNYS	SIDE CITYWIDE				F	PAGE 1	- 27	79
SALES JRNL	# 0259 LO	OC 001	SUNNYSIDE CITYWIDE REG I	NY 1	NY		I	LTC NURSING	HOMEW/	O WALLS (LT
			SALE	S R I	EGISTER		E	BILL WEEK EN	DING	12/16/11
INVOICE# I	DATE CU	JST NO C	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176815 12,	/09/11 00) 80000	VISITING NURSE SERVICE	TSUAI	, PING	20.00		291.60	I	
					CATEGORY	20.00	0.00	291.60		

RUN DATE 12/14/1	1 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 2	80
SALES JRNL # 025	9 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		i	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176816 12/09/1	1 000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	56.00		816.48	I	
176817 12/09/1	1 000008	VISITING NURSE SERVICE	UGURLUYAN, KARA	84.00		1,224.72	I	
			 CUSTOMER	140.00	0.00	2,041.20		
			CATEGORY	140.00	0.00	2,041.20		

RUN DATE 12/14/11 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	281
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	ALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175010 10/00/11				20.00		405 40 -	
176818 12/09/11	800000	VISITING NURSE SERVICE	URBINA, ANA	30.00		437.40 I	
				20.00		425 40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	282 G 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176819	12/09/11	800000	VISITING NURSE SERVICE	URENA, MARIA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 12/14/11 SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		83
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176820 12/09/11 176821 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENCIANO-ROJ, VALENCIANO-ROJ,	9.00 11.75		131.22 171.32	I	
			CUSTOMER	20.75	0.00	302.54		
			CATEGORY	20.75	0.00	302.54		

		SUNNYSIDE CIT		DEC MY	NTS7			11102 -	- 28	34	
SALES URNL	」# 0259 LOC	UUI SUNNYSI		-	NY E G I S T E R			ADU ADULT BILL WEEK EN	DING	12/16/11	
INVOICE#	DATE CUS	T NO CUSTOMER	R NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
176822 1	2/09/11 000	008 VISITING	NURSE SERVICE	VALEN	CIANO-ROJ,	8.00		116.64	I		
					CATEGORY	 8.00	0.00	116.64			

RUN DATE	12/14/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 285
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176823	12/09/11	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I
				CATEGORY	8.00	0.00	116.64

	12/14/11 - NL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	286 W/O WALLS (LT
DALLO OIC	NL # 0255	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176824 176825	12/09/11 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.75 6.00		83.84 I 87.48 I	
				CUSTOMER	11.75	0.00	171.32	
				CATEGORY	11.75	0.00	171.32	

I	RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	. – 2	87
5	SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L		
				5	SALES I	REGISTER			BILL WEEK EN	DING	12/16/11
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REI	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
-	176826	12/09/11	800000	VISITING NURSE SERVICE	VAS	QUEZ, ARTURO	42.00		612.36	I	
						CATEGORY	42.00	0.00	612.36		

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 288 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176827 12/09/11 176828 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ '	33.00 21.00		481.14 I 306.18 I
			CUSTOMER	54.00	0.00	787.32
			CATEGORY	54.00	0.00	787.32

RUN DATE 12, SALES JRNL		UP SUNNY OC 001	SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	– 28 CSA	39
			S	SALES REGISTER			BILL WEEK END	ING	12/16/11
			CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
176829 12,	/09/11 0	80000	VISITING NURSE SERVICE	VAZIRANI, CHAND	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 12/14/11 - SALES JRNL # 0259		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMI BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
176830 12/09/11	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/	14/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	291
SALES JRNL #	0259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176831 12/	09/11 000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	20.00		291.60 I	
			CATEGORY	20.00	0.00		

RUN DATE 12/14/11 SALES JRNL # 0259		REG NY NY SALES REGISTE	l R		PAGE 1 - 292 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/16/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176832 12/02/11 176833 12/09/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		4.00 46.00		58.32 I 670.68 I
		CUSTOMER	50.00	0.00	729.00
		- CATEGORY	50.00	0.00	729.00

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 293	
SALES JRN	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176834	12/09/11	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 294
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK END	ING 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
156005	10/00/11	000000			6 00		07.40	-
176835	12/09/11	000008	VISITING NURSE SERVICE	VIGGIANO, DOROT	6.00		87.48	I
				GARRIGODY	6.00	0.00	07.40	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 29	95
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176836	12/09/11	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE REG NY NY PAGE 1 - 296 SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY ADU ADULT										
SALES JR	NL # U259	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTE:	R		ADU ADULT BILL WEEK EN	DING	12/16/11		
			5				DIDD WEEK DIV	51110	12/10/11		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
176027	10/00/11	000000	VICTURAL NUMBER CERTIFICE	TITLE A CONTROL	0.00		121 22	_			
176837 176838	12/09/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VILLA, AGNES	9.00 4.00		131.22 58.32				
	- , - ,			VILLADA, MARIA							
176839	11/04/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	4.00		58.32	1			
176840	11/11/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	6.00		87.48	I			
176841	11/18/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	1.00		14.58	I			
176842	11/25/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	6.00		87.48	I			
176843	12/02/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	1.00		14.58	I			
				CUSTOMER	31.00	0.00	451.98				
				CATEGORY	31.00	0.00	451.98				

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 2 HCSA	97
		S	SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176844 12/02/11 176845 12/09/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VILLAPOL, ANNA VILLAPOL, ANNA	6.00 24.00		87.48 349.92	I	
170045 12/05/11	000000	VISITING NORSE SERVICE	·					
			CUSTOMER	30.00	0.00	437.40		
			CATEGORY	30.00	0.00	437.40		

RUN DATE	12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 298	
SALES JRN	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	1
			5	SALES REGISTER			BILL WEEK ENDING 12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176846	12/09/11	800000	VISITING NURSE SERVICE	VISCONTI, JASON	3.75		54.68 I	
				CATEGORY	3.75	0.00	54.68	

RUN DATE 12/14/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	299
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176847 12/09/11	800000	VISITING NURSE SERVICE	VITO, CARMEN	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

	RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 300										
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA			
			S	ALES REGISTE	3		BILL WEEK EN	DING	12/16/11		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
176848	12/09/11	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	70.00		1,020.60	I			
176849	11/18/11	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I			
176850	11/25/11	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I			
176851	12/02/11	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I			
176852	12/09/11	800000	VISITING NURSE SERVICE	WALLE, ILEANA	20.00		291.60	I			
176853	12/09/11	800000	VISITING NURSE SERVICE	WEBB, ANA	42.00		612.36	I			
				CUSTOMER	141.00	0.00	2,055.78				
				CATEGORY	141.00	0.00	2,055.78				

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
176854 12/09/11 176855 12/09/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	WEINHAUS, SUSAN WERNER, PHYLLIS	21.00 9.00		306.18 131.22	I I
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 1	12/14/11 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 3	02	
SALES JRNI	L # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY I	1X			VCP CHOICE L	HCSA		
			5	SALES RI	EGISTER			BILL WEEK EN	DING	12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
176856 1	12/09/11	800000	VISITING NURSE SERVICE	YAGHD	JIAN, SIRA	16.00		233.28	I		
					CATEGORY	16.00	0.00	233.28			

RUN DATE 1 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - CCL CONGREGATE (
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TY	, ,,
			VISITING NURSE SERVICE		12.00	IAX AMI	174.96 I	
170037 1	12/05/11	000000	VIBILING NORSE SERVICE	TEDDAPAN, DODDI			174.50	
				CATEGORY	12.00	0.00	174.96	

	12/14/11 NL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY S A L E S	NY REGISTEF	3		PAGE 1 VCP CHOICE LE BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176858	12/09/11	800000	VISITING NURSE SERVICE	YOU	SSEFF, NADIA	1.00		14.58	I	
					 CATEGORY	1.00	0.00	14.58		

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNN	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	- 305
TATIOT OF H DAME	GUGE NO		SALES REGISTER	HOHDG	may avm	BILL WEEK EN	- , -,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176859 12/09/11 176860 12/09/11	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ZAMBRANO, CRUZ	6.00 15.25		87.48 222.35	I
1/0000 12/09/11	000006	VISITING NORSE SERVICE	ZAMBRANO, VICTO	15.25			
			CUSTOMER	21.25	0.00	309.83	
			CATEGORY	21.25	0.00	309.83	

RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 306
SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET

			NYSIDE CITYWIDE					- 3	06
SALES JRI	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		70/76/77
				SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CHIST NO	CUSTOMER NAME	REFERENCE ACERNO, CLAIRE AMABILE, ANTOIN AYALA, ENRIQUE BEGUM, JAMILA BRADLEY, MARGAR BUCARO, CONCETT CEPEDA, TOMASA COLAVITTI, JEAN DIAZ, ALICIA DONOSO, MARGARE EARLINGTON, ALB ECKMAN, LOIS ESCOBAR, DOMING ESPINOZA, MARIA EXPOSITO, ALFON FELICIANO, JOAN FERNANDEZ, ANA GOMEZ, YOLANDA GREENSPAN, ALIC HUSTIU, SILVIA JIMENEZ, EUGENI JOHNSON, DOROTH LATVIS, CHARLES MANGRAY, KARMAD MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, GLORI MICHEL, DOROTHY MOSCICKA, JADWI MUSCAT, CARMEN NETTLES, DONNA NEWBOLD, RAMONA NISHIMURA, ALBE NUNEZ, ANGELINA NUNEZ, ANGELINA NUNEZ, IRIS ORTIZ, LAURA PAPHITIS, RICHA PAZIOULIS, KLEO PAZIOULIS, KLEO PAZIOULIS, KLEO PENA, WALESKA PEREZ, MARIA PICHARDO, MARIA PROANO, ALICIA PROANO, ALICIA PROANO, BRUNO PRYCE, CLYDIA RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, HOLG	HOTTRS	TAX AMT	AMOUNT	TVD	SURPLUS
11110101	DITTE	C001 110	CODIONER WILL	KEI EKENCE	1100115	11111 11111	11100111		50111 100
176861	12/09/11	000010	GUILDNET	ACERNO, CLAIRE	24.00		318.72	I	
176862	12/09/11	000010	GUILDNET	AMABILE, ANTOIN	7.00		1,260.00	I	
176863	12/09/11	000010	GUILDNET	AYALA, ENRIQUE	52.75		772.24	I	
176864	12/09/11	000010	GUILDNET	BEGUM, JAMILA	71.75		952.84	I	
176865	12/09/11	000010	GUILDNET	BRADLEY, MARGAR	7.00		1,260.00	I	
176866	12/09/11	000010	GUILDNET	BUCARO, CONCETT	45.00		597.60	I	
176867	12/09/11	000010	GUILDNET	CEPEDA, TOMASA	30.00		398.40	I	
176868	12/09/11	000010	GUILDNET	COLAVITTI, JEAN	56.00		743.68	Ī	
176869	12/09/11	000010	GUILDNET	DTAZ. ALTCTA	45.00		597.60	Ī	
176870	12/09/11	000010	GUILDNET	DONOSO MARGARE	24 00		318 72	Ī	
176871	12/09/11	000010	GUILDNET	EARLINGTON ALB	32 50		431 60	Ī	
176872	12/09/11	000010	GUILDNET	FCKMAN LOIS	7 00		1 260 00	Ī	
176873	12/09/11	000010	GUILDNET	FCCORAR DOMING	24 00		318 72	Ī	
176874	12/09/11	000010	GUILDNET	ESCOBAR, DOMING	45 00		510.72	Ī	
176875	12/09/11	000010	GUILDNET	ESPINOZA, MARIA	24.00		397.00 4E1 E2	I	
176876			GUILDNET	EAPOSITO, ALFON	34.00		431.32	± +	
	12/09/11	000010	GUILDNET	FELICIANO, JUAN	38.00		204.64	I	
176877	12/09/11	000010	GUILDNET	FERNANDEZ, ANA	20.00		265.60	I	
176878	12/09/11	000010	GUILDNET	GOMEZ, YOLANDA	7.00		92.96	I	
176879	12/09/11	000010	GUILDNET	GREENSPAN, ALIC	3/.25		494.68	I	
176880	12/09/11	000010	GUILDNET	HUSTIU, SILVIA	2.75		36.52	I	
176881	12/09/11	000010	GUILDNET	JIMENEZ, EUGENI	78.50		1,042.48	I	
176882	12/09/11	000010	GUILDNET	JOHNSON, DOROTH	64.00		849.92	I	
176883	12/09/11	000010	GUILDNET	LATVIS, CHARLES	7.00		1,260.00	I	
176884	12/09/11	000010	GUILDNET	MANGRAY, KARMAD	40.00		531.20	I	
176885	12/09/11	000010	GUILDNET	MARTINEZ, EMMA	36.00		478.08	I	
176886	12/09/11	000010	GUILDNET	MARTINEZ, GLORI	23.00		305.44	I	
176887	12/09/11	000010	GUILDNET	MICHEL, DOROTHY	56.00		743.68	I	
176888	12/09/11	000010	GUILDNET	MOSCICKA, JADWI	24.00		318.72	I	
176889	12/09/11	000010	GUILDNET	MUSCAT, CARMEN	25.00		332.00	I	
176890	12/09/11	000010	GUILDNET	NETTLES, DONNA	8.00		106.24	I	
176891	12/09/11	000010	GUILDNET	NEWBOLD, RAMONA	25.00		332.00	I	
176892	12/09/11	000010	GUILDNET	NISHIMURA, ALBE	66.00		876.48	I	
176893	12/09/11	000010	GUILDNET	NUNEZ, ANGELINA	20.00		265.60	I	
176894	11/25/11	000010	GUILDNET	NUNEZ, ANGELINA	1.00		85.00	I	
176895	12/02/11	000010	GUILDNET	NUNEZ, IRIS	12.00		159.36	I	
176896	12/09/11	000010	GUILDNET	ORTIZ, LAURA	63.00		836.64	I	
176897	12/09/11	000010	GUILDNET	PAPHITIS, RICHA	40.00		531.20	I	
176898	12/09/11	000010	GUILDNET	PAZIOULIS, GEOR	24.00		318.72	I	
176899	12/02/11	000010	GUILDNET	PAZIOULIS, KLEO	44.00		584.32	I	
176900	12/09/11	000010	GUILDNET	PAZTOULIS, KLEO	20.00		265.60	Ī	
176901	12/09/11	000010	GUILDNET	DENA MAITERA	56 00		743 68	Ī	
176902	12/09/11	000010	GUILDNET	PEREZ MARTA	30.00		398 40	Ī	
176903	12/09/11	000010	GUILDNET	DICHARDO MARIA	54 00		717 19	I	
176903	12/09/11	000010	GUILDNET	DRUMU VITALIA	21 00		717.12 270 00	I	
176904	12/09/11	000010	GUILDNET	DDONNO DDIMO	22.00		470.00	I	
176905	12/09/11	000010	GUILDNET	PROMIO, BRUNO	15 00		100.24	I	
176906	12/09/11	000010	GOITI DNEA GOITDNEI	PRICE, CLIDIA	13.00		133.4U	I	
			GUILDNET	REDIULA, VINCEN	∠U.UU 10 E0		∠00.0U	Τ Τ	
176908	12/09/11	000010	GUILDNET	KIVAS, GEKIKUDI	T3.50		∠50.96 703.04	I	
176909	12/09/11	000010	GUILDNET	KODKIGUEZ, HOLG	53.00		/03.84	Ι	
1									

RUN DATE 12/14/1							- 3	07
SALES JRNL # 025	9 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		
			SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
156010 1070071				15.00		100.00	_	
176910 12/09/1		GUILDNET	ROJAS, ANGEL			199.20	I	
176911 12/09/1		GUILDNET	ROJAS, HAYDEE			265.60	I	
176912 12/09/1		GUILDNET	RUBIANO, MARIA			205.84	I	
176913 12/09/13		GUILDNET	SALJANIN, DILJA			810.08	I	
176914 12/09/13		GUILDNET	SANCHEZ, ELIZAB	43.00		571.04	I	
176915 11/25/1		GUILDNET	SHELTON, AGUEDA			554.44	I	
176916 11/18/1		GUILDNET	SHIRKES, MIRIAM	10.00		132.80	I	
176917 12/09/13	1 000010	GUILDNET	SHIRKES, MIRIAM	36.50		484.72	I	
176918 11/25/1	1 000010	GUILDNET	SHIRKES, MIRIAM	1.00		85.00	I	
176919 12/09/13	1 000010	GUILDNET	TOROSSIAN, PARI	24.00		318.72	I	
176920 12/09/1	1 000010	GUILDNET	VILLACRES, LUZ	8.00		106.24	I	
176921 12/09/1	1 000010	GUILDNET	VLAHOS, MARIE	69.75		926.28	I	
176922 12/09/1	1 000010	GUILDNET	WEISZ, KLARA	4.00		53.12	I	
176923 12/09/1	1 000010	GUILDNET	WHITLEY, MYRNA	16.00		212.48	I	
176924 12/09/1	1 000010	GUILDNET	YI, CARLOS			318.72	I	
176925 12/09/1	1 000010	GUILDNET	YIANTSELIS, VIR			1,260.00	I	
176926 12/09/1		GUILDNET	ZARE, GLORIA			278.88	I	
176927 12/09/1		GUILDNET	ZUMAETA, FANNY	44.00		584.32	Ī	
			CUSTOMER 2	2,049.50	0.00	33,267.72		
			CATEGORY	2,049.50	0.00	33,267.72		

RUN DATE	E 12/14/11	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 3	08
SALES JR	RNL # 0259	TOG 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	TRST	10/16/11
				SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	† DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176928	12/09/11	000122	HEALTH FIRST	AUER, BARBARA	15.00		253.20	I	
176929	12/09/11	000122	HEALTH FIRST	BEGUM, MANWARA	24.00		405.12	I	
176930	12/09/11	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
176931	12/09/11	000122	HEALTH FIRST	BOWERS, DIANE	30.00		506.40	I	
176932	12/09/11	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
176933	12/09/11	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
176934	12/09/11	000122	HEALTH FIRST	CEBALLOS, ANA	40.00		675.20	I	
176935	12/09/11	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
176936	12/09/11	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
176937	12/09/11	000122	HEALTH FIRST	DORNELLAS, STEL	24.00		405.12	I	
176938	12/09/11	000122	HEALTH FIRST	ESPAILLAT, AMPA	20.00		337.60	I	
176939	11/18/11	000122	HEALTH FIRST	ESTEVES, JOSE	72.00		1,215.36	I	
176940	12/09/11	000122	HEALTH FIRST	FERGERSON, TINA	33.00		557.04	I	
176941	12/09/11	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
176942	12/09/11	000122	HEALTH FIRST	FONTANES, PEDRO	28.00		472.64	I	
176943	12/09/11	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
176944	12/09/11	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
176945	12/09/11	000122	HEALTH FIRST	HENRY, BRENDA	12.00		202.56	I	
176946	11/18/11	000122	HEALTH FIRST	KAUR, HARBANS	21.00		354.48	I	
176947	12/09/11	000122	HEALTH FIRST	LARA, TOMASA	16.00		270.08	I	
176948	12/09/11	000122	HEALTH FIRST	LAZALA, GLADYS	84.00		1,417.92	I	
176949	12/09/11	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	76.75		1,295.54	I	
176950	12/09/11	000122	HEALTH FIRST	MACARENA, SAHAR	63.00		1,063.44	I	
176951	12/09/11	000122	HEALTH FIRST	MARTIN, ARIANA	12.00		202.56	I	
176952	12/09/11	000122	HEALTH FIRST	RIVERA, CHRISTO	18.00		303.84	I	
176953	12/09/11	000122	HEALTH FIRST	RIVERA, EDDIE	18.00		308.70	I	
176954	12/09/11	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
176955	12/09/11	000122	HEALTH FIRST	RUIZ JR, SAMUEL	17.00		286.96	I	
176956	12/09/11	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
176957	12/09/11	000122	HEALTH FIRST	SALHUANA, YOLAN	16.00		270.08	I	
176958	12/09/11	000122	HEALTH FIRST	SPIVEY, PATRICI	12.00		202.56	I	
176959	12/09/11	000122	HEALTH FIRST	ST ROMAINE, CLA	56.00		945.28	I	
176960	12/09/11	000122	HEALTH FIRST	SURIEL, GERTRUD	28.00		472.64	I	
176961	12/09/11	000122	HEALTH FIRST	TEJADA, PAULA	40.00		675.20	I	
176962	12/09/11	000122	HEALTH FIRST	WILLIAMS, RODNE	24.00		405.12	I	
				REFERENCE AUER, BARBARA BEGUM, MANWARA BHAIRO, KOWSILI BOWERS, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD TEJADA, PAULA WILLIAMS, RODNE	,162.75	0.00	19,632.08		

CATEGORY 1,162.75

0.00 19,632.08

RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER							PAGE 1	- 3	09
SALES JE	RNL # 0259	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			NHP NEIGHBORE	HOOD	HEALTH
			SALE	S REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	'I'AX AM'I'	AMOUN'I'	TYP	SURPLUS
176963	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AHMED. IIMARA	54.50		919.96	Т	
176964	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AKHTAR SELINA	56.00		945.28	T	
176965	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	ARDITTO, PATRIC	20.00		337.60	T	
176966	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	BRATHWAITE, DON	28.00		472.64	T	
176967	11/18/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	CHIIKWILTIORAH. T	94.00		1.586.72	T	
176968	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DARWISH, NADIA	4.00		67.52	Ī	
176969	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ. CARMEN	20.00		337.60	T	
176970	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	8.00		135.04	Ī	
176971	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
176972	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	36.00		607.68	I	
176973	12/02/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHALIL, RASHAN	35.00		590.80	I	
176974	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHAN, FARUOUE	30.25		510.62	I	
176975	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHERIN	35.00		590.80	I	
176976	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
176977	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	24.00		405.12	I	
176978	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	23.00		388.24	I	
176979	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, JESS	24.00		405.12	I	
176980	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
176981	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	54.75		924.18	I	
176982	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SANCHEZ, CHRIST	9.00		151.92	I	
176983	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
176984	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	68.75		1,160.50	I	
176985	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
176986	12/09/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	34.00		573.92	I	
			NEIGHBORHOOD HEALTH PROVIDERS NEIGHB	CUSTOMER	838.25	0.00	14,149.66		
				CATEGORY	838.25	0.00	14,149.66		

INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 176987 11/18/11 000126 NYS CATHOLIC/FIDELIS ANDERSON, MARGA 1.00 90.00 I 176988 12/02/11 000126 NYS CATHOLIC/FIDELIS BATISTA, JOSE 72.00 1,215.36 I 176989 12/09/11 000126 NYS CATHOLIC/FIDELIS BERGES, MARITZA 40.00 675.20 I 176990 12/09/11 000126 NYS CATHOLIC/FIDELIS BERGES, MARITZA 40.00 708.96 I 176991 11/18/11 000126 NYS CATHOLIC/FIDELIS BOCHENEK, JOLAN 42.00 708.96 I 176992 12/09/11 000126 NYS CATHOLIC/FIDELIS GIL, ALICIA M 35.00 590.80 I 176993 11/25/11 000126 NYS CATHOLIC/FIDELIS GIL, ALICIA M 35.00 590.80 I 176994 12/09/11 000126 NYS CATHOLIC/FIDELIS JOHNSON, ALICE 1.00 90.00 I 176995 11/18/11 000126 NYS CATHOLIC/FIDELIS LITMAN, GAIL 24.00 405.12 I 176996 12/09/11 000126 NYS CATHOLIC/FIDELIS MARKS, ERIC T. 1.00 90.00 I 176996 12/09/11 000126 NYS CATHOLIC/FIDELIS MARKS, ERIC T. 1.00 90.00 I 176997 12/09/11 000126 NYS CATHOLIC/FIDELIS MARTINEZ, LUISA 84.00 1,417.92 I 176999 11/18/11 000126 NYS CATHOLIC/FIDELIS MULLOKONDOVA, S 15.00 253.20 I 176999 11/11/11 000126 NYS CATHOLIC/FIDELIS OLIVAPUIG, CARM 20.00 337.60 I 176099 11/11/11 000126 NYS CATHOLIC/FIDELIS PANOS, DESPINA 72.00 1,215.36 I 177001 12/09/11 000126 NYS CATHOLIC/FIDELIS PEREZ, MARIA E 20.00 337.60 I 177002 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 742.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 742.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 752.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS VARENTIN, NORMA 1.00 90.00 I	RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE						PAGE 1		
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 176987 11/18/11 000126 NYS CATHOLIC/FIDELIS ANDERSON, MARGA 1.00 90.00 I 176988 12/09/11 000126 NYS CATHOLIC/FIDELIS BATISTA, JOSE 72.00 1,215.36 I 176989 12/09/11 000126 NYS CATHOLIC/FIDELIS BERGES, MARITZA 40.00 675.20 I 176990 12/09/11 000126 NYS CATHOLIC/FIDELIS BERGES, MARITZA 40.00 708.96 I 176991 11/18/11 000126 NYS CATHOLIC/FIDELIS FO K, CHAN 1.00 90.00 I 176992 12/09/11 000126 NYS CATHOLIC/FIDELIS GIL, ALICIA M 35.00 590.80 I 176993 11/25/11 000126 NYS CATHOLIC/FIDELIS JOHNSON, ALICE 1.00 90.00 I 176994 12/09/11 000126 NYS CATHOLIC/FIDELIS LITMAN, GAIL 24.00 405.12 I 176996 12/09/11 000126 NYS CATHOLIC/FIDELIS LITMAN, GAIL 24.00 405.12 I 176996 12/09/11 000126 NYS CATHOLIC/FIDELIS MARKS, ERIC T. 1.00 90.00 I 176997 12/09/11 000126 NYS CATHOLIC/FIDELIS MARKS, ERIC T. 1.00 90.00 I 176999 11/18/11 000126 NYS CATHOLIC/FIDELIS MARKS, ERIC T. 1.00 90.00 1 176999 11/15/11 000126 NYS CATHOLIC/FIDELIS MULLOKONDOVA, S 15.00 253.20 I 176999 11/11/11 000126 NYS CATHOLIC/FIDELIS MULLOKONDOVA, S 15.00 337.60 I 176999 11/11/11 000126 NYS CATHOLIC/FIDELIS PANOS, DESPINA 72.00 1,215.36 I 177000 12/09/11 000126 NYS CATHOLIC/FIDELIS PANOS, DESPINA 72.00 337.60 I 177001 12/09/11 000126 NYS CATHOLIC/FIDELIS ROMERO AYALA, A 32.00 540.16 I 177002 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 742.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 742.72 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS VALENTIN, NORMA 1.00 90.00 I	SALES JRNL #	0259 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				- ,	
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176996	176989 12/0	9/11 000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	10 00		675 20	I	
176996	176990 12/0	9/11 000126	NYS CATHOLIC/FIDELIS	BOCHENEK, JOLAN	42.00		708.96	I	
176996	176991 11/1	.8/11 000126	NYS CATHOLIC/FIDELIS	FO K, CHAN	1.00		90.00	I	
176996	176992 12/0	9/11 000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.80	I	
176996		5/11 000126	NYS CATHOLIC/FIDELIS		1.00		90.00		
176996			NYS CATHOLIC/FIDELIS	LITMAN, GAIL	24.00		405.12		
176996			NYS CATHOLIC/FIDELIS	MARKS, ERIC T.	1.00		90.00	I	
176998 11/25/11 000126 NYS CATHOLIC/FIDELIS OLIVAPUIG, CARM 20.00 337.60 I 176999 11/11/11 000126 NYS CATHOLIC/FIDELIS PANOS, DESPINA 72.00 1,215.36 I I 177000 12/09/11 000126 NYS CATHOLIC/FIDELIS PEREZ, MARIA E 20.00 337.60 I I 177001 12/09/11 000126 NYS CATHOLIC/FIDELIS ROMERO AYALA, A 32.00 540.16 I I 177002 12/09/11 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 44.00 742.72 I 177003 12/09/11 000126 NYS CATHOLIC/FIDELIS SZE, BECKY 33.00 557.04 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS VALENTIN, NORMA 1.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS VARGAS, RAQUEL 62.00 1,046.56 I 1 1 1 1 1 1 1 1			NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.92	I	
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177003 12/09/11 000126 NYS CATHOLIC/FIDELIS SZE, BECKY 33.00 557.04 I 177004 11/18/11 000126 NYS CATHOLIC/FIDELIS VALENTIN, NORMA 1.00 90.00 I 177005 12/09/11 000126 NYS CATHOLIC/FIDELIS VARGAS, RAQUEL 62.00 1,046.56 I 1.046.56 I 1.046.5	, .			·					
177005 12/09/11 000126 NYS CATHOLIC/FIDELIS VARGAS, RAQUEL 62.00 1,046.56				SAMOJEDNY, MICH	44.00		742.72		
177005 12/09/11 000126 NYS CATHOLIC/FIDELIS VARGAS, RAQUEL 62.00 1,046.56				SZE, BECKY	33.00		557.04	_	
		- ,			1.00		90.00	I	
	177005 12/0	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	62.00		1,046.56	I	
				CUSTOMER	600.00	0.00	10,493.60		
CUSIOMER 600.00 0.00 10,493.60				COSTOMER	000.00	0.00	10,493.00		
CATEGORY 600.00 0.00 10,493.60				CATEGORY	600.00	0.00	10,493.60		

RUN DATE 1 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 UHC UNITED HE BILL WEEK END		1 12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177007 1 177008 1 177009 1 177010 1 177011 1 177012 1 177013 1	.2/09/11 .2/09/11 .2/09/11 .2/09/11 .2/09/11 .2/09/11 .2/09/11	000128 000128 000128 000128 000128 000128 000128 000128	UNITED HEALTH CARE	CALDERON, MIGDA KHODZAUDIEV, NI LYMBERIS, HELEN MILLAN, ARMIDA MUSHAYEV, BORIS SAFOS, PATRA SANTOS, MILAGRO YUSUPOV, PULAT	42.00 25.00 70.00 32.00 56.00 4.00 28.00		720.72 429.00 1,201.20 549.12 960.96 960.96 68.64 480.48	I I I I I	
177014 1	.2/09/11	000128	UNITED HEALTH CARE	ZANE, GEORGE CUSTOMER CATEGORY	15.00 328.00 328.00	0.00	257.40 5,628.48 5,628.48		

RUN DATE 12/14/11 - SALES JRNL # 0259		SIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 EHP EMBLEM H		12/16/11
INVOICE# DATE	CUST NO CUSTOM	IER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177015 12/09/11 177016 12/09/11 177017 12/09/11 177018 12/09/11 177019 12/09/11	000114 EMBLEM 000114 EMBLEM 000114 EMBLEM	I HEALTH I HEALTH I HEALTH I HEALTH I HEALTH	COPE, WILLIE COPELAND, ELISE DE LA O, MARIA REYNOLDS, HARRI WESTFIELD, BREN	84.00 30.00 14.00 12.00 56.00		1,176.00 427.50 196.00 168.00 784.00	I I I I	
			CUSTOMER	196.00	0.00	2,751.50		
			CATEGORY	196.00	0.00	2,751.50		

RUN DATE 12/14/11 - SUP SUNNY	YSIDE CITYWIDE			PAGE 1 - 313	
SALES JRNL # 0259 LOC 001	SUNNYSIDE CITYWIDE REG	NY NY		HIP HEALTH INSURANCE PLAN	Ŋ
	SALE	S REGISTER		BILL WEEK ENDING 12/16/1	11
TATIOTOR! DAME GUGE NO	CHOROMED NAME	DEFENDA	HOUD BAY AME	AMOUNTE EUR GURRI	
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLU	72
177020 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL	7.50	126.60 I	
177021 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	BORLAZA, FRANCI	84.00	1,417.92 I	
177022 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	DE JESUS, TIBUR	66.00	1,114.08 I	
177023 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	GOMES, AGUSTINA	56.00	945.28 I	
177024 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	GREGG, DAVID	30.00	506.40 I	
177025 12/02/11 000136	HEALTH INSURANCE PLAN OF NY	LOYOLA, MARIA	30.00	506.40 I	
177026 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	ORR, LOUISE	33.00	557.04 I	
177027 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	SHAH, HANSIKABE	4.00	67.52 I	
177028 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	TOWLES, ADA	20.00	337.60 I	
177029 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	WILLIAMS, DIANE	16.00	270.08 I	
177030 12/09/11 000136	HEALTH INSURANCE PLAN OF NY	ZAMBRANO, ZOILA	4.00	67.52 I	
		CUSTOMER	350.50 0.00	5,916.44	
		CATEGORY	350.50 0.00	5,916.44	

RUN DATE 12/14/11 - SALES JRNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HPS HEALTH PLUS BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
177031 12/09/11 177032 12/09/11 177033 12/09/11 177034 12/02/11 177035 12/02/11	000138 000138 000138 000138 000138	HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC	HARDING, EDNA VAZQUEZ, ARCADI VEGA, GLORIA WALTERS, BYRON YOUNG, KALEILE	18.00 12.00 35.00 50.00 36.00		306.00 I 204.00 I 595.00 I 850.00 I 612.00 I	
			CUSTOMER	151.00	0.00	2,567.00	
			CATEGORY	151.00	0.00	2,567.00	

RUN DATE 12/14/11 - SALES JRNL # 0259		SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 AFF AFFINITY BILL WEEK ENI		PLUS
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP :	SURPLUS
177036 12/09/11 177037 12/09/11 177038 12/09/11	000142 A	AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS	HERNANDEZ, ANTO PURNELL, ROSE M VAMVAKAS, SOPHI	32.00 28.00 32.00		768.00 672.00 768.00	I I	
			CUSTOMER	92.00	0.00	2,208.00		
			CATEGORY	92.00	0.00	2,208.00		

RUN DATE	: 12/14/11 - RNL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 MPH METROPLUS	- 3: S HEA!	16 LTH
				SALES REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177039	12/09/11	000130	METROPLUS HEALTH	ABBAS, SENOWARA	84.00		1,440.60	I	
177040	12/09/11	000130	METROPLUS HEALTH	ANDERSON, BETH	42.00		720.30	I	
177041	12/09/11	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I	
177042	12/09/11	000130	METROPLUS HEALTH	BEDOYA, MONICA	22.00		377.30	I	
177043	10/28/11	000130	METROPLUS HEALTH	BESANT, NAOMI	5.00		85.75	I	
177044	12/09/11	000130	METROPLUS HEALTH	BRACERO, HELEN	84.00		1,440.60	I	
177045	12/09/11	000130	METROPLUS HEALTH	BRIGGS, LOUIS	77.00		1,320.55	I	
177046	12/09/11	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25	I	
177047	12/09/11	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
177048	12/09/11	000130	METROPLUS HEALTH	DAVIS, ANGIE	84.00		1,440.60	I	
177049	12/09/11	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
177050	12/09/11	000130	METROPLUS HEALTH	DURAHAM, CYNTHI	8.00		137.20	I	
177051	12/02/11	000130	METROPLUS HEALTH	GALAS, TERESA	42.00		720.30	I	
177052	12/09/11	000130	METROPLUS HEALTH	GONZALEZ, CARLO	20.00		343.00	I	
177053	12/09/11	000130	METROPLUS HEALTH	MANIACI, VINCEN	84.00		1,440.60	I	
177054	12/09/11	000130	METROPLUS HEALTH	MATUTE-CALLE, R	84.00		1,440.60	I	
177055	12/09/11	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I	
177056	12/09/11	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I	
177057	12/09/11	000130	METROPLUS HEALTH	PUCHUELA, MARIA	56.00		960.40	I	
177058	12/09/11	000130	METROPLUS HEALTH	RYALS, CHARLES	34.00		583.10	I	
177059	12/09/11	000130	METROPLUS HEALTH	SANTORO, MATTHE	36.00		617.40	I	
							17,938.90		

RUN DATE 12/14/11 - SALES JRNL # 0259	SUP SUNNYSIDE CITYWI LOC 001 SUNNYSIDE	CITYWIDE REG NY NY	GISTER		PAGE 1 - AMG AMERIGROUP BILL WEEK ENDI	
INVOICE# DATE	CUST NO CUSTOMER NA	ME REFERE	ENCE HOURS	TAX AMT	AMOUNT T	YP SURPLUS
177060 12/09/11 177061 12/09/11 177062 12/09/11 177063 12/09/11	000132 AMERIGROUP 000132 AMERIGROUP 000132 AMERIGROUP 000132 AMERIGROUP	GIAMBRO GUERRA,	DEZ, NORK 20.00 NNE, JOSE 7.00 LORRAIN 70.00 JOHNNY 8.00		337.40 118.09 1,180.90 134.96	I I I
		C	CUSTOMER 105.00	0.00	1,771.35	
		C	 ATEGORY 105.00	0.00	1,771.35	

RUN DATE 12/14/11 SALES JRNL # 0259		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E				PAGE 1 - WEL WELCARE OF BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
177064 12/09/11 177065 12/09/11 177066 12/09/11 177067 11/25/11	000124 000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	GENAO, DANIELA MARTINEZ, MARIA RAMIREZ, ALIDA RANJITSINGH, ES	50.75 41.75 36.00 64.00		872.90 718.10 619.20 1,100.80	I I I
				CUSTOMER	192.50	0.00	3,311.00	
				CATEGORY	 192.50	0.00	3,311.00	

RUN DATE 12/14/11	SUP SUN	NYSIDE CITYWIDE					PAGE 1	- 319
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG NY				NPS NY PRESBY	
			SALES	REGISTER			BILL WEEK END	ING 12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
177068 12/09/11	000134	NY-PRESBYTERIAN SYST	TEM SELECT F	KARASSAVIDIS, A	49.00		840.84	I
				CATEGORY	49.00	0.00	840.84	

-	12/14/11 -		YSIDE CITYWIDE				11102	- 320	
SALES JR	NL # 0259	LOC 001	SUNNYSIDE CITYWIDE REG S A L E				PAR PRIVATE BILL WEEK ENI	TNG 12/1	16/11
			5 11 11 11				DIEL WEEK EN	71110 12/1	.0/ 11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SUF	RPLUS
177069	12/09/11	000002	SUNNYSIDE COMMUNITY SERVICES	BUTLER, MARY	12.00		174.00	т	
177070	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, TIRSO	4.00		58.00	Ť	
177071	12/09/11	000002	SUNNYSIDE COMMUNITY SERVICES	NEREY, DULCE	8.00		116.00	Ī	
177072	12/09/11	000002	SUNNYSIDE COMMUNITY SERVICES	REID, DAPHNIE	4.00		58.00	I	
177073	12/09/11	000002	SUNNYSIDE COMMUNITY SERVICES	TSONIS, EFFIE	4.00		58.00	I	
				CUSTOMER	32.00	0.00	464.00		
177074	12/09/11	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	Т	
177071	12/05/11	000010	DOIDIN, CIRCIDIINE	DOIGIN, MENIA	20.00		310.00	_	
177075	12/09/11	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	25.00		344.75	I	
177076	12/09/11	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
177077	12/09/11	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
	, ,		· · · · · · · · · · · · · · · · · · ·	,					
				CATEGORY	92.00	0.00	2,580.75		

RUN DATE 12/14/ SALES JRNL # 02		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 CAS CHILDREN BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177078 12/09/ 177079 12/09/ 177080 12/09/ 177081 12/09/ 177082 12/09/ 177083 12/09/	11 000088 11 000088 11 000088 11 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI REDDICK, LORENZ REDDICK, TRINIT SALAS, HELENA	25.00 6.00 4.00 17.00 16.25 28.00		387.50 93.00 62.00 263.50 251.88 434.00	I I I I	
			CUSTOMER	96.25	0.00	1,491.88		
			CATEGORY	96.25	0.00	1,491.88		

RUN DATE 12/14/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 32	22
SALES JRNL # 0259	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			GHC GIRLING	HEALTI	H CARE OF NY
			SALE	S REGISTER			BILL WEEK EN	DING	12/16/11
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177084 11/11/11	000090	GIRLING HEALTH CARE	OE MV	ALEKSANDROVA, S	18.00		234.00	I	
1				•					
177085 11/18/11	000090	GIRLING HEALTH CARE		ALEKSANDROVA, S	18.00		234.00	I	
177086 11/25/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	6.00		78.00	I	
177087 12/09/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	22.75		295.75	I	
177088 12/09/11	000090	GIRLING HEALTH CARE	OF NY	DIRADOURIAN, NI	168.00		2,184.00	I	
177089 11/25/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	2.00		26.00	I	
177090 12/09/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	6.00		78.00	I	
177091 12/09/11	000090	GIRLING HEALTH CARE	OF NY	JOHNSON, ROBERT	26.00		338.00	I	
177092 12/09/11	000090	GIRLING HEALTH CARE	OF NY	KILIMLIAN, PEPR	25.00		325.00	I	
177093 12/09/11	000090	GIRLING HEALTH CARE	OF NY	SAK, FIRDWS	12.00		156.00	I	
177094 12/09/11	000090	GIRLING HEALTH CARE	OF NY	THOMPSON, ORALI	83.75		1,088.75	I	
				CUSTOMER	387.50	0.00	5,037.50		
				CATEGORY	387.50	0.00	5,037.50		
				311111001CI	33.130	0.00	3,037.30		

	12/14/11 NL # 0259	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY				PAGE 1 PAR PRIVATE	- 3	23
				SALES	REGISTE	R		BILL WEEK EN	DING	12/16/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
177095	12/09/11	000096	JIBAJA, ROSEMARY	J	IBAJA, ROSEMAR	168.00		2,676.00	I	
177096	12/09/11	000098	MILDRED PANSE	P	PANSE, MILDRED	16.00		248.00	I	
177097	12/09/11	000143	ETTORE COPPOLA	C	COPPOLA, ETTORE	24.00		378.00	I	
177098 177099	11/18/11 12/09/11	000145 000145	LARRY EISENBERG LARRY EISENBERG		BERGER, TESS BERGER, TESS	5.00 51.00		77.50 814.50	I I	
					CUSTOMER	56.00	0.00	892.00		
					CATEGORY	264.00	0.00	4,194.00		

RUN DATE 12/14/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 324
SALES JRNL # 0259 LOC 001						SIVE CARE MGMT
	SALES	S REGISTER			BILL WEEK END	ING 12/16/11
TARROT GELL DAME GLIGH NO.	CHCEOMED NAME	DEFEDENCE	HOUDG	max axm	AMOTTATE	myn Giinni iid
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
177100 12/09/11 000150	COMPREHENSIVE CARE MANAGEMENT	ROSARIO, CELEST	36.00		472.32	I
		CATEGORY	36.00	0.00	472.32	

RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER								PAGE 1 - 325 PAR PRIVATE BILL WEEK ENDING 12/16/11		
			SALE	SREGISTE	K		BILL MEEK ENI	JING	12/16/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
177101	12/09/11	002215	KEITH SALMON	LAWRANCE, LILLA	14.50		230.76	I		
177102	12/09/11	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I		
177103	12/09/11	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I		
177104	12/09/11	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	19.00		256.50	I		
177105	12/09/11	006173	SIANO, ANDREW	SIANO, ANDREW	20.00		270.00	I		
177106	12/09/11	006337	STEPHEN EDEL	EDEL, CANDACE	81.00		1,279.50	I		
177107	12/09/11	007521	DOROTHY GILBERT	GILBERT, DOROTH	30.00		465.00	I		
177108	12/09/11	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I		
177109	12/09/11	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I		
177110	12/09/11	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	4.00		65.00	I		
177111	12/09/11	008764	PATRICIA PHILION	GAFFNEY, FREDER	12.00		192.00	I		
177112	12/09/11	009036	MR. FERNANDO RIVERA	RIVERA, ALCIRA	9.00		139.50	I		
177113	12/09/11	009226	ALZHEIMER'S ASSOCIATION	CARDENAS, GUSTA	7.75		120.13	I		
177114	12/09/11	009263	ALZHEIMER'S ASSOCIATION	VALENTIN, EVA	6.00		97.50	I		
177115	12/09/11	009264	ALZHEIMER'S ASSOCIATION	VALENTIN, JOSE	6.00		97.50	I		
177116	12/09/11	997760	MARASA, ANTONIO	MARASA, ANTONIO	9.00		121.50	I		
				CATEGORY	267.25		4,109.39			
				LOCATION	22,260.25	0.00	340,913.32			
				COMPANY	22,260.25	0.00	340,913.32			

RUN DATE 12/14/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 326
SALES JRNL # 0259 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 12/16/11

INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS

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