RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE

12/14/12

12/14/12

000082

000082

220075

220076

YWIDE

DE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS
S A L E S R E G I S T E R BILL WEEK ENDING 12/21/12 SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY REFERENCE HOURS TAX AMT AMOUNT TYP CUST NO CUSTOMER NAME INVOICE# DATE SURPLUS 220028 12/14/12 000082 I 220029 12/14/12 000082 220030 12/14/12 000082 220031 12/14/12 000082 220032 12/14/12 000082 220033 12/14/12 000082 220034 12/14/12 000082 220035 12/14/12 000082 220036 11/23/12 000082 220037 12/14/12 000082 220038 12/14/12 000082 220039 12/07/12 000082 220040 12/14/12 000082 220041 12/14/12 000082 220042 12/14/12 000082 220043 12/14/12 000082 220044 12/14/12 000082 220045 12/07/12 000082 220046 12/14/12 000082 220047 12/14/12 000082 220048 12/14/12 000082 220049 12/14/12 000082 220050 12/14/12 000082 220051 12/14/12 000082 220052 12/14/12 000082 220053 12/14/12 000082 220054 12/14/12 000082 220055 12/07/12 000082 220056 12/14/12 000082 220057 12/14/12 000082 12/14/12 220058 000082 12/14/12 220059 000082 220060 12/14/12 000082 220061 12/14/12 000082 220062 12/14/12 000082 220063 11/02/12 000082 12/14/12 220064 000082 12/14/12 220065 000082 12/14/12 220066 000082 12/14/12 220067 000082 12/07/12 220068 000082 220069 12/07/12 000082 220070 12/14/12 000082 220071 12/14/12 000082 220072 12/14/12 000082 220073 12/14/12 000082 12/14/12 220074 000082

PAGE

1 -

			YSIDE CITYWIDE				-	-	2
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			SHP SENIOR H		
			S A	ALES REGISTE	R		BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220077	12/14/12	000082	SENIOR HEALTH PARTNERS	SOTO, AGRIPINA	20.00		285.00	I	
220078	12/14/12	000082	SENIOR HEALTH PARTNERS	TORRES, ANTONIA	7.00		1,400.00	I	
220079	12/14/12	000082	SENIOR HEALTH PARTNERS	TORRES, JOSE	20.00		284.80	I	
220080	12/14/12	000082	SENIOR HEALTH PARTNERS	TORRES, MONSERR	8.00		113.92	I	
220081	12/14/12	000082	SENIOR HEALTH PARTNERS	TORRESCAMPOS, J	40.00		570.00	I	
220082	12/14/12	000082	SENIOR HEALTH PARTNERS	VASQUEZ, CORNEL	8.00		114.00	I	
220083	12/14/12	000082	SENIOR HEALTH PARTNERS	WOO, LUZ	12.00		170.88	I	
220084	11/23/12	000082	SENIOR HEALTH PARTNERS	WOO, LUZ	4.00		56.96	I	
220085	12/14/12	000082	SENIOR HEALTH PARTNERS	WOO, LUZ	4.00		56.96	I	
220086	12/14/12	000082	SENIOR HEALTH PARTNERS	ZAPATA, SIMON	8.00		113.92	I	
				CUSTOMER	1,534.50	0.00	29,846.69		
				CATEGORY	1,534.50	0.00	29,846.69		

RUN DATE 12 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	3
				SALES REGISTER	2		BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220087 12	2/14/12	000008	VISITING NURSE SERVICE	ABBOTT, FAY	8.25		120.30 I	
				CATEGORY	8.25	0.00	120.30	

	12/19/12 NL # 0312	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	-
511225 016	112    0312	200 001		A L E S R E G I S T E R			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	TYP SURPLUS
220088	12/14/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	48.00		699.84	I
220089	12/14/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I
220090	12/14/12	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	24.25		353.58	I
220091	12/14/12	800000	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I
220092	12/14/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I
220093	11/30/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	8.75		127.58	I
220094	12/14/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	68.25		995.09	I
220095	12/14/12	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	7.00		1,224.72	I
				CUSTOMER	228.25	0.00	4,450.57	
				CATEGORY	228.25	0.00	4,450.57	

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 5
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	\$	SALES REGISTER		BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220096 12/14/12	000008 VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00	656.10 I
		CATEGORY	45.00 0.00	656.10

			YSIDE CITYWIDE				PAGE 1		6
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			5	SALES REGISTER			BILL WEEK END	ING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ΓΥΡ	SURPLUS
220097	12/07/12	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	7.00		102.06	I	
220098	12/14/12	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	49.00		714.42	I	
220099	12/14/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60	I	
				CUSTOMER	76.00	0.00	1,108.08		
				CATEGORY	76.00	0.00	1,108.08		

RUN DATE 12/19/12 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 – 7
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S	SALES REGISTER		BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220100 12/14/12	000008 VISITING NURSE SERVICE	ALEKSANDORVA, S	24.75	360.86 I
		CATEGORY	24.75 0.00	360.86

RUN DATE 12/19/12 -						PAGE 1 -	8
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220101 12/07/12 220102 12/14/12		TISITING NURSE SERVICE ISITING NURSE SERVICE	ALFEREZ, GLORIA ALFEREZ, GLORIA	6.00 30.00		87.48 I 437.40 I	
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	9
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			·	SALES REGISTER			BILL WEEK ENDING	3 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
220103	12/14/12	000008	VISITING NURSE SERVICE	ALMANZAR, REMIG	1.00		14.58 I	
220104	12/14/12	800000	VISITING NURSE SERVICE	ALVAREZ, DALILA	20.00		291.60 I	
				CUSTOMER	21.00	0.00	306.18	
				CATEGORY	21.00	0.00	306.18	

			YSIDE CITYWIDE				PAGE 1 - 10	
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	21 /10
			2	SALES REGISTER			BILL WEEK ENDING 12/2	21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
220105	12/14/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 -	11
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220106	12/14/12	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	41.00		597.79	I
				CATEGORY	41.00	0.00	597.79	

RUN DATE 12/19/12 - SALES JRNL # 0312	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	12 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220107 12/14/12 220108 12/14/12 220109 12/14/12 220110 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ANDINO, ESTEBAN ANDRADE, LOLA ANDREWS, JOHNNI ANGRISANO, RUTH	18.75 83.75 62.75 28.00		273.39 I 1,221.08 I 914.90 I 408.24 I	
			CUSTOMER	193.25	0.00	2,817.61	
			CATEGORY	193.25	0.00	2,817.61	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 13 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220111 12/14/12 220112 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	20.00 61.00		291.60 I 889.38 I
			CUSTOMER	81.00	0.00	1,180.98
			CATEGORY	81.00	0.00	1,180.98

	2/19/12 - SU # 0312 LO		E CITYWIDE NNYSIDE CITY					VCP CHOICE L	HCSA	14
				SALE	S REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE CU	ST NO CUS	TOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	, ,		ITING NURSE		AOUN, ODETTE	24.00		349.92	I	
	, ,		ITING NURSE		ARGENTINA, CESS ARIAS, MAGDALEN	4.00 41.25		58.32 601.43	I I	
					CUSTOMER	69.25	0.00	1,009.67		
					COSTOMER	09.25	0.00	1,009.07		
					CATEGORY	69.25	0.00	1,009.67		

			YSIDE CITYWIDE				PAGE 1 -	- 15	
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	ING 12/21	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPI	T TTC
INVOICE#	DAIL	COSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT	.IP SURP	шоъ
220116	12/14/12	800000	VISITING NURSE SERVICE	ASADOURIAN, COR	2.00		29.16	I	
				CATEGORY	2.00	0.00	29.16		

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220117 12/14/12 220118 12/07/12 220119 12/14/12 220120 12/14/12 220121 12/14/12 220122 12/14/12 220123 12/14/12	000008 000008 000008 000008 000008 000008	VISITING NURSE SERVICE	ASHLEY, CLYDE AZAD, ABUL AZAD, ABUL BALLAS, VIOLA BAQUERIZO, ANNA BARDEANU, VICTO BATTLE, JEANETT	56.00 4.00 17.75 25.00 56.00 70.00 49.00		816.48 58.32 258.80 364.50 816.48 1,020.60 714.42	
			CUSTOMER	277.75	0.00	4,049.60	
			CATEGORY	277.75	0.00	4,049.60	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK ENI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220124 12/14/12 220125 12/14/12 220126 12/14/12 220127 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BECERRA, FELIPE BELLOROFONTE, M	42.00 1.00 141.00 6.00		612.36 14.58 2,055.78 87.48	I I I
			CUSTOMER	190.00	0.00	2,770.20	
			CATEGORY	190.00	0.00	2,770.20	

ı	RUN DATE 1	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	18
ı	SALES JRNI	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
ı				:	SALES REGISTER			BILL WEEK ENDING	3 12/21/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
	220128	12/14/12	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	7.00		102.06 I	
								100.06	
ı					CATEGORY	7.00	0.00	102.06	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A A
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220129 12/14/12	000008 VISITING NURSE SERVICE	E BHATT, JYOTI	41.75		608.72 I	
		CATEGORY	 41.75	0.00	608.72	

RUN DATE 12/19/12 -						PAGE 1 - 20	
SALES JRNL # 0312	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12	
			SALES KEGISIEK			DIDD WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220130 12/14/12	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/19/12 -						PAGE 1	- 21
SALES JRNL # 0312	LOC 001		REG NY NY			ADU ADULT	
		\$	SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220131 12/14/12	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	48.00		699.84	I
220132 12/14/12	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	16.00		233.28	I
						022 10	
			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		PAGE 1 - 22 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220133 12/14/12	000008 VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

RUN DATE 12/19/12 -		YSIDE CITYWIDE				PAGE 1 -	23
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			SALES REGISTER			BILL WEEK ENDING	G 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220134 12/14/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	20.00		291.60 I	
220135 11/30/12	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	18.00		262.44 I	
220136 12/14/12	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	35.75		521.24 I	
220137 12/14/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	16.00		233.28 I	
			CUSTOMER	89.75	0.00	1,308.56	
			CATEGORY	89.75	0.00	1,308.56	

RUN DATE 12/19/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (1	LT
			SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220138 12/14/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	25
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
	S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220139 12/14/12	000008 VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
		CATEGORY	12.00	0.00		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		PAGE 1 - LTC NURSING HOM	26
SALES URILL # USIZ	LOC UUI SUNNISIDE CIIIWIDE	SALES REGISTER		BILL WEEK ENDIN	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TY	P SURPLUS
220140 12/14/12	000008 VISITING NURSE SERV	CCE BOYADJIAN, ZARO	35.00	510.30 I	
		CATEGORY	35.00	0.00 510.30	

	12/19/12 NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		27
SALES UR	NL # U312	LOC 001		ALES REGISTER			BILL WEEK ENI		12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220141	12/14/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	70.00		1,020.60	I	
220142	11/02/12	800000	VISITING NURSE SERVICE	BRACERO, HELEN	11.75		171.32	I	
220143	12/14/12	800000	VISITING NURSE SERVICE	BRACERO, HELEN	83.75		1,221.08	I	
220144	12/14/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	6.00		87.48	I	
220145	12/14/12	800000	VISITING NURSE SERVICE	BURITICA, INES	25.00		364.50	I	
220146	12/14/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	56.00		816.48	I	
				CUSTOMER	252.50	0.00	3,681.46		
				CATEGORY	252.50	0.00	3,681.46		

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT
		\$	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220147 11/30/12	000008	VISITING NURSE SERVICE	BUSCARELLO, JOH	8.00		116.64 I
220148 12/14/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	50.00		729.00 I
			CUSTOMER	58.00	0.00	845.64
			CATEGORY	58.00	0.00	 845.64

RUN DATE 12/19/12 - SALES JRNL # 0312			REG NY NY			PAGE 1 - VCP CHOICE LHCS	29 SA
		2	SALES REGISTER			BILL WEEK ENDIN	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220149 11/23/12	800000	VISITING NURSE SERVICE	- , -	2.00		29.16	[
220150 12/14/12 220151 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CABA, PURA CAIPO, MATILDE	8.00 34.00		116.64 ] 495.74 ]	<u>.</u> [
			CUSTOMER	44.00	0.00	641.54	
			CATEGORY	44.00	0.00	641.54	

RUN DATE			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT		30
INVOICE#	DATE	CUST NO		SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK END	TYP	SURPLUS
	12/14/12		VISITING NURSE SERVICE		70.00	11111		I	20112 202
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 12/19/12			DDG 1991			11100	- 31
SALES JRNL # 0312	TOG 001		REGNY NY SALES REGISTER			VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
INVOICE# DATE	CUSI NO	COSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT	TIP SURPLUS
220153 12/07/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	7.75		113.00	I
220154 12/14/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.25		630.60	I
220155 12/14/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	55.75		812.84	I
			CUSTOMER	106.75	0.00	1,556.44	
			CATEGORY	106.75	0.00	1,556.44	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	L # 0312	LOC 001		REG NY NY			LTC NURSING HOME	· ·
			\$	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220156	12/14/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

ı	RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33	
ı	SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	3A	
ı				S	SALES REGISTER			BILL WEEK ENDIN	NG 12/21/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS	
ı										
ı	220157	12/14/12	000008	VISITING NURSE SERVICE	CAPORASO, VINCE	83.50		1,217.43	Ĺ	
ı										
ı										
ı					CATEGORY	83.50	0.00	1,217.43		

RUN DATE 12/19/12 -							34
SALES JRNL # 0312	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING HOM BILL WEEK ENDIN	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220158 12/14/12	000008	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 12/19/12 - SALES JRNL # 0312	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 TYPE	SURPLUS
220159 12/14/12 220160 12/14/12 220161 12/07/12 220162 12/14/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CARDOSO, ORLAND CARELA-REYES, M CARLOS, JULIA CARLOS, JULIA	83.50 25.00 8.00 20.00		1,217.44 I 364.50 I 116.64 I 291.60 I	
			CUSTOMER	136.50	0.00	1,990.18	
			CATEGORY	136.50	0.00	1,990.18	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	ME W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDIN	IG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220163	12/14/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	46.50		677.97 I	
				CATEGORY	46.50	0.00	 677.97	

RUN DATE 12/19/12 -			DDG NV NV			PAGE 1 - 37	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 12/21/	12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
220164 12/14/12 220165 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 17.75		116.64 I 258.80 I	
			CUSTOMER	25.75	0.00	375.44	
			CATEGORY	25.75	0.00	375.44	

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 38 VCP CHOICE LHCSA
SALES UNIL # USIZ	LOC UUI		SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220166 12/14/12	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I
220167 12/14/12	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	21.00		306.18 I
220168 12/07/12	000008	VISITING NURSE SERVICE	CESPEDES, CRIST	10.00		145.80 I
220169 12/14/12	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	20.00		291.60 I
			CUSTOMER	71.00	0.00	1,035.18
			CATEGORY	71.00	0.00	1,035.18

RUN DATE 12/19/12						PAGE 1 -	39
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	
		i	SALES REGISTER			BILL WEEK ENDIN	G 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220170 12/14/12	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

RUN DATE 12/19/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	40
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
		S	SALES REGISTER			BILL WEEK ENDING	G 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
220171 12/14/12	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	
			CALEGORY	30.00	0.00	437.40	

RUN DATE 12/19/12 - SALES JRNL # 0312	SUP SUNN		REG NY NY			PAGE 1 - LAD NURSING HO	41 ME W/O WALLS LT
		\$	SALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220172 10/12/12	000008	VISITING NURSE SERVICE	CHARLES, JOSE	20.00		291.60	I
220173 12/07/12	000008	VISITING NURSE SERVICE		20.00		291.60	I
220174 12/14/12	000008	VISITING NURSE SERVICE	CHARLES, JOSE	20.00		291.60	I
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

RUI	N DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	42
SA	LES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE		
				\$	SALES REGISTER			BILL WEEK E	NDING	12/21/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
22	0175	12/14/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	70.00		1,020.60	I	
					CATEGORY	70.00	0.00	1,020.60	-	

	- SUP SUNNYSIDE CITYWIDE					43
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWID	E REGNY NY SALES REGISTEF	3		LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE# DATE	CUSI NO CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI IIP	SURPLUS
220176 12/14/12	000008 VISITING NURSE SERV	/ICE CHIANETTA, JOSE	35.00		510.30 I	
		CATEGORY	35.00	0.00	510.30	

RUN DATE 12/19/12 -						PAGE 1 -	44
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE	D		VCP CHOICE LHCS BILL WEEK ENDIN	
			SALES REGISTE	K		PILL MEEK ENDIN	IG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220177 12/14/12	000008	VISITING NURSE SERVICE	CHINGA, ALBA	29.75		433.76 I	
220178 12/14/12	000008	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20 I	
220179 12/07/12	000008	VISITING NURSE SERVICE	CHUCK, ENA	8.75		127.58 I	
220180 12/14/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	30.50		444.70 I	
			CUSTOMER	109.00	0.00	1,589.24	
			- CATEGORY	109.00	0.00	1,589.24	

	12/19/12 - JL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 45
SALES OR	M # 0312	100 001		SALES REGISTER				DING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220181	12/14/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	,
		S	ALES REGISTER			BILL WEEK ENDIN	IG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	YT TRUOMA	P SURPLUS
220182 11/30/12	800000	VISITING NURSE SERVICE	COLLER, FELISA	4.00		58.32	
220183 12/14/12	800000	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	• •
220184 12/14/12	000008	VISITING NURSE SERVICE	COLLER, JOSE	20.00		291.60	• •
220185 12/14/12	800000	VISITING NURSE SERVICE	COLON, ANTONIA	36.00		524.88	•
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

RUN DAT	E 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 47
SALES J	RNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE:	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220186	12/14/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I
				 CATEGORY	168.00	0.00	2,449.44

RUN DATE 1	2/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	48
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDIN	G 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220187 1	2/14/12	000008	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	49
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE	LHCSA	
			Ş	SALES REGISTER			BILL WEEK E	NDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220188	12/14/12	000008	VISITING NURSE SERVICE	COSTA, ANTOINET	20.50		298.89	I	
								-	
				CATEGORY	20.50	0.00	298.89		

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 50
SALES JRNL # 0312		REG NY NY			LTC NURSING HOMEW/O WALLS (LT
	Ş	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220189 12/14/12	000008 VISITING NURSE SERVICE	COSTA, ARSENE	54.00		787.32 I
		CATEGORY	54.00	0.00	787.32

	12/19/12 - NL # 0312			REG NY NY S A L E S R E G I S T E R			PAGE 1 - HOA HOSPICE ADUI BILL WEEK ENDING	LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
220190	12/14/12	800000	VISITING NURSE SERVICE	COX, PETRA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	12/19/12 NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		52
SALES ON	ND # 0512	100 001		SALES REGISTER			BILL WEEK EN		12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220191 220192	12/07/12 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	8.00 71.00		116.64 1,035.18	I	
				CUSTOMER	79.00	0.00	1,151.82		
				CATEGORY	79.00	0.00	1,151.82		

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 5	3
SALES URNL # U312	LOC UUI		SALES REGISTER				12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220193 11/30/12 220194 12/07/12 220195 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CRONIN, MARIE CRONIN, MARIE CRONIN, MARIE	3.00 6.00 9.00		43.74 I 87.48 I 131.22 I	
220193 12/14/12	000000	VISITING NORSE SERVICE	CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 54 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220196 12/14/12	000008 VISITING NURSE SERVICE	CRUZ, HECTOR	38.00	554.04 I
		CATEGORY	38.00 0.00	 554.04

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 55
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA
		S	SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220197 12/14/12	000008	VISITING NURSE SERVICE	CRUZ, JUANA	20.00		291.60	I
220198 12/14/12	800000	VISITING NURSE SERVICE	CRUZ, LIDIA	37.00		539.46	I
			CUSTOMER	57.00	0.00	831.06	
			CATEGORY	57.00	0.00	831.06	

RUN DATE 12/19/12 - SU					PAGE	1 –	56
SALES JRNL # 0312 LC		G NY NY			ADU ADULT		10/01/10
	SAL	ES REGISTER			BILL WEEK E	NDING	12/21/12
INVOICE# DATE CU	UST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220199 12/14/12 00	00008 VISITING NURSE SERVICE	DABROWSKI, ALEK	9.00		131.22	I	
		CATEGORY	9.00	0.00	131.22		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
220200 12/14/12 220201 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	25.00 56.00		364.50 I 816.48 I	
			CUSTOMER	81.00	0.00	1,180.98	
			CATEGORY	81.00	0.00	1,180.98	

RUN DATE 12/19/12 - SALES JRNL # 0312			REG NY NY S 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
220202 12/14/12	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	41.50		605.08 I	
			CATEGORY	41.50	0.00	605.08	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRNI	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE	CARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	G 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220203	12/14/12	800000	VISITING NURSE SERVICE	DE LA HOZ, RUTH	7.50		109.36 I	
				CATEGORY	7.50	0.00	109.36	

RUN DATE 12/19/							60
SALES JRNL # 03	12 LOC 001		REG NY NY			VCP CHOICE LHCSA	10/01/10
		2	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220204 12/14/	12 000008	VISITING NURSE SERVICE	DEBAZALAR, ANTO	18.50		269.73 I	
220205 12/14/	12 000008	VISITING NURSE SERVICE	DEJESUS, FELIX	23.25		339.00 I	
			CUSTOMER	41.75	0.00	608.73	
			CATEGORY	41.75	0.00	608.73	

RUN DATE 12/19/12 -	SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	61
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
		S	ALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220206 12/14/12	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	38.00		554.04 I	
			CATEGORY	38.00	0.00	554.04	

RUN DATE	12/19/12		YSIDE CITYWIDE				PAGE 1	-	62
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
				SALES REGISTER			BILL WEEK ENI	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220207	12/14/12	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	30.00		437.40	I	
220208	12/07/12	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	8.00		116.64	I	
220209	12/14/12	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	28.00		408.24	I	
220210	12/07/12	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	4.00		58.32	I	
220211	12/14/12	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	28.00		408.24	I	
				CUSTOMER	98.00	0.00	1,428.84		
				CATEGORY	98.00	0.00	1,428.84		

			SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
220212	12/14/12	000008	VISITING NURSE SERVICE	DERAMIREZ, MERC	1.00		14.58	I
				CATEGORY	1.00	0.00	 14.58	
	SALES JRI	SALES JRNL # 0312 INVOICE# DATE	SALES JRNL # 0312 LOC 001 INVOICE# DATE CUST NO	S INVOICE# DATE CUST NO CUSTOMER NAME	SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE	SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS  220212 12/14/12 000008 VISITING NURSE SERVICE DERAMIREZ, MERC 1.00	SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT  220212 12/14/12 000008 VISITING NURSE SERVICE DERAMIREZ, MERC 1.00	SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER BILL WEEK ENDS INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TO THE SERVICE DERAMIREZ, MERC 1.00 14.58

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	64
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTER			BILL WEEK ENI	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220213	12/14/12	000008	VISITING NURSE SERVICE	DEY, KRISHNA	2.00		29.16	I	
220214	12/14/12	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	56.25		820.13	I	
				CUSTOMER	58.25	0.00	849.29		
				COSTOMER	58.45	0.00	849.29		
				CATEGORY	58.25	0.00	849.29		

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	65
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			SALES REGIST	ER		BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220215 12/14/12	800000	VISITING NURSE SERVICE	DIAZ, HILDA	42.25		616.01 I	
			CATEGORY	42.25	0.00	616.01	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	66
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA	
		:	SALES R	EGIST	E R		BILL WEEK EN	DING	12/21/12
INVOICE# DATE	GIIGE NO	CHOMOMED NAME	DEFE	RENCE	HOUDG	max amm	7 MOLINIE	шил	GIIDDI IIG
INVOICE# DATE	CUST NO	CUSTOMER NAME	KEFE	KENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220216 12/14/12	000008	VISITING NURSE SERVICE	DIAZ,	MARIA	35.00		510.30	I	
220217 12/14/12	800000	VISITING NURSE SERVICE	DIAZ,	OLGA	52.00		758.16	I	
220218 12/14/12	800000	VISITING NURSE SERVICE	DIAZ,	ROSA	42.00		612.36	I	
				CUSTOMER	129.00	0.00	1,880.82		
				CATEGORY	129.00	0.00	1,880.82		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 67	
	.2    0312	200 001		SALES REGISTER			BILL WEEK END	NG 12/2	1/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	YP SUR	PLUS
	12/14/12 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	30.00 64.00		437.40 933.12	I	
220220	12/14/12	000008	VISITING NURSE SERVICE	DILLOVIO, MAITI					
				CUSTOMER	94.00	0.00	1,370.52		
				CATEGORY	94.00	0.00	1,370.52		

RUN DATE 12/19/12	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	- 68
SALES JRNL # 0312	LOC 001		REG NY NY			VCP CHOICE LHO	
		:	SALES REGISTER			BILL WEEK ENDI	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220221 12/14/12	000008	VISITING NURSE SERVICE	DOMINGUEZ, MARI	33.00		481.15	I
220222 12/14/12	000008	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60	I
			CUSTOMER	53.00	0.00	772.75	
			COSTOMER	33.00	0.00	772.75	
			CATEGORY	53.00	0.00	772.75	

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	ALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220223 12/14/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 70
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220224	12/14/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I
				CATEGORY	15.00	0.00	218.70

RUN DATE 12/19/	12 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1	-	71
SALES JRNL # 03	12 LOC 001		REG NY NY			VCP CHOICE LHO		
		:	SALES REGISTER			BILL WEEK END	ING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	ГҮР	SURPLUS
220225 12/14/	12 000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	42.25		616.01	I	
			CATEGORY	42.25	0.00	616.01		

			SIDE CITYWIDE				PAGE 1	-	72
SALES JRNI	L # 0312 LO	OC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK END	ING	12/21/12
INVOICE#	DATE CU	JST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220226 1	12/14/12 00	80000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 7 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220227 12/14/12	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE 12/19/12 - SALES JRNL # 0312	- 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 - 74 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220228 12/14/12	000008 VISITING NURSE SERVIC	E EPSTEIN, GEORGE	20.00	291.60 I
		CATEGORY	20.00 0.00	 291.60

RUN DATE 12/19/12 SALES JRNL # 0312			REG NY NY			PAGE 1 - 75 VCP CHOICE LHCSA	
SALES URNL # USI.	2 LOC 001		SALES REGISTER			BILL WEEK ENDING 12,	/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
220229 12/07/12 220230 12/14/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	·	12.00 30.00		174.96 I 437.40 I	
			CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	12/21/12
		GTTGT 170	GUGEOMER MANE		******		31401DIT TUD	G177 D1 11G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220231	12/14/12	000008	VISITING NURSE SERVICE	E ESPIN, CESAR	56.00		816.48 I	
220231	12/14/12	000000	VISITING NURSE SERVICE	ESPIN, CESAR	30.00		010.40 1	
				CATEGORY	56.00	0.00	816.48	
				***************************************				

RUN DATE 12/1	9/12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	77
SALES JRNL #	0312 LOC 001		REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220232 11/0	2/12 000008	VISITING NURSE SERVICE	ESPINAL, JOSE	5.00		72.90 I	
			CATEGORY	5.00	0.00	72.90	

RUN DATE 12/19/12 -			DEC NV NV			PAGE 1 - 78	
SALES JRNL # 0312	LOC UUI	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 12,	/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	URPLUS
220233 12/14/12 220234 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	25.00 47.75		364.50 I 696.20 I	
			CUSTOMER	72.75	0.00	1,060.70	
			CATEGORY	72.75	0.00	1,060.70	

RUN DATE 12	1/19/12 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	79
SALES JRNL	# 0312 LOC 001		REG NY NY			VCP CHOICE LHCS	
		S	ALES REGISTER			BILL WEEK ENDING	3 12/21/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220235 12	2/14/12 000008	VISITING NURSE SERVICE	EVERETT, SHIRLE	21.00		306.18 I	
			CATEGORY	21.00	0.00	306.18	

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE				PAGE 1 -	80
SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE# DATE COST NO COSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT TIP	SURPLUS
220236 12/14/12 000008 VISITING NURSE SERVICE	E FADEN, ROBIN	60.00		874.80 I	
	, -				
	CATEGORY	60.00	0.00	874.80	

ı	RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	81	
ı	SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA		
ı				5	SALES REGISTER			BILL WEEK END	ING	12/21/12	
ı											
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ΓΥΡ	SURPLUS	
ı											
ı	220237	12/14/12	000008	VISITING NURSE SERVICE	FAMBIATOU, PARA	4.00		58.32	I		
ı											
ı									-		
ı					CATEGORY	4.00	0.00	58.32			

RUN DATE 12/19/12 SALES JRNL # 0312	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 82 HOA HOSPICE ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220238 12/14/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	21.00		306.18 I
			CATEGORY	21.00	0.00	306.18

RUN DATE 12/19/12 SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	83
BILLED GIANE III GOIL	200 001		SALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220239 12/14/12	000008	VISITING NURSE SERVICE		9.00		131.22	I
220240 12/14/12 220241 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	25.00 56.00		364.50 816.48	I T
220241 12/14/12	000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI			010.40	
			CUSTOMER	90.00	0.00	1,312.20	
			CATEGORY	90.00	0.00	1,312.20	

RUN DATE 12/19/12						PAGE 1 - 84
SALES JRNL # 0312	LOC 001		REGNY NY SALES REGISTER			CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/21/12
		•	SALES REGISIER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220242 12/14/12	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I
			CATEGORY	15.00	0.00	218.70

			YSIDE CITYWIDE				PAGE 1	0.5
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
				SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220243	12/14/12	000008	VISITING NURSE SERVICE	FERNANDEZ, ROSA	9.00		131.22	I
220244	12/14/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	26.75		390.02	I
				CUSTOMER	35.75	0.00	521.24	
				COSTONER	35.75	0.00	321.24	
				CATEGORY	35.75	0.00	521.24	

RUN DATE 12/19/12 -						PAGE 1 - 86
SALES JRNL # 0312	LOC 001		REG NY NY			CCL CONGREGATE CARE PROGRAM
		2	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
000045 10/14/10				10.00		0.60 44 =
220245 12/14/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	18.00		262.44 I
			CATEGORY	18.00	0.00	262.44

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 87	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	Γ
		S	SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220246 12/14/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	52.25		761.81 I	
			CATEGORY	52.25	0.00	761.81	

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITY	WIDE				PAGE 1	- 88	3
SALES JRNL # 0312	LOC 001 SUNNYSID	E CITYWIDE REG N	Y NY			CCL CONGREGAT	E CARI	E PROGRAM
		SALES	REGISTER			BILL WEEK END	OING I	12/21/12
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220247 12/14/12	000008 VISITING	NURSE SERVICE	FLEITMAN, KLARA	15.00		218.70	I	
			CATEGORY	 15.00	0.00	218.70		

	12/19/12 NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		89
SALES OF	INL # U312	LOC UUI		SALES REGISTER			BILL WEEK EN		12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220248 220249	12/14/12 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	35.00 35.00		510.30 510.30	I I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	90
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDIN	G 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	70/74/70						554.04.	
220250	12/14/12	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	38.00		554.04 I	
					20.00			
				CATEGORY	38.00	0.00	554.04	

			YSIDE CITYWIDE				PAGE 1 -	91
SALES JRNL	# 0312	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI	IP SURPLUS
220251 12	2/14/12	800000	VISITING NURSE SERVICE	FREUD, CATHERIN	1.00		14.58	I
				CATEGORY	1.00	0.00	14.58	

RUN DATE 12/3	19/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 92	
SALES JRNL #	0312 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	DMEW/O WALLS (LT	
		S	SALES REGISTER			BILL WEEK ENDI	ING 12/21/12	
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	TYP SURPLUS	
220252 12/3	14/12 000008	VISITING NURSE SERVICE	FUNES, GEORGINA	35.00		510.30	I	
			CATEGORY	35.00	0.00	510.30		

RUN DATE 1	2/19/12 - S	SUP SUNNY	SIDE CITYWIDE				PAGE 1	_	93
SALES JRNL	# 0312 L	OC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			S	SALES REGISTER			BILL WEEK END	ING	12/21/12
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	ГҮР	SURPLUS
220253 1	2/14/12 0	80000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	94
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	,
		S	ALES REGISTER			BILL WEEK ENDIN	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220254 12/14/12	000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	40.00		583.20	<u> </u>
220255 11/30/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	8.00		116.64	<u> </u>
220256 12/14/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	20.00		291.60	I .
220257 12/14/12	800000	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		437.40	
			CUSTOMER	98.00	0.00	1,428.84	
			CATEGORY	98.00	0.00	1,428.84	

			YSIDE CITYWIDE					95
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220258	12/14/12	800000	VISITING NURSE SERVICE	GARCIA, ROSA	1.50		21.87 I	
				CATEGORY	1.50	0.00	21.87	

RUN DATE 12/19/12 -						PAGE 1 -	96
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/21/12
			SALES REGISIER			BILL MEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220259 12/14/12	000008	VISITING NURSE SERVICE	GARCIA, URANIA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

	19/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	97
SALES JRNL #	0312 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
		5	SALES REGISTER			BILL WEEK ENDIN	3 12/21/12
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220260 12/	14/12 000008	VISITING NURSE SERVICE	GARCIA-VARGAS,	3.00		43.74 I	
			CATEGORY	3.00	0.00	43.74	

RUN DATE 12/19/12 - SUF	P SUNNYSIDE CITYWIDE		PA	GE 1 - 98
SALES JRNL # 0312 LOC	C 001 SUNNYSIDE CITYWIDE REG N	IY NY	LT	C NURSING HOMEW/O WALLS (LT
	SALES	REGISTER	BI	LL WEEK ENDING 12/21/12
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE HOURS	TAX AMT	AMOUNT TYP SURPLUS
220261 12/14/12 000	0008 VISITING NURSE SERVICE	GEBHARDT, DOROT 36.00		524.88 I
		CATEGORY 36.00	0.00	524.88

			YSIDE CITYWIDE				PAGE 1 -	99
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220262	12/14/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.00		714.42	I
				CATEGORY	49.00	0.00	714.42	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	100
SALES JRNI	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220263	12/14/12	000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	48.25		703.49 I	
					40.05			
				CATEGORY	48.25	0.00	703.49	

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 101 CCL CONGREGATE CARE PROGRA	М
SALES URNL # U312	LOC UUI		SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220264 12/07/12 220265 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 48.00		116.64 I 699.84 I	
			CUSTOMER	56.00	0.00	816.48	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 12/19/12						PAGE 1 -	102
SALES JRNL # 0312	LOC 001		REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220266 12/14/12	000008	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		364.50 I	
			CATEGORY	25.00	0.00		

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 103
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
		;	SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220267 11/30/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	7.00		102.06	I
220268 12/14/12	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I
220269 12/14/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	33.00		481.14	I
			CUSTOMER	75.00	0.00	1,093.50	
			CATEGORY	75.00	0.00	1,093.50	

-	12/19/12 - NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	- 104 CSA
Bridde ord	0312	100 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
220270	12/14/12	800000	VISITING NURSE SERVICE	GONGORA, MARUJA	4.00		58.32	I
220271	11/23/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	4.00		58.32	I
220272	12/07/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	4.00		58.32	I
220273	12/14/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	16.75		244.22	I
220274	12/14/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	35.00		510.30	I
				CUSTOMER	63.75	0.00	929.48	
				CATEGORY	63.75	0.00	929.48	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 105 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220275 12/14/12 220276 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.50 15.00		298.90 I 218.70 I
			CUSTOMER	35.50	0.00	517.60
			CATEGORY	35.50	0.00	517.60

RUN DATE 12/19/12 -						PAGE 1 -	106
SALES JRNL # 0312	LOC 001		REG NY NY			VCP CHOICE LHCSA	
		\$	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220277 12/07/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	8.00		116.64 I	
220278 12/14/12	800000	VISITING NURSE SERVICE	GOYES, ELBA	24.00		349.92 I	
220279 12/14/12	000008	VISITING NURSE SERVICE	GRAVER, EDNA	32.00		466.56 I	
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

	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 - 107 ADU ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220280 12/14/12 0	000008 VISITING NURSE SERVICE	GREENBAUM, MASA	42.25	616.01 I
		CATEGORY	42.25 0.00	616.01

			SIDE CITYWIDE				PAGE 1	
SALES JRNL	# 0312 LO	OC 001	SUNNYSIDE CITYWIDE	REG NY NY				AIDS ADULT POPUL
			5	ALES REGISTER			BILL MEEK ENI	ING 12/21/12
INVOICE#	DATE CU	JST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220281 12	2/14/12 00	80000	VISITING NURSE SERVICE	GRESSINE, ARNOL	48.75		710.78	I
				CATEGORY	48.75	0.00	710.78	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	09
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220282	12/14/12	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	84.00		1,224.72	I	
220283	12/14/12	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	83.75		1,221.08	I	
				CUSTOMER	167.75	0.00	2,445.80		
				CATEGORY	 167.75	0.00	2,445.80		

RUN DATE 12/19/12 SALES JRNL # 0312	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 LTC NURSING I BILL WEEK ENI		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220284 10/12/12 220285 10/26/12 220286 11/02/12 220287 11/23/12 220288 11/30/12 220289 12/07/12 220290 12/14/12	000008 000008 000008 000008 000008 000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	8.00 8.00 7.50 16.00 16.00 40.00 56.00		116.64 116.64 109.35 233.28 233.28 583.20 816.48	I I I I I	
			CUSTOMER	151.50	0.00	2,208.87		
			 CATEGORY	151.50	0.00	2,208.87		

RUN DATE 12/19/12 SALES JRNL # 0312	- 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 7	TYP SURPLUS
220291 12/14/12 220292 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	HARRISON, GLORI HENAO, VICTORIA	57.50 24.00		838.35 349.92	I I
			CUSTOMER	81.50	0.00	1,188.27	
			CATEGORY	81.50	0.00	1,188.27	

RUN DATE 12/19/12 - SUP SUNNYS	SIDE CITYWIDE SUNNYSIDE CITYWIDE REG N	IY NY		PAGE	1 - HOICE LHCS	
SALES URNL # U312 LOC UU1		REGISTER				G 12/21/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS TA	X AMT	AMOUNT TY	SURPLUS
220293 12/14/12 000008	VISITING NURSE SERVICE	HENDY, BERNICE	28.00		408.24 I	
		CATEGORY	28.00	0.00	408.24	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220294 12/14/12	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	55.50		809.19 I	
			CATEGORY	55.50	0.00	809.19	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 114 VCP CHOICE LHCSA BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220295 12/14/12 220296 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	23.75 30.00		346.28 I 437.40 I	
			CUSTOMER	53.75	0.00	783.68	
			CATEGORY	53.75	0.00	 783.68	

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	- 115 HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK EN	DING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220297 12/14/12 220298 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HERRERA, ANGELA HERRERA, HORACI	30.00		437.40 102.06	I I
220299 12/14/12	000008	VISITING NURSE SERVICE	HUNGRIA, SABINA	41.00		597.78	Ī
			CUSTOMER	78.00	0.00	1,137.24	
			CATEGORY	78.00	0.00	1,137.24	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 116 VCP CHOICE LHCSA BILL WEEK ENDING 1	2/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220300 12/14/12 220301 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		16.00 16.00		233.28 I 233.28 I	
			CUSTOMER	32.00	0.00	466.56	
			CATEGORY	32.00	0.00	466.56	

RUN DATE	12/19/12 - S	UP SUNNY	SIDE CITYWIDE				PAGE 1 - 11	L7
SALES JRN	L # 0312 L	OC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220302	12/14/12 0	80000	VISITING NURSE SERVICE	INNISS, CARMEN	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 12/	/19/12 - SUP SUI	NNYSIDE CITYWIDE				PAGE 1	- 118
SALES JRNL ‡	# 0312 LOC 003	1 SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI	AIDS ADULT POPUL
		:	SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220303 11/	/30/12 000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	7.00		102.06	I
220304 12/	/07/12 000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	21.00		306.18	I
220305 12/	/14/12 000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10	I
			CUSTOMER	73.00	0.00	1,064.34	
			CATEGORY	73.00	0.00	1,064.34	

	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 - 119 ADU ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220306 12/14/12	000008 VISITING NURSE SERVICE	INSERRA, CATHER	49.00	714.42 I
		CATEGORY	49.00 0.00	714.42

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 12 CCL CONGREGATE CAR BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220307 12/14/12 220308 12/07/12 220309 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JACSO, ERZSEBET	8.00 3.00 3.00		116.64 I 43.74 I 43.74 I	
			CUSTOMER	14.00	0.00	204.12	
			CATEGORY	14.00	0.00	204.12	

RUN DATE 12/19/12	- SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 12	1
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220310 12/14/12	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	45.25		659.75 I	
			CATEGORY	45.25	0.00	659.75	

			YSIDE CITYWIDE				PAGE 1	- 1	22
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220311	12/14/12	000008	VISITING NURSE SERVICE	JAMES, DAVINA	29.00		422.82	I	
220312	12/14/12	000008	VISITING NURSE SERVICE	JAMISON, BESSIE	12.00		174.96	I	
220313	12/07/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I	
220314	12/14/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I	
220315	12/14/12	800000	VISITING NURSE SERVICE	JEWAT, LUCILLE	66.00		962.28	I	
220316	12/14/12	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	20.00		291.60	I	
				CUSTOMER	151.00	0.00	2,201.58		
				CATEGORY	151.00	0.00	2,201.58		

				YSIDE CITYWIDE					123
1	SALES JRN	NL # 0312	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE AD BILL WEEK ENDI	-
								DIDD WEEK BROI	10 12/21/12
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
:	220317	12/14/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60	I
					CATEGORY	70.00	0.00	1,020.60	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220318 12/14/12	000008 VISITING NURSE SERVICE	JIMENEZ, ALTAGR	24.00		349.92 I	
		CATEGORY	24.00	0.00	349.92	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 125 ADU ADULT BILL WEEK ENDING 12/21/1	2
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
220319 12/14/12	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	_

ı	RUN DATE 12	/19/12 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 -	126
ı	SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	12/21/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	220320 12	/14/12	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	11.00		160.38 I	
ı									
ı									
ı					CATEGORY	11.00	0.00	160.38	

		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	-	NY E G I S T E	: R		PAGE 1 VCP CHOICE L BILL WEEK EN		27 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220321 220322	12/14/12 11/09/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, KAUR,	SARD SHARAN	12.00 9.00		174.96 131.22	I I	
					CUSTOMER	21.00	0.00	306.18		
					- CATEGORY	21.00	0.00	306.18		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 128 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220323 12/14/12	800000	VISITING NURSE SERVICE	KAUR, SHARAN	49.75		725.36 I	
			CATEGORY	49.75	0.00	725.36	

RUN DATE 12/19/12 - SUP SALES JRNL # 0312 LOC		G NY NY ES REGISTER		PAGE 1 - 129 VCP CHOICE LHCSA BILL WEEK ENDING 12/21/12
INVOICE# DATE CUS	T NO CUSTOMER NAME	REFERENCE	HOURS TAX A	
220324 12/14/12 000	0008 VISITING NURSE SERVICE	KELINY, NADIA	3.00	43.74 I
		CATEGORY	3.00 0.	 00

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 130 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220325 12/14/12	800000	VISITING NURSE SERVICE	KERNAN, DONALD	7.00		102.07 I	
			CATEGORY	7.00	0.00	102.07	

RUN DATE 12/19/12 - SALES JRNL # 0312	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 131 HOA HOSPICE ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS
220326 12/14/12	000008 VISITING NURSE SERV	VICE KHAN, MARGARET	19.00	277.02 I
		CATEGORY	19.00 0.0	 0

	12/19/12 - IL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	132
SALES UKN	11 # 0312	TOC 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220327	12/14/12	800000	VISITING NURSE SERVICE	KILIMLIAN, PEPR	52.25		761.81	Ι
				CATEGORY			761 01	
1				CATEGORY	52.25	0.00	761.81	

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWI			PAGE 1 - 133	
SALES JRNL # 0312 LOC 001 SUNNYSIDE			ADU ADULT	
	SALES REGISTE	R	BILL WEEK ENDING 12/21/12	
INVOICE# DATE CUST NO CUSTOMER NA	ME REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS	
220328 12/14/12 000008 VISITING NU	RSE SERVICE KNOWLES, ANAMAR	40.00	583.20 I	
	<del>-</del>			
	CATEGORY	40.00 0.00	583.20	

	12/19/12 - NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		34
				SALES REGISTER			BILL WEEK END	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220329	12/14/12	000008	VISITING NURSE SERVICE	KOSTIKIAN, MARI	20.00		291.60	I	
220330	12/14/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		583.20	I	
220331	12/14/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	56.00		816.48	I	
				CUSTOMER	116.00	0.00	1,691.28		
				CATEGORY	116.00	0.00	1,691.28		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK ENI	- 135 DING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220332 12/14/12 220333 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	LASAK, MICHAEL LAWRENCE, NANCY	9.00 6.00		131.22 87.48	I I
			CUSTOMER	15.00	0.00	218.70	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 12/19/12 -	SUP SUNNYSIDE CITY	VIDE				PAGE 1 -	- 136
SALES JRNL # 0312	LOC 001 SUNNYSIDE	CITYWIDE REG	NY NY			LTC NURSING HO	OMEW/O WALLS (LT
		SALE	S REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER 1	JAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
220334 12/14/12	000008 VISITING 1	JURSE SERVICE	LEE, KATHLEEN	26.00		379.08	I
			CATEGORY	26.00	0.00	379.08	

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	137
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220335 12/14/12 220336 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	LEE, MIRIAM G LENDOIRO, JUAN	8.00 5.00		116.64 I 72.90 I	
			CUSTOMER	13.00	0.00	189.54	
			 CATEGORY	13.00	0.00	189.54	

			YSIDE CITYWIDE				PAGE 1	- 1	38
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220337	12/14/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	55.75		812.84	I	
220338	12/07/12	000008	VISITING NURSE SERVICE	LIGARDO, SOL M	16.00		233.28	I	
220339	12/14/12	000008	VISITING NURSE SERVICE	LIGARDO, SOL M	16.00		233.28	I	
220340	11/02/12	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	4.00		58.32	I	
220341	12/07/12	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	5.00		72.90	I	
220342	12/14/12	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	15.00		218.70	I	
				CUSTOMER	111.75	0.00	1,629.32		
				CATEGORY	111.75	0.00	1,629.32		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 139 LTC NURSING HOMEW/O WA BILL WEEK ENDING 12/2	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
220343 12/14/12 220344 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	40.00 41.75		583.20 I 608.72 I	
			CUSTOMER	81.75	0.00	1,191.92	
			CATEGORY	81.75	0.00	1,191.92	

	E 12/19/12 - RNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LHOUSE BILL WEEK END		
INVOICE‡	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
220345	12/14/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	69.25		1,009.67	I	
				CATEGORY	69.25	0.00	1,009.67		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 141 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220346 12/14/12	000008 VISITING NURSE SERVICE	LONDONO, MARIA	36.00	524.88 I
		CATEGORY	36.00 0.00	524.88

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.42
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTE	3		BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220347	12/14/12	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	37.00		539.46 I	
				CATEGORY	37.00	0.00	539.46	

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 143 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/21/12	i
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220348 12/14/12 220349 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · ·	20.00 34.00		291.60 I 495.72 I	
			CUSTOMER	54.00	0.00	787.32	
			CATEGORY	54.00	0.00	787.32	

RUN DATE 12/19/12 SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	144
		S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220350 12/14/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		597.78 I	
			CATEGORY	41.00	0.00	597.78	

	E 12/19/12 - RNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE BILL WEEK ENDIN	CARE PROGRAM
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220351	12/14/12	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	146
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
		S	ALES REGISTER			BILL WEEK ENDIN	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220352 12/14/12	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	73.00		1,064.34	Ι
220353 12/14/12	800000	VISITING NURSE SERVICE	MALDONADO, DOMI	30.00		437.40	Ε
220354 12/14/12	000008	VISITING NURSE SERVICE	MALDONADO, MARI	20.00		291.60	Ε
220355 12/14/12	800000	VISITING NURSE SERVICE	MANGAN, JOHN	16.00		233.28	Γ
			CUSTOMER	139.00	0.00	2,026.62	
			CATEGORY	139.00	0.00	2,026.62	

RUN DATE 12/19/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 147
SALES JRNL # 0312	LOC 001		REG NY NY				HOMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK EN	DING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220356 11/30/12	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	6.00		87.48	I
220357 12/07/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	6.00		87.48	I
220358 12/14/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	24.00		349.92	I
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.48
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220359	12/14/12	800000	VISITING NURSE SERVICE	MARINO, ANN	47.75		696.21 I	
				CATEGORY	47.75	0.00	 696.21	

- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 149	
LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS ()	LT
Si	ALES REGISTER			BILL WEEK ENDING 12/21/12	
CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
000008 VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
	CATEGORY	43 00	0.00	626 94	
	LOC 001 SUNNYSIDE CITYWIDE S 2 CUST NO CUSTOMER NAME	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE  000008 VISITING NURSE SERVICE MARMOL, LIDIA	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE HOURS  000008 VISITING NURSE SERVICE MARMOL, LIDIA 43.00	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT  000008 VISITING NURSE SERVICE MARMOL, LIDIA 43.00	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R LTC NURSING HOMEW/O WALLS (I BILL WEEK ENDING 12/21/12 CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS

RUN DATE 12 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	150 ig 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
220361 12	/14/12	800000	VISITING NURSE SERVICE	MARQUINEZ, NOHE	7.00		102.06	
				CATEGORY	7.00	0.00	102.06	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220362 12/14/12 220363 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTE, JOSE MARTINEZ, CAMIL	8.00 15.00		116.64 I 218.70 I	
			CUSTOMER	23.00	0.00	335.34	
			CATEGORY	23.00	0.00	335.34	

	RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	52
	SALES JRN	rL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	12/21/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	220364	12/14/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
1					CATEGORY	70.00	0.00	1,020.60	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 153	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 1	2/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220365 12/14/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	30.00		437.40 I	
220366 11/16/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		174.96 I	
220367 12/14/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	36.00		524.88 I	
220368 12/14/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	38.25		1,199.21 I	
			CUSTOMER	116.25	0.00	2,336.45	
			CATEGORY	116.25	0.00	2,336.45	

RUN DATE 12/19/12 - SALES JRNL # 0312	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 154 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220369 12/14/12	000008 VISITING NURSE SERVI	CE MARTINEZ, ROSAL	34.00	495.72 I
		CATEGORY	34.00 0.00	495.72

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		PAGE 1 - 155 VCP CHOICE LHCSA	
INVOICE# DATE	CUST NO CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS TAX A	BILL WEEK ENDING 12/21/12  MT AMOUNT TYP SURPLUS	
220370 12/14/12	000008 VISITING NURSE SERVICE	MATOS, ROSA	42.00	612.36 I	
		CATEGORY	42.00 0.	 00	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 156
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		2	SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220371 12/14/12	800000	VISITING NURSE SERVICE	MAZZONE, FRANCE	62.50		911.25	I
220372 12/14/12	000008	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44	I
220373 12/14/12	800000	VISITING NURSE SERVICE	MCCULLAGH, UNA	53.00		772.74	I
						4 122 42	
			CUSTOMER	283.50	0.00	4,133.43	
			CATEGORY	283.50	0.00	4,133.43	

RUN DATE 12/19 SALES JRNL # 0			REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A .
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
220374 12/14	/12 000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 15 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220375 12/14/12	000008	VISITING NURSE SERVICE	MEGALOUDIS, CAR	15.00		218.70 I	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 12/19/12 -			DDG 1111 1111			PAGE 1	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE	
						2122 ((221 21)	1110 12, 21, 12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220376 12/14/12	000008	VISITING NURSE SERVICE	MEJIA, CLAUDIO	49.00		714.42	т
220370 12/14/12	000008	VISITING NURSE SERVICE		29.00		422.82	Ī
220378 12/14/12	800000	VISITING NURSE SERVICE	MEJIA, MARINA	24.00		349.92	I
			CUSTOMER	102.00	0.00	1,487.16	
			CATEGORY	102.00	0.00	1,487.16	

RUN DATE 12/19/12 - SALES JRNL # 0312		REG NY NY SALES REGISTER		PAGE 1 - 160 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS
220379 11/23/12 220380 12/14/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	·	8.00 38.00	116.64 I 554.04 I
		CUSTOMER	46.00 0.0	0 670.68
		CATEGORY	46.00 0.0	 0 670.68

	- 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 - 161 ADU ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220381 12/14/12	000008 VISITING NURSE SERVICE	MENDEZ, ADA	35.25	513.95 I
		CATEGORY	35.25 0.00	 513.95

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 162	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220382 12/14/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12,	/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 163
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE REG	G NY NY			LTC NURSING H	OMEW/O WALLS (LT
			SALI	ES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# I	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220383 12,	/14/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	38.00		554.05	I
				CATEGORY	38.00	0.00	554.05	

RUN DATE 12/19/1:	2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1	- 164
SALES JRNL # 031:	2 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
		S	ALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
220384 12/14/12	2 000008	VISITING NURSE SERVICE	MIRANDA, LUIS	30.00		437.40	I
220385 11/30/1:	2 000008	VISITING NURSE SERVICE	MONSERRAT, DORI	3.00		43.74	I
220386 12/14/1:	2 000008	VISITING NURSE SERVICE	MONSERRAT, DORI	11.75		171.32	I
220387 12/14/1:	2 000008	VISITING NURSE SERVICE	MONTOYA, ROSALB	12.00		174.96	I
220388 12/14/12	2 000008	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30	I
			CUSTOMER	91.75	0.00	1,337.72	
			CATEGORY	91.75	0.00	1,337.72	

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 165	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
		S	A L E S R E G I S T E R			BILL WEEK ENDING 1	2/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220389 12/14/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	38.25		557.69 I	
			CATEGORY	38.25	0.00	557.69	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	166
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HON	
			S	ALES REGISTER			BILL WEEK ENDIN	NG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220390	12/14/12	800000	VISITING NURSE SERVICE	MORALES, CARMEN	24.75		360.86	<u> </u>
				CATEGORY	24.75	0.00	360.86	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	167
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220391	12/14/12	800000	VISITING NURSE SERVICE	MOREL, NOHEMY P	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 12/19/12 -		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.68
	200 001		ALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220392 12/14/12	800000	VISITING NURSE SERVICE	MOREL, NOHEMY P	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	169
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			5	SALES REGISTER			BILL WEEK ENDIN	IG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220393	12/14/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	49.00		714.42	<u>.</u> -
				CATEGORY	49.00	0.00	714.42	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 170
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220394	12/14/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I
				CATEGORY	20.00	0.00	291.60

1 - 171
SING HOMEW/O WALLS (LT
EK ENDING 12/21/12
DUNT TYP SURPLUS
0.78 I
0.78
(

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 CCL CONGREGAT BILL WEEK END	E CARE PROGRAM
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220396 11/02/12 220397 12/07/12 220398 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NIETO RAMOS, JO	9.00 7.00 63.00		131.22 102.06 918.54	I I I
			CUSTOMER	79.00	0.00	1,151.82	
			CATEGORY	79.00	0.00	1,151.82	

RUN DATE 12/19/12	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	173
SALES JRNL # 0312		REG NY NY			VCP CHOICE LHC	
	i	SALES REGISTER	-		BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220399 12/14/12	000008 VISITING NURSE SERVICE	NIEVES, NANCY	40.00		583.20	I
220400 12/14/12	000008 VISITING NURSE SERVICE	NINO, CARMEN	16.00		233.28	I
		 CUSTOMER	56.00	0.00	816.48	
		COSTOMER	30.00	0.00	010.40	
		CATEGORY	56.00	0.00	816.48	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 174
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK END	OING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220401	12/14/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	25.00		364.50	I
220402	12/07/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	8.00		116.64	I
220403	12/14/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	21.75		317.12	I
				CUSTOMER	54.75	0.00	798.26	
				CATEGORY	54.75	0.00	798.26	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 175
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
		5	SALES REGISTER			BILL WEEK END:	ING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
220404 12/14/12	000008	VISITING NURSE SERVICE	NOGUE, FIDELINA	20.00		291.60	I
220405 12/14/12	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	42.00		612.36	I
220406 12/14/12	800000	VISITING NURSE SERVICE	OCHOA, LUIS	43.00		626.94	I
			CUSTOMER	105.00	0.00	1,530.90	
			CATEGORY	105.00	0.00	1,530.90	

RUN DATE 12/19/12 -	- SUP SUNNY	SIDE CITYWIDE				PAGE 1 - 176	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
		S	ALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220407 12/14/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	35.00		510.30 I	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 12/19/1 SALES JRNL # 031		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
220408 12/14/1 220409 12/14/1 220410 12/14/1	.2 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORNANO, BOLIVAR ORTEGA, CARLOS PANASKAROLIDIS,	20.00 11.00 21.50		291.60 160.38 313.48	I I I
			CUSTOMER	52.50	0.00	765.46	
			CATEGORY	52.50	0.00	765.46	

	12/19/12 · NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY S A L E S	NY REGISTE	R		PAGE 1 ADU ADULT BILL WEEK END	- 178 DING 12/2	1/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R:	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP SUR	PLUS
220411	12/14/12	800000	VISITING NURSE SERVICE	PA	OLONI, MARY	11.75		171.32	I	
1					CATEGORY	11.75	0.00	171.32		

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 179 VCP CHOICE LHCSA	)
		S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220412 12/14/12	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	40.00		583.20 I	
220413 12/14/12	800000	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48 I	
220414 12/14/12	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74 I	
220415 12/14/12	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48 I	
			CUSTOMER	105.00	0.00	1,530.90	
			CATEGORY	105.00	0.00	1,530.90	

RUN DATE 12/19/12 - SALES JRNL # 0312	SUP SUNNYSIDE CITYWIDI LOC 001 SUNNYSIDE C	ITYWIDE REG NY				PAGE 1 HOA HOSPICE A BILL WEEK ENI	-	
INVOICE# DATE	CUST NO CUSTOMER NAME	E	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220416 10/26/12	000008 VISITING NURS	SE SERVICE P	PARTAGAS, ANA	4.00		58.32	I	
			CATEGORY	4.00	0.00	58.32		

RUN DATE 12/19/12							- 1	81
SALES JRNL # 0312	LOC 001		REGNY NY ALES REGISTER			VCP CHOICE LE		12/21/12
		S .	ALES REGISIER			DILL MEEK EN	DING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220417 12/14/12	800000	VISITING NURSE SERVICE	PENA, VICTORIA	32.25		470.21	I	
220418 12/14/12	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	15.00		218.70	I	
220419 12/14/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	I	
220420 11/30/12	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	8.00		116.64	I	
220421 12/14/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	30.00		437.40	I	
220422 12/14/12	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN			437.40	I	
220423 12/14/12	800000	VISITING NURSE SERVICE	PHILIPPS, MARY			816.48	I	
220424 12/14/12	800000	VISITING NURSE SERVICE	PIZARRO, BARBAR			43.74	I	
220425 11/30/12	800000	VISITING NURSE SERVICE	PLACIDO, GENARO			72.90	I	
220426 12/14/12	800000	VISITING NURSE SERVICE	PLACIDO, GENARO			510.30	I	
220427 11/30/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	6.00		87.48	I	
220428 12/14/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	42.00		612.36	I	
220429 12/14/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88	I	
			CUSTOMER	347.25	0.00	5,062.91		
			CATEGORY	347.25	0.00	5,062.91		

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	182 NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220430 12/14/12	800000	VISITING NURSE SERVICE	POLANCO, JUAN	18.00		262.45	I
			CATEGORY	18.00	0.00	262.45	

			REG NY NY			PAGE 1 - VCP CHOICE LHCS	A
TABLOT GET DATE	THE CHICK NO.		SALES REGISTER	HOHDG		BILL WEEK ENDIN	
INVOICE# DA'		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220431 12/1	4/12 000008	VISITING NURSE SERVICE	POLITIS, HELEN	12.00		174.96 I	
			CATEGORY	12.00	0.00	174.96	

	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 - 184 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220432 12/14/12	000008 VISITING NURSE SERVIC	E PONCE, ALICIA	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

RUN DATE 12/19/12 - SALES JRNL # 0312						PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
220433 12/14/12 220434 12/07/12 220435 12/14/12 220436 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PUISELLO, CIRA PULLIZA, DIANNE PULLIZA, DIANNE QUINTERO, INES	53.00 12.00 12.00 29.75		772.75 I 174.96 I 174.96 I 433.76 I	
			CUSTOMER	106.75	0.00	1,556.43	
			CATEGORY	106.75	0.00	1,556.43	

RUN DATE 12/19/12 SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 186 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220437 12/14/12	800000	VISITING NURSE SERVICE	QUITO, SARA	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 18	37		
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	UNNYSIDE CITYWIDE REG NY NY				LTC NURSING HOMEW/O WALLS (LT			
		S	BALES REGISTE:	R		BILL WEEK EN	DING	12/21/12		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
220438 11/09/12	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	7.00		102.06	I			
220439 12/14/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	41.75		608.72	I			
				40.75	0.00	710 70				
			CUSTOMER	48.75	0.00	710.78				
			CATEGORY	48.75	0.00	710.78				

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 188
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220440 12/14/12	000008	VISITING NURSE SERVICE	OUIZHPI, MARIA	22.00		320.76 I
220441 12/14/12	800000	VISITING NURSE SERVICE	RAJA, HANIFA	23.50		342.63 I
			CUSTOMER	45.50	0.00	663.39
			CATEGORY	45.50	0.00	663.39

R	UN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 189	
S.	ALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PEDIATRIC	2
				5	SALES REGISTER			BILL WEEK ENDING 12/21/12	
1									
	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	00440	10/14/10				40.00		500.00 -	
2	20442	12/14/12	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
					CATEGORY	40.00	0.00	583.20	

RUN DATE 12/19/12		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 LTC NURSING HOMEW	
SALES UNIL # USIZ	LOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220443 12/14/12	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	43.00		626.94 I	
			CATEGORY	43.00	0.00	 626.94	

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE	1 – 191
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			HOME W/O WALLS LT
		SALES REGISTER		BILL WEEK E	NDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUNT	TYP SURPLUS
220444 12/14/12	000008 VISITING NURSE SERVICE	RAMLALL, LILOWT	30.00	437.40	I
		CATEGORY	30.00	0.00 437.40	

RUN DATE	12/19/12	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 19	92	
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGA'	FE CAF	RE PROGRAM	
			5	SALES R	EGISTE	R		BILL WEEK EN	DING	12/21/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
220445	12/14/12	800000	VISITING NURSE SERVICE	RAMOS	, ISMAEL	2.50		36.45	I		
					- CATEGORY	2.50	0.00	36.45			

RUN DATE 12/19/12 -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC NY NY			-	193
SALES JRNL # 0312	TOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCS	
		•					- , ,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220446 12/14/12	800000	VISITING NURSE SERVICE	RAMPHAL, INDRIA	20.00		291.60	[
220447 12/14/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	[
220448 12/07/12	800000	VISITING NURSE SERVICE	REINA, JOSE	4.00		58.32	[
220449 12/14/12	800000	VISITING NURSE SERVICE	REINA, JOSE	20.00		291.60	[
			CUSTOMER		0.00	729.00	
			CUSTOMER	50.00	0.00	729.00	
			CATEGORY	50.00	0.00	729.00	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 194 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220450 12/14/12	000008 VISITING NURSE SERVICE	RENDON, EDUARDO	13.00		189.54 I	
		CATEGORY	13.00	0.00	189.54	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 195
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		5	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220451 12/14/12	000008	VISITING NURSE SERVICE	RICCA, MARIE	13.75		200.48 I
220452 12/14/12	800000	VISITING NURSE SERVICE	RICE, SYDNEY	7.25		105.71 I
			OLIGHOMED	21 00	0.00	306.19
			CUSTOMER	21.00	0.00	306.19
			CATEGORY	21.00	0.00	306.19

RUN DATE 12/19/1	2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 196	
SALES JRNL # 031	2 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRA	M
		5	SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
11110101111	0001 1.0	000101101111111111111111111111111111111	1121 21121102	110 0110		11100111 111 20111202	
220453 12/14/1	2 000008	VISITING NURSE SERVICE	RISCO, GUILLERM	42.00		612.36 I	
			CATEGORY	42.00	0.00	612.36	

RUN DATE 12/19/12 - SALES JRNL # 0312		YWIDE DE CITYWIDE REG N S A L E S				PAGE 1 VCP CHOICE LE BILL WEEK ENI	
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220454 12/14/12	000008 VISITING	NURSE SERVICE	RIVADENEIRA, OL	4.00		58.32	I
			CATEGORY	4.00	0.00	58.32	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 198 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220455 10/19/12 220456 12/14/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	8.00 56.00		116.64 I 816.48 I
		CUSTOMER	64.00	0.00	933.12
		CATEGORY	64.00	0.00	933.12

	TE 12/19/12 - JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	A
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDIN  AMOUNT TY	- , ,
220457	12/14/12	000008	VISITING NURSE SERVICE	RIVERA, CARMEN	19.00		277.02 I	
				CATEGORY	19.00	0.00	277.02	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	200
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220458 12/14/12	800000	VISITING NURSE SERVICE	E RIVERA, CAROL	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE 12/19						PAGE 1 -	202
SALES JRNL # 0:	312 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
		2	SALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220459 12/14	/12 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	20.00		291.60	I
			CATEGORY	20.00	0.00	291.60	

ĭ 12/19/12 - SU	JP SUNNYSIDE CITYWII	Έ			P	PAGE 1 - 2	102
RNL # 0312 LO	OC 001 SUNNYSIDE C	CITYWIDE REG N	Y NY		L	TC NURSING HOMEW	//O WALLS (LT
		SALES	REGISTER		В	BILL WEEK ENDING	12/21/12
# DATE CU	JST NO CUSTOMER NAM	IE	REFERENCE	HOURS I	CAX AMT	AMOUNT TYP	SURPLUS
12/14/12 00	00008 VISITING NUF	SE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	
	00008 VISITING NUF		RIVERA, GRACIEL	20.00			

- 1		12/19/12 - NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	203
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDI	NG 12/21/12 YP SURPLUS
		12/14/12	000008	VISITING NURSE SERVICE		3.25		47.39	
					 CATEGORY	3.25	0.00	47.39	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	204
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
		5	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220462 12/14/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		699.84 I	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 12/19/12 - SUP SU	NNYSIDE CITYWIDE				PAGE 1	- 205	
SALES JRNL # 0312 LOC 00		NY NY			VCP CHOICE LH		
	SALE	S REGISTER			BILL WEEK END	ING 12/21/12	
INVOICE# DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
220463 12/14/12 000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	35.75		521.24	I	
		CATEGORY	35.75	0.00	521.24		

	RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	206
ı	SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	CARE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	12/21/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	220464	12/14/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
1									
					CATEGORY	84.00	0.00	1,224.72	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20	7
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220465	12/14/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARI	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - : LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220466 12/14/12	000008 V	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	209
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220467	12/14/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

RUN DATE 12/19/12 - SALES JRNL # 0312		NYSIDE CITYWIDE REG	GNY NY GSREGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	EW/O WALLS (LT
INVOICE# DATE	CUST NO CUST	COMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220468 12/14/12	000008 VISI	TING NURSE SERVICE	RODRIGUEZ, ROQU	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/19/12 - SALES JRNL # 0312		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
220469 12/14/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, RUTH	16.00		233.28	I
			CATEGORY	16.00	0.00	233.28	

RUN DATE 12/19/1 SALES JRNL # 031		SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE AD	212 ULT
		\$	SALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220470 12/14/1	.2 000008 V	VISITING NURSE SERVICE	RODRIGUEZ, YLMA	15.00		218.70	I
			CATEGORY	15.00	0.00	218.70	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER	1		PAGE 1 - 213 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220471 12/07/12 220472 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	8.00 47.50		116.64 I 692.55 I
			CUSTOMER	55.50	0.00	809.19
			CATEGORY	55.50	0.00	809.19

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	214
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
		S	ALES REGISTER			BILL WEEK ENDING	G 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220473 12/14/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	48.00		699.84 I	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 12/19/12 - SALES JRNL # 0312	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 - 215 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220474 12/14/12 220475 12/14/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	<b>,</b>	47.00 40.00	685.26 I 583.20 I
		CUSTOMER	87.00 0.00	1,268.46
		CATEGORY	87.00 0.00	1,268.46

			YSIDE CITYWIDE				PAGE 1	- 2	16
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			2	SALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220476	12/14/12	000008	VISITING NURSE SERVICE	ROSA, LUZ E	48.00		699.84	I	
220477	12/14/12	800000	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28	I	
220478	12/14/12	000008	VISITING NURSE SERVICE	ROSARIO, ELSA	35.00		510.30	I	
220479	11/30/12	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	5.00		72.90	I	
220480	12/14/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	28.00		408.24	I	
220481	12/14/12	800000	VISITING NURSE SERVICE	ROSARIOBREU, EM	24.75		360.86	I	
				CUSTOMER	156.75	0.00	2,285.42		
				CATEGORY	156.75	0.00	2,285.42		

RUN DATE 12	2/19/12 - SUP SU	NNYSIDE CITYWIDE				PAGE 1 - 217	
SALES JRNL	# 0312 LOC 00	1 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12	2/21/12
INVOICE#	DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
220482 12	2/14/12 000008	VISITING NURSE SERVICE	ROSE, EVA	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 12/19/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 218
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA
		SALES REGISTER		BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220483 12/14/12	000008 VISITING NURSE SERVICE	RUEDA, INES	47.00	685.26 I
		CATEGORY	47.00 0.00	685.26

	- 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 - 219 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220484 12/14/12 220485 12/14/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	• •	31.50 7.00		459.28 I 102.06 I
		CUSTOMER	38.50	0.00	561.34
		CATEGORY	38.50	0.00	 561.34

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	220
SALES JRI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	3 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
000406	70/74/70				60.00		276 26 -	
220486	12/14/12	000008	VISITING NURSE SERVICE	RUSSO, MONICA	67.00		976.86 I	
				GAERGORY	67.00	0.00	076 06	
				CATEGORY	67.00	0.00	976.86	

	E 12/19/12 - RNL # 0312	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		21 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	•					TAX AMI		IIP	SURPLUS
220487 220488	12/14/12 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SAK, FIRDEVS SALADIN, MARIA	14.50 76.50		211.41 1,115.37	I	
				CUSTOMER	91.00	0.00	1,326.78		
				CATEGORY	91.00	0.00	1,326.78		

RUN DATE 12/19/12 -	SUP SUNNYSIDE CITYWIDE				PAGE 1 - 2	222
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITY	WIDE REG NY NY			LTC NURSING HOMEW	N/O WALLS (LT
		SALES REG	ISTER		BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENC	E HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220489 12/14/12	000008 VISITING NURSE	SERVICE SALVATIER	RA, TE 36.00		524.88 I	
		CAT	EGORY 36.00	0.00	524.88	

- 1	RUN DATE 12 SALES JRNL			SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
	INVOICE#	DATE (	CUST NO	CUSTOMER NAME	ALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDI	NG 12/21/12 YP SURPLUS
				VISITING NURSE SERVICE	SAMPOGNA, LUCY	77.00	IAM AHI	1,122.66	
					· 				
					CATEGORY	77.00	0.00	1,122.66	

RUN DATE 12/19/12 - SALES JRNL # 0312			REG NY NY			PAGE 1 - 224 ADU ADULT	
			SALES REGISTER			BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220491 12/07/12 220492 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 21.00		218.70 I 306.18 I	
220192 12/11/12	000000	VIBILING NORDE BERVICE	CUSTOMER	36.00	0.00	524.88	
			COSTOMER	30.00	0.00	324.00	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 12/19/ SALES JRNL # 03		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220493 12/07/	12 000008	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	5.00		72.90 I	
			CATEGORY	5.00	0.00	72.90	

RUN DATE 12/19/12 - SALES JRNL # 0312	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER	}		PAGE 1 - 226 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220494 12/14/12	000008 VISITING NURSE SERV	ICE SANCHEZ, FLORA	21.00		306.18 I	
		CATEGORY	21.00	0.00	306.18	

			YSIDE CITYWIDE				PAGE 1 - 227	
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 12/2	11 /10
				SALES REGISIER			BILL WEEK ENDING 12/2	1/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
220495	12/14/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 228	8
SALES JRI	NL # 0312	LOC 001		REG NY NY			CCL CONGREGATE CARI	
			5	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220496	12/14/12	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 229
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
				SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
220497	12/14/12	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	37.75		550.40	I
220498	12/14/12	800000	VISITING NURSE SERVICE	SANDOVAL, FANNY	39.00		568.62	I
220499	12/14/12	800000	VISITING NURSE SERVICE	SANTOS, LETY I	29.75		433.76	I
220500	12/14/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	55.75		812.84	I
220501	12/14/12	800000	VISITING NURSE SERVICE	SCRO, WILLIAM	28.00		408.24	I
				CUSTOMER	190.25	0.00	2,773.86	
				CATEGORY	190.25	0.00	2,773.86	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	230
SALES JRN	rL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220502	12/14/12	800000	VISITING NURSE SERVICE	SECONDINI, ANNA	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE 12/19/12 - SALES JRNL # 0312	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 231 VCP CHOICE LHCSA BILL WEEK ENDING 1	2/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220503 12/07/12 220504 12/14/12 220505 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SEGOVIA, BEATRI SEGOVIA, BEATRI SERAFIN, WALTER	6.00 36.00 69.75		87.48 I 524.88 I 1,016.96 I	
			CUSTOMER	111.75	0.00	1,629.32	
			CATEGORY	111.75	0.00	1,629.32	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 232 ADU ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220506 12/14/12	000008 VISITING NURSE SERVICE	SERRA, JOSE	34.75		506.66 I
		CATEGORY	34.75	0.00	506.66

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 2	33
SALES UNIT # USIZ	100 001		SALES REGISTER			BILL WEEK EN		12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220507 12/14/12 220508 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SERRANO, AGUEDA SHANNON, ELNORA	53.75 34.50		783.68 503.01	I	
			CUSTOMER	88.25	0.00	1,286.69		
			CATEGORY	88.25	0.00	1,286.69		

			YSIDE CITYWIDE					234
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220509 1	2/14/12	800000	VISITING NURSE SERVICE	SHANNON, MADELI	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 235
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220510 12/14/12	000008	VISITING NURSE SERVICE	SHARMA, DEROPDI	17.00		247.86 I
220511 12/14/12	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80 I
			CUSTOMER	27.00	0.00	393.66
			CATEGORY	27.00	0.00	393.66

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 236 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220512 12/14/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	41.75		608.72 I	
			CATEGORY	41.75	0.00	608.72	

	12/19/12 - NL # 0312	- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220513 220514	12/14/12 12/14/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, JAMOONIE	30.00 12.00		437.40 174.96	I I
				CUSTOMER	42.00	0.00	612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 1	2/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 238	В
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
000515 1	0/14/10				15 00		010 50 -	
220515 1	2/14/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
				CAREGORY	15 00	0.00	210 70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 CCL CONGREGA BILL WEEK EN	TE CA	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220516 11/23/12 220517 12/07/12 220518 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SOPCHEK, SAMUEL	4.00 4.00 12.00		58.32 58.32 174.96	I I I	
			CUSTOMER	20.00	0.00	291.60		
			CATEGORY	20.00	0.00	291.60		

RUN DATE 1	2/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	240
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S A I	LES REGISTER			BILL WEEK ENDIN	G 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220519 1	2/14/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
							405.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 12/19/12 -	· SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 241	
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/	/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
220520 12/14/12	800000	VISITING NURSE SERVICE	SOSA, ELSA	8.25		120.29 I	
			CATEGORY	8.25	0.00	120.29	

			YSIDE CITYWIDE				PAGE 1 -	
SALES	JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
			· ·	SALES REGISIER			RILL MEEK FUDING	3 12/21/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
00050							005 55 -	
22052	1 12/14/12	000008	VISITING NURSE SERVICE	STAFILIAS, EVAN	55.25		805.55 I	
				CATEGORY	55.25	0.00	805.55	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY	NY REGISTER			PAGE 1 ADU ADULT BILL WEEK EN	. – 2 IDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220522	12/14/12	800000	VISITING NURSE SERVICE	ST	ALZER, STEPHA	69.75		1,016.96	I	
					CATEGORY	69.75	0.00	1,016.96		

RUN DATE 12/19/12 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 244	
SALES JRNL # 0312	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA	
	:	SALES REGISTER		BILL WEEK ENDING 12/2	21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SU	RPLUS
220523 12/14/12	000008 VISITING NURSE SERVICE	STAMBOULIDIS, V	56.00	816.48 I	
				0.16.40	
		CATEGORY	56.00 0.0	0 816.48	

	12/19/12 - NL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 2 HOA HOSPICE ADULT BILL WEEK ENDING	1
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220524	12/14/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

	12/19/12 - NL # 0312	- SUP SUNN	IYSIDE CITYWIDE	DEC NY NY			-	- 2	46
SALES UK	INL # U312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		12/21/12
			_						,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220525	12/14/12	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	20.00		291.60	т	
220525	12/14/12	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	16.00		233.28		
220527	12/14/12	000008	VISITING NORSE SERVICE	STICKELL, BLANC	25.25		368.16	T	
220528	12/14/12	000008	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88	T	
220529	12/07/12	000008	VISITING NURSE SERVICE	SUAREZ, MARINA	6.00		87.48	Ī	
220530	12/14/12	000008	VISITING NURSE SERVICE	SUAREZ, MARINA	30.00		437.40	I	
				GLIGHOMED.	122 05	0.00	1 040 00		
				CUSTOMER	133.25	0.00	1,942.80		
				CATEGORY	133.25	0.00	1,942.80		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CIT	YWIDE REGNY NY SALES REGIST	E R		PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	EW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
220531 12/14/12	000008 VISITING NURSE	SERVICE SUAREZ, TULIA	16.25		236.93 I	
		CATEGORY	16.25	0.00	236.93	

RUN DATE 12/19/12 -		YSIDE CITYWIDE				PAGE 1	- 2	48
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			SALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220532 12/14/12	000008	VISITING NURSE SERVICE	TABOADA, DIMAS	18.00		262.44	I	
220533 12/14/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	56.00		816.48	I	
			CUSTOMER	74.00	0.00	1,078.92		
			0001011211	, 1.00	0.00	1,0,0,52		
						1 050 00		
			CATEGORY	74.00	0.00	1,078.92		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE	R		PAGE 1 - 249 LTC NURSING HOMEW/O W. BILL WEEK ENDING 12/	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
220534 12/14/12 220535 12/14/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	56.00 30.00		816.48 I 437.40 I	
			CUSTOMER	86.00	0.00	1,253.88	
			CATEGORY	86.00	0.00	1,253.88	

			YSIDE CITYWIDE	556 351			PAGE 1 - 250	
SALES JR.	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 12/21/1	2
				SALES REGISIER			BILL WEEK ENDING 12/21/1	4
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
220536	12/14/12	000008	VISITING NURSE SERVICE	TAVERAS, BERNAR	12.00		174.96 I	
220537	12/14/12	000008	VISITING NURSE SERVICE	,	24.00		349.92 I	
				GUGEOMED.	36.00		524.88	_
				CUSTOMER	36.00	0.00	524.88	
								_
				CATEGORY	36.00	0.00	524.88	

	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 251
SALES JRNL # 0312		REGNY NY SALES REGISTER		ADU ADULT
	•	SALES REGISIER		BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220538 12/14/12	000008 VISITING NURSE SERVICE	TENAGLIA, ANTON	16.00	233.28 I
220539 12/14/12	000008 VISITING NURSE SERVICE	TEODORU, MIRELL	15.00	218.70 I
		CUSTOMER	31.00 0.00	451.98
		CATEGORY	31.00 0.00	451.98

RUN DATE 12/19/12 -		YSIDE CITYWIDE				PAGE 1 - 252	2
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220540 12/14/12	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	41.50		605.07 I	
220541 12/14/12	800000	VISITING NURSE SERVICE	TINOCO, INES	28.25		411.89 I	
			CUSTOMER	69.75	0.00	1,016.96	
			CATEGORY	69.75	0.00	1,016.96	

RUN DATE 12/19/12 - SUP SUNN SALES JRNL # 0312 LOC 001		G NY NY			PAGE 1 - ADU ADULT	253
"	S A L	ES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220542 12/14/12 000008	VISITING NURSE SERVICE	TOLENTINO, PASC	25.00		364.50	I
		CATEGORY	25.00	0.00	364.50	

		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE				PAGE 1 -		
SALES URNL # (	312 LOC 001		REG NY NY SALES REGISTER			VCP CHOICE LHCS: BILL WEEK ENDING		
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
220543 12/14	/12 000008	VISITING NURSE SERVICE	TORO VEGA, LUZV	24.00		349.92 I		
			CAREGODY			240.02		
220543 12/14	/12 000008	VISITING NURSE SERVICE	TORO VEGA, LUZV CATEGORY	24.00	0.00	349.92 I		

			YSIDE CITYWIDE				PAGE 1	- 255
SALES JRNI	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TNG 12/21/12
				SALES REGISTER			BILL WEEK END	ING 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220544	12/14/12	800000	VISITING NURSE SERVICE	TORO, PURA	84.00		1,224.72	I
				CATEGORY	84.00	0.00	1,224.72	
				***************************************			-,	

RUN DATE 12/19/12 SALES JRNL # 0312			REG NY NY			PAGE 1 VCP CHOICE LF	- 2 ICSA	56
		S	SALES REGISTER			BILL WEEK ENI	DING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220545 12/14/12 220546 12/14/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORRES, EMELINA TORRES, LUZ M	32.00 70.00		466.56 1,020.60	I I	
			CUSTOMER	102.00	0.00	1,487.16		
			CATEGORY	102.00	0.00	1,487.16		

RUN DATE 12	2/19/12 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 -	257
SALES JRNL	# 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	3 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
000545	2 / 1 4 / 1 2				40.00		610 D6 -	
220547 12	2/14/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		612.36 I	
					40.00	0.00		
				CATEGORY	42.00	0.00	612.36	

RUN DATE 12/19/12 - SUP SUNN					PAGE 1 - 25	58
SALES JRNL # 0312 LOC 001					ADU ADULT	
	SALE	S REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220548 12/14/12 000008	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
		 CATEGORY	35.00		510.30	
		CATEGORY	35.00	0.00	510.30	

			TYSIDE CITYWIDE				-	- 2	59
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		12/21/12
			5	All CIDIA			DITT MEEK EM	JING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220549	12/14/12	000008	VISITING NURSE SERVICE	TOVARDE BOCAN,	30.00		437.40	Т	
220550	11/02/12	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	4.00		58.32	Ī	
220551	11/02/12	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	4.00		58.32	I	
220552	12/07/12	800000	VISITING NURSE SERVICE	TRUJILLO, AMPAR	8.00		116.64	I	
220553	12/14/12	800000	VISITING NURSE SERVICE	TRUJILLO, AMPAR	16.00		233.28	I	
220554	12/14/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	55.00		801.91	I	
				CUSTOMER	117.00	0.00	1,705.87		
				CATEGORY	117.00	0.00	1,705.87		

RUN DATE 12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	260
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
		S	ALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220555 12/14/12	800000	VISITING NURSE SERVICE	TSUAI, PING	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	
			CAIEGORI	20.00	0.00	291.00	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220556 12/14/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	63.00		918.54 I	
			CATEGORY	63.00	0.00	918.54	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 262 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CU	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220557 12/07/12 220558 12/14/12		ISITING NURSE SERVICE ISITING NURSE SERVICE	URBINA, ANA URBINA, ANA	5.00 35.00		72.90 I 510.30 I
			CUSTOMER	40.00	0.00	583.20
			CATEGORY	40.00	0.00	 583.20

RUN DATE 12/19/12 - SALES JRNL # 0312			GNY NY ES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO CUSTOMER		REFERENCE	HOURS	TAX AMT		YP SURPLUS
220559 12/07/12 220560 12/14/12 220561 12/14/12	000008 VISITING	G NURSE SERVICE G NURSE SERVICE G NURSE SERVICE	URENA, ARGELIA URENA, ARGELIA URUCHIMA, VICTO	4.00 12.00 12.00		58.32 174.96 174.96	I I I
			CUSTOMER	28.00	0.00	408.24	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 12/	19/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 264
SALES JRNL ‡	0312 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		S	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220562 12/	14/12 000008	VISITING NURSE SERVICE	VALENCIA, BERNA	25.00		364.50 I
			CATEGORY	25.00	0.00	364.50

			YSIDE CITYWIDE					265
SALES 3	RNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHC: BILL WEEK ENDII	
				SALES REGISIER			RILL MEEK ENDII	NG 12/21/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
000560	10/14/10				10.00		0.50 44	_
220563	12/14/12	000008	VISITING NURSE SERVICE	VALENCIA, ESTHE	18.00		262.44	L
				CATEGORY	18.00	0.00	262.44	

RUN DATE 12/19/1	.2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 266
SALES JRNL # 031	.2 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220564 12/14/1	2 000008	VISITING NURSE SERVICE	VALENTI, HELEN	55.00		801.91 I
			CATEGORY	55.00	0.00	801.91

	12/19/12		YSIDE CITYWIDE				PAGE 1	- 20	67
SALES JR	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S A	ALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220565	10/19/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	6.00		87.48	I	
220566	10/26/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	6.00		87.48	I	
220567	11/09/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	12.00		174.96	I	
220568	11/16/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	6.00		87.48	I	
220569	11/30/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	6.00		87.48	I	
220570	12/14/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	24.00		349.92	I	
220571	12/14/12	800000	VISITING NURSE SERVICE	VALENTINO, EUGE	4.00		58.32	I	
220572	12/14/12	800000	VISITING NURSE SERVICE	VALLECILLO, ZOI	6.00		87.48	I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220573 12/14/12 220574 12/14/12 220575 12/14/12 220576 12/14/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VASQUEZ, EUSTAG VASQUEZ, RAPHAE	11.75 28.50 15.00 35.00		171.32 I 415.54 I 218.70 I 510.30 I	
			CUSTOMER	90.25	0.00	1,315.86	
			CATEGORY	90.25	0.00	1,315.86	

			YSIDE CITYWIDE					269
SALES JRN	IL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	10/01/10
			5	SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220577	12/14/12	800000	VISITING NURSE SERVICE	VAZQUEZ, FELIPE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

	ATE 12/19/12 JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	270
DALLES	01011 # 0312	HOC 001		SALES REGISTER			BILL WEEK ENDI	
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
22057	8 12/14/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	16.00		233.28	I
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGIST	E R		PAGE 1 - ADU ADULT BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220579	12/14/12	800000	VISITING NURSE SERVICE	VELECELA, MARIA	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

		REG NY NY				- 272 OMEW/O WALLS (LT
		SALES REGISTER				
CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
800000	VISITING NURSE SERVICE	VENTURA, ROSA	49.00		714.42	I
		CATEGORY	49.00	0.00	714.42	
	LOC 001 CUST NO	CUST NO CUSTOMER NAME	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE  000008 VISITING NURSE SERVICE VENTURA, ROSA	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE HOURS  000008 VISITING NURSE SERVICE VENTURA, ROSA 49.00	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT  000008 VISITING NURSE SERVICE VENTURA, ROSA 49.00	LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R BILL WEEK END  CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT  000008 VISITING NURSE SERVICE VENTURA, ROSA 49.00 714.42

- 1			SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	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
	220581	12/14/12	800000	VISITING NURSE SERVICE	VERA, ROSARIO	19.75		287.96	I
					CATEGORY	19.75	0.00	 287.96	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220582 12/14/12 220583 12/14/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.50 56.00		226.00 816.48	I
			CUSTOMER	71.50	0.00	1,042.48	
			CATEGORY	71.50	0.00	1,042.48	

	12/19/12 - IL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 275 HOA HOSPICE ADULT	
SALES URN	ш # 0312	LOC UUI		SALES REGISTER			BILL WEEK ENDING 12/	21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
220584	12/14/12	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 12/19/12 - SUP	SUNNYSIDE CITYWIDE		PAGE 1 - 276
SALES JRNL # 0312 LOC	001 SUNNYSIDE CITYWIDE REG NY NY		VCP CHOICE LHCSA
	SALES REGIS	ΓE R	BILL WEEK ENDING 12/21/12
INVOICE# DATE CUST	NO CUSTOMER NAME REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220585 12/14/12 0000	008 VISITING NURSE SERVICE VILLAPOL, ANN	A 34.75	506.66 I
	CATEGOR	Y 34.75 0.00	506.66

	E 12/19/12 - RNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 CCL CONGREGAT BILL WEEK END	E CARE PROGRAM
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
220586	12/14/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32	I
				CATEGORY	4.00	0.00	58.32	

RUN	DATE 12/19/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	278
SAL	ES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			2	SALES REGISTER			BILL WEEK ENDIN	G 12/21/12
INV	OICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
220	587 12/14/12	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	69.25		1,009.67 I	
				CATEGORY	69.25	0.00	1,009.67	

RUN DATE 12/19/12 -		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	279
BINDED OTAVE    0312	100 001		SALES REGISTER			BILL WEEK ENDING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220588 12/14/12	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

	12/19/12 - JL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	, ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220589	12/14/12	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

	12/19/12 - L # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK END	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
220590	12/14/12	800000	VISITING NURSE SERVICE	WASHINGTON, JAM	13.25		193.19	I
				CATEGORY	13.25	0.00	193.19	
1				CAILGORI	10.20	0.00	193.19	

RUN DATE 12/19/12 - SUE SALES JRNL # 0312 LOC	C 001 SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 282 ADU ADULT BILL WEEK ENDING 12/21/12
INVOICE# DATE CUS	ST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
220591 12/07/12 000	0008 VISITING NURSE SERVICE	WEINHAUS, SUSAN	5.00		72.90 I
		CATEGORY	5.00	0.00	72.90

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 283	
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12	2/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
220592	12/14/12	800000	VISITING NURSE SERVICE	WHITEHEAD, NANC	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE					284
SALES JRN	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
				SALES REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220593	12/14/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28	I
				CATEGORY	16.00	0.00	233.28	

RUN DATE	12/19/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	285
SALES JRN	L # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
			\$	SALES REGISTE	R		BILL WEEK ENDING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220594	12/14/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				-				
				CATEGORY	12.00	0.00	174.96	

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 286 ADU ADULT BILL WEEK ENDING 12/21/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
220595 12/14/12	800000	VISITING NURSE SERVICE	ZAMBRANO, VICTO	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 287 SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 12/21/12 CUST NO CUSTOMER NAME

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302.4 REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS INVOICE# DATE CUST NO CUSTOMER NAME 220596 12/14/12 302.40 I 220597 12/14/12 302.40 I 220598 11/02/12 393.12 I 220599 11/02/12 220600 12/14/12 220601 12/14/12 220602 12/14/12 220603 12/14/12 220604 12/14/12 220605 12/14/12 220606 12/14/12 220607 12/14/12 220608 12/14/12 220609 12/14/12 220610 12/14/12 220611 12/07/12 220612 12/14/12 220613 12/14/12 220614 12/14/12 220615 12/14/12 220616 12/14/12 220617 12/07/12 220618 12/14/12 220619 12/14/12 220620 11/23/12 220621 12/14/12 220622 12/14/12 220623 12/14/12 220624 12/14/12 220625 12/14/12 220626 12/14/12 220627 12/14/12 220628 12/14/12 220629 12/07/12 220630 12/14/12 220631 12/14/12 220632 12/14/12 220633 12/14/12

220634 11/16/12 12/14/12

220636 12/14/12 220637 12/14/12 220638 12/14/12

12/07/12

11/30/12

12/14/12

12/14/12 220643 12/14/12 220644 12/14/12

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220642

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE

SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET

SALES REGISTER

BILL WEEK ENDING 12/21/12

				SALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE  FERRO, JOSEPHIN FRANCIS, VICTOR GARCIA, LUCILA GARCIA, MARIA A GOMEZ, YOLANDA GONZALEZ MONTA GONZALEZ, PABLO GREAVES, BARBAR GREENSPAN, ALIC GUERRA, MAYRA GUZMAN, EDELMIR HENLEY, LUVENIA HENRIQUEZ, TERE HERNANDEZ, LUZ HICKS, SYLVIA HUSTIU, SILVIA IGLESIAS, JUANA IRIZARRY, ESTRE JACKSON, PATRIC JIMENEZ, EUGENI JOHNSON, DOROTH JONES, LUCILLE LANZILOTTA, ROS LEMOINE, RICARD LOPEZ, CARMEN LORA, FERNANDO LOZADA, RAMON LUGO, DOLORES LUIS, MAXIMINA LUNA, ELDA MANGRAY, KARMAD MANTILLA, BEATR MARIANI, MARIA MARERO, PHILLI MARTIN, RUTH MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, GLORI MASSOL, PEDRO A MATEO, RAFAEL MCQUAIL, MAUREE MICHEL, DOROTHY MIMMS, GRACE T MONCRIEF, LOIS MONTALVO, VERON MONTES, ADOLFO MORA, PAULA MORALES, ISIDRO	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220645	12/14/12	000010	GUILDNET	FERRO, JOSEPHIN	70.00		1,058.40	I	
220646	12/14/12	000010	GUILDNET	FRANCIS, VICTOR	35.00		529.20	I	
220647	12/07/12	000010	GUILDNET	GARCIA, LUCILA	60.00		907.20	I	
220648	12/14/12	000010	GUILDNET	GARCIA, MARIA A	49.00		740.88	I	
220649	12/14/12	000010	GUILDNET	GOMEZ, YOLANDA	13.00		196.56	I	
220650	12/14/12	000010	GUILDNET	GONZALEZ MONTA	19.75		298.62	I	
220651	12/14/12	000010	GUILDNET	GONZALEZ, CARME	16.00		241.92	I	
220652	12/14/12	000010	GUILDNET	GONZALEZ, PABLO	35.00		529.20	I	
220653	12/14/12	000010	GUILDNET	GREAVES, BARBAR	12.00		181.44	I	
220654	12/14/12	000010	GUILDNET	GREENSPAN, ALIC	30.00		453.60	I	
220655	12/07/12	000010	GUILDNET	GUERRA, MAYRA	50.00		756.00	I	
220656	12/14/12	000010	GUILDNET	GUZMAN, ALICIA	16.00		241.92	I	
220657	12/07/12	000010	GUILDNET	GUZMAN, EDELMIR	55.00		831.60	I	
220658	12/14/12	000010	GUILDNET	HENLEY, LUVENIA	10.00		151.20	I	
220659	11/30/12	000010	GUILDNET	HENRIQUEZ, TERE	56.00		846.72	I	
220660	12/14/12	000010	GUILDNET	HERNANDEZ, LUZ	30.00		453.60	I	
220661	12/14/12	000010	GUILDNET	HICKS, SYLVIA	43.50		657.72	I	
220662	12/14/12	000010	GUILDNET	HUSTIU, SILVIA	2.00		30.24	I	
220663	12/14/12	000010	GUILDNET	IGLESIAS, JUANA	168.00		2,540.16	I	
220664	12/14/12	000010	GUILDNET	IRIZARRY, ESTRE	15.00		226.80	I	
220665	12/14/12	000010	GUILDNET	JACKSON, PATRIC	25.00		378.00	I	
220666	12/14/12	000010	GUILDNET	JIMENEZ, EUGENI	67.00		1,013.04	I	
220667	12/14/12	000010	GUILDNET	JOHNSON, DOROTH	54.75		827.82	I	
220668	12/14/12	000010	GUILDNET	JONES, LUCILLE	12.00		181.44	I	
220669	12/14/12	000010	GUILDNET	LANZILOTTA, ROS	28.00		423.36	I	
220670	12/14/12	000010	GUILDNET	LEMOINE, RICARD	28.00		423.36	I	
220671	12/14/12	000010	GUILDNET	LOPEZ, CARMEN	35.00		529.20	I	
220672	12/14/12	000010	GUILDNET	LORA, FERNANDO	38.00		574.56	I	
220673	12/14/12	000010	GUILDNET	LOZADA, RAMON	35.25		532.98	I	
220674	12/14/12	000010	GUILDNET	LUGO, DOLORES	12.00		181.44	I	
220675	12/14/12	000010	GUILDNET	LUIS, MAXIMINA	18.00		272.16	I	
220676	12/14/12	000010	GUILDNET	LUNA, ELDA	35.75		540.54	I	
220677	12/14/12	000010	GUILDNET	MANGRAY, KARMAD	32.00		483.84	I	
220678	12/07/12	000010	GUILDNET	MANTILLA, BEATR	32.00		483.84	I	
220679	12/14/12	000010	GUILDNET	MARIANI, MARIA	15.00		226.80	I	
220680	12/14/12	000010	GUILDNET	MARRERO, PHILLI	7.00		1,375.92	I	
220681	11/16/12	000010	GUILDNET	MARTIN, RUTH	8.00		1,572.48	I	
220682	12/14/12	000010	GUILDNET	MARTINEZ, EMMA	36.00		544.32	I	
220683	12/14/12	000010	GUILDNET	MARTINEZ, GLORI	25.00		378.00	I	
220684	12/14/12	000010	GUILDNET	MASSOL, PEDRO A	24.75		374.22	I	
220685	12/14/12	000010	GUILDNET	MATEO, RAFAEL	48.00		725.76	I	
220686	12/14/12	000010	GUILDNET	MCQUAIL, MAUREE	70.00		1,058.40	I	
220687	12/14/12	000010	GUILDNET	MICHEL, DOROTHY	56.00		846.72	I	
220688	12/14/12	000010	GUILDNET	MIMMS, GRACE T	35.00		529.20	I	
220689	12/14/12	000010	GUILDNET	MONCRIEF, LOIS	56.00		846.72	I	
220690	12/14/12	000010	GUILDNET	MONTALVO, VERON	5.00		75.60	I	
220691	12/14/12	000010	GUILDNET	MONTES, ADOLFO	42.00		635.04	I	
220692	12/14/12	000010	GUILDNET	MORA, PAULA	4.00		60.48	I	
220693	12/14/12	000010	GUILDNET	MORALES, ISIDRO	36.00		544.32	I	
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RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 289 SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET YMIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 12/21/12 CUST NO CUSTOMER NAME

REFERENCE

\*\*NORALES\*\*, MARGAR\*\*

20.00

302.40

000010 GUILDNET

MOSCICKA, JADWI 24.00

302.40

000010 GUILDNET

MOYA, MARINA

40.00

604.80

000010 GUILDNET

MOYA, MARINA

40.00

302.40

000010 GUILDNET

MOYA, MARINA

40.00

302.40

000010 GUILDNET

MOYA, MARINA

40.00

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000010 GUILDNET

MUSCAT. CARMEN

NEVAREZ, MARITA

27.00

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307.40

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455.2 REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 220694 12/14/12 302.40 I 220695 362.88 I 12/14/12 220696 12/14/12 220697 12/14/12 220698 12/14/12 220699 12/14/12 220700 12/14/12 220701 12/14/12 220702 11/30/12 220703 12/14/12 220704 12/07/12 220705 12/14/12 220706 12/07/12 220707 12/14/12 220708 12/07/12 220709 12/14/12

220710 12/14/12 220711 12/14/12 220712 12/14/12 220713 12/07/12 220714 12/14/12 220715 12/14/12 220716 12/07/12 220717 12/07/12 220718 12/14/12

12/14/12 220720 12/14/12 220721 12/14/12 220722 12/14/12 220723 12/14/12 220724 12/14/12 220725 12/14/12 220726 12/14/12 220727 12/07/12 220728 12/14/12 220729 12/14/12 220730 12/14/12 220731 12/07/12 220732 12/14/12 220733 12/14/12 11/02/12

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12/07/12

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12/14/12

12/14/12

220742 11/23/12 000010 GUILDNET

220719

220734 220735

220736

220737

220738

220739

220740

220741

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE PAGE 4 - 290 SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET YMIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 12/21/12 CUST NO CUSTOMER NAME

REFERENCE

RODRIGUEZ, JUAN

67.00

1.013.04

000010

GUILDNET

RODRIGUEZ, LIDI

40.00

GUILDNET

RODRIGUEZ, LIDI

40.00

GUILDNET

RODRIGUEZ, LIDI

40.00

GUILDNET

RODRIGUEZ, LIDI

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GUILDNET

RODRIGUEZ, SILV

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700010

GUILDNET

RODRIGUEZ, SILV

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GUILDNET

RODRIGUEZ, SILV

700010

GUILDNET

SANCHEZ, SAN AM

700010

GUILDNET

SANCHEZ, ELIZAB

700010

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SANCHEZ, ELIZAB

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GUILDNET

SANCHEZ, ELIZAB

700010

GUILDNET

SANCHEZ, ELIZAB

7000010

GUILDNET

SANCHEZ, ELIZAB

700010

GUILDNET

SANTIAGO, TUNTH

TORRANIA OO.

700010

GUILDNET

TORRANIA OO.

700010

TORRAN REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 220743 12/07/12 1,013.04 I 220744 12/07/12 604.80 I 272.16 I 220745 12/14/12 220746 12/07/12 220747 12/14/12 220748 12/14/12 220749 12/07/12 220750 12/14/12 220751 12/14/12 220752 12/14/12 220753 12/07/12 220754 12/14/12 220755 12/14/12 220756 12/14/12 220757 12/14/12 220758 12/14/12 220759 12/14/12 220760 12/14/12 220761 12/14/12 220762 12/14/12 220763 12/14/12 220764 12/14/12 220765 12/14/12 220766 12/07/12 220767 12/07/12 220768 12/14/12 220769 12/14/12 220770 12/14/12 220771 12/14/12 220772 12/14/12 220773 12/14/12 220774 11/16/12 220775 12/14/12 220776 12/14/12 220777 12/14/12 220778 12/14/12 220779 12/14/12 220780 12/14/12 11/23/12 220781 12/14/12 220782 12/14/12 220783 220784 12/14/12 12/14/12 220785 220786 12/14/12 220787 12/14/12

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220790

12/07/12

12/14/12

12/14/12

220791 12/14/12 000010 GUILDNET

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGIST	E R		PAGE 5 GUI GUILDNET BILL WEEK EN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
220792 12/14/12 220793 12/14/12	000010 000010	GUILDNET GUILDNET	ZARE, GLORIA ZUMAETA, FANNY	72.00 64.00		1,088.64 967.68	I I
			CUSTOMER	6,729.25	0.00	113,880.13	
			CATEGORY	6,729.25	0.00	113,880.13	

RUN DATE	E 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1	- 2	192
SALES JE	RNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	IRST	
				SALES REGISTER			BILL WEEK EN	DING	12/21/12
							2122 (1221 21		
INVOICE#		CIICT NO	CIICTOMED NAME	DEFEDENCE	TIULID C	ייז ע ז <b>א</b> יי	AMOUNT	TVD	SURPLUS
TIMACTOR+	+ DAIL	COSI NO	CUSTOMER NAME	REFERENCE	nouks	IAX AMI	AMOUNT	IIP	SURPLUS
000004	10/14/10	000100			00 00		400 64	_	
220794	12/14/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	Τ	
220795	12/14/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
220796	11/30/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	6.00		101.28	I	
220797	12/14/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
220798	12/14/12	000122	HEALTH FIRST	BOWERS *, DIANE	50.00		844.00	I	
220799	12/14/12	000122	HEALTH FIRST	CARMONA LUZ	40.00		675.20	Т	
220800	12/14/12	000122	HEALTH EIRST	CARRION MARIA	48 00		810 24	T	
220801	12/14/12	000122	UPALTH FIRST	CERALLOS ANA	40.00		675 20	T	
220802	11/02/12	000122	HEADIN FIRST	CEDALLOS, ANA	15.00		073.20	± +	
		000122	HEALIH FIRSI	CHARITAR, RAMKA	15.00		253.20	Τ	
220803	12/14/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	Τ.	
220804	12/14/12	000122	HEALTH FIRST	DELACRUZ, ANA	70.00		1,181.60	I	
220805	12/14/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	38.00		641.44	I	
220806	12/14/12	000122	HEALTH FIRST	ESTEVES, JOSE	36.00		607.68	I	
220807	12/07/12	000122	HEALTH FIRST	FERRERA, FRANCI	5.00		84.40	I	
220808	12/14/12	000122	HEALTH FIRST	FONTANES, PEDRO	45.00		759.60	I	
220809	11/23/12	000122	HEALTH FIRST	FRANCISCO RICH	56 00		945 28	T	
220810	12/14/12	000122	UENITH FIDOT	FDTAC BADBADA	12 00		202 56	т т	
220811	11/23/12	000122	HEVILD ELDOA	CARCIA I FONARD	9 00		125 04	<u>+</u>	
220811	10/26/12	000122	HEALTH FIRST	GARCIA, LEGNARD	0.00		135.04	± +	
		000122	HEALIH FIRSI	HENRY, BRENDA	8.00		135.04	Τ	
220813	12/14/12	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	Τ.	
220814	12/14/12	000122	HEALTH FIRST	LARA, TOMASA	48.00		810.24	I	
220815	12/14/12	000122	HEALTH FIRST	LAZALA, GLADYS	42.00		708.96	I	
220816	12/14/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	75.00		1,266.00	I	
220817	12/14/12	000122	HEALTH FIRST	MACARENA, SAHAR	84.00		1,417.92	I	
220818	12/07/12	000122	HEALTH FIRST	PALAZZOLO, FLOR	72.00		1,215,36	I	
220819	12/14/12	000122	HEALTH FIRST	RIVERA CHRISTO	21.00		354.48	Т	
220820	12/14/12	000122	HEALTH FIRST	RIVERA EDDIE	12 00		202 56	T	
220821	12/14/12	000122	UENITH FIDOT	PODPICIEZ MARC	20.00		337 60	т	
220821	12/14/12	000122	HEADIN PINCE	CALAZAD IIIZ MA	Z0.00		045 20	± +	
220822	12/14/12	000122	UPALIN LIKSI	SALAZAR, LUZ MA	40.00		945.20		
		000122	HEALTH FIRST	SALHUANA, YOLAN	40.00		6/5.20	Τ_	
220824	12/14/12	000122	HEALTH FIRST	SPIVEY, PATRICI	20.00		337.60	Τ	
220825	11/09/12	000122	HEALTH FIRST	ST ROMAINE, CLA	116.00		1,958.08	I	
220826	12/14/12	000122	HEALTH FIRST	SURIEL, GERTRUD	78.00		1,316.64	I	
220827	12/14/12	000122	HEALTH FIRST	VASQUEZ, OLGA	20.00		337.60	I	
220828	12/14/12	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	I	
				CUSTOMER	1,426.00	0.00	24,070.88		
				REFERENCE  BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN BOCHENEC, JOLAN BOCHENEC, JOLAN BOWERS *, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DELACRUZ, ANA ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA GARCIA, LEONARD HENRY, BRENDA KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR PALAZZOLO, FLOR RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VASQUEZ, OLGA VEGA, GLORIA  ——— CUSTOMER		0.00	24,070.88		
1									

RUN DATE	12/19/12 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE					PAGE 1	- 29	93
SALES JE	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG I	NY NY			NHP NEIGHBORE	HOOD I	HEALTH
			i	SALES	S REGISTER			BILL WEEK ENI	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
000000	10/14/10	000100	NTT GUD O DU O O D UT D D D	01117		56.00		0.45 0.0	-	
220829	12/14/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	AHMED, UMARA	56.00		945.28	I	
220830	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	AKHTER, SELINA	45.00		759.60	I	
220831	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
220832	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	DIAZ 1, CARMEN	28.00		472.64	I	
220833	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
220834	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	FLORES, MARITZA	69.00		1,164.72	I	
220835	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	HAMPTON, PRISCI	45.00		759.60	I	
220836	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	JONES, CYNTHIA	5.00		84.40	I	
220837	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	KHALIL, RASHAN	6.00		101.28	I	
220838	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	KHAN, FARUQUE	66.00		1,114.08	I	
220839	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	KROLL, KATHERIN	34.00		573.92	I	
220840	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	MORALES HERNAD	42.00		708.96	I	
220841	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	MOSKOWITZ, RONA	36.00		607.68	I	
220842	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	OCASIO, VIRGINI	30.00		506.40	I	
220843	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	RODRIGUEZ, JESS	25.00		422.00	I	
220844	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	RODRIGUEZ, MARI	30.00		506.40	I	
220845	11/16/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	SHEPPARD, ERMA	64.00		1,080.32	I	
220846	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	WELLS, WYNORIA	16.00		270.08	I	
220847	12/14/12	000120	NEIGHBORHOOD HEALTH PR	OVIDERS	WILSON, SHERYL	38.00		641.44	I	
					AHMED, UMARA AKHTER, SELINA CHUKWUJIORAH, T DIAZ 1, CARMEN FERNANDEZ, MARI FLORES, MARITZA HAMPTON, PRISCI JONES, CYNTHIA KHALIL, RASHAN KHAN, FARUQUE KROLL, KATHERIN MORALES HERNAD MOSKOWITZ, RONA OCASIO, VIRGINI RODRIGUEZ, JESS RODRIGUEZ, JESS RODRIGUEZ, MARI SHEPPARD, ERMA WELLS, WYNORIA WILSON, SHERYL  CUSTOMER	605.00		11 565 26		
					CUSTOMER	697.00	0.00	11,765.36		
					CATEGORY	697.00	0.00	11,765.36		

RUN DATE 12/19/12 SALES JRNL # 0312	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 294 FID NY CATHOLIC/FIDELIS BILL WEEK ENDING 12/21/12			
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
220848 12/14/12 220849 12/14/12 220850 12/14/12 220851 12/14/12 220852 12/14/12 220853 12/07/12 220854 12/14/12 220855 12/14/12 220856 12/14/12	000126 000126 000126 000126 000126 000126 000126 000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE BERGES, MARITZA GIL, ALICIA M ISKANDER, JACOU LITMAN, GAIL PANOS, DESPINA SAMOJEDNY, MICH SZE, BECKY VARGAS, RAOUEL	49.00 1.00 42.00 56.00 19.00 81.00 42.00 63.00		826.63 16.87 708.54 944.72 320.53 1,366.47 219.31 708.54 1,062.81	I I I I I		
220030 12/11/12	000120	NIS CAMODIC/TIDEDIS	CUSTOMER  CATEGORY	366.00 366.00	0.00	6,174.42			

RUN DATE 12/19/12 SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	?		PAGE 1 - 295 UHC UNITED HEALTH BILL WEEK ENDING 12/21	/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
220857 12/14/12 220858 12/07/12 220859 12/14/12 220860 11/23/12	000128 000128 000128 000128	UNITED HEALTH CARE UNITED HEALTH CARE UNITED HEALTH CARE UNITED HEALTH CARE	CALDERON, MIGDA KHAN, FAZAL MILLAN, ARMIDA SAFOS, PATRA	70.00 156.00 53.00 120.00		1,201.20 I 2,676.96 I 909.48 I 2,059.20 I	
			CUSTOMER	399.00	0.00	6,846.84	
			CATEGORY	399.00	0.00	6,846.84	

RUN DATE 12/	19/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	96
SALES JRNL #	0312 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM H	EALTH	
			SALES REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE# D.	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220861 12/	14/12 000114	EMBLEM HEALTH	CAMPBELL, CAROL	26.00		364.00	I	
220862 12/	14/12 000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
220863 12/	14/12 000114	EMBLEM HEALTH	COPELAND, ELISE	42.00		598.50	I	
220864 12/	14/12 000114	EMBLEM HEALTH	DE JESUS, TIBUR	84.00		1,197.00	I	
220865 12/	14/12 000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00	I	
220866 12/	14/12 000114	EMBLEM HEALTH	IANNAZZO, ANGEL	58.50		819.00	I	
	14/12 000114	EMBLEM HEALTH	JACKSON, FRANCE	42.00		588.00	I	
	14/12 000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,176.00	Ī	
	14/12 000114	EMBLEM HEALTH	WEATHERS, VERDE	70.25		983.50	T	
	14/12 000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00	T	
220070 227	11,12 000111							
			CUSTOMER	566.75	0.00	7,966.00		
			0001011211		0.00	.,,,,,,,,		
			CATEGORY	566.75	0.00	7,966.00		
1						,		

	12/19/12 JL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1 - HIP HEALTH INS BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220872 220873 220874 220875	11/16/12 12/14/12 12/14/12 12/14/12 12/14/12 12/14/12	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA ORR, LOUISE SHAH, HANSIKABE WILLIAMS, DIANE	16.00 20.00 30.00 30.00 5.00 20.00		270.08 337.60 506.40 506.40 84.40 337.60	I I I I I
				CUSTOMER	121.00	0.00	2,042.48	
				CATEGORY	 121.00	0.00	2,042.48	

			YSIDE CITYWIDE	DEC NV NV				- 2	
SALES UK	NL # U312	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			MPH METROPLUS BILL WEEK ENI		
							DIEL WEEK EN	51110	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
22227	10/07/10	000130	MEED ODI HO HEAT EN	ANDEDGON DEED	20.00		660 05	-	
220877	12/07/12	000130	METROPLUS HEALTH				668.85	I	
220878	12/14/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I	
220879	12/07/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	1.00		17.15	Τ.	
220880	12/14/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	Ι	
220881	11/02/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	8.00		137.20	I	
220882	11/02/12	000130	METROPLUS HEALTH	DOBBINS, SANDRA	108.00		1,852.20	I	
220883	12/14/12	000130	METROPLUS HEALTH	DOBBINS, SANDRA DURHAM, CYNTHIA	84.00		1,440.60	I	
220884	12/14/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	20.00		343.00	I	
220885	12/14/12	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
220886	12/07/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU			823.20	I	
220887	12/14/12	000130	METROPLUS HEALTH	OSORIO, ELVIA	40.00		686.00	I	
220888	12/07/12	000130	METROPLUS HEALTH	PERSAD, USHA			1,029.00	I	
220889	12/14/12	000130	METROPLUS HEALTH	PERSAD, USHA	22.00		377.30	I	
220890	12/14/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	19.00		325.85	I	
220891	12/14/12	000130	METROPLUS HEALTH	RYALS, CHARLES			686.00	I	
220892	11/30/12	000130	METROPLUS HEALTH	SANTORO, MATTHE			514.50	Ī	
220893	12/07/12	000130	METROPLUS HEALTH	VALLE, BLASINA			823.20	T	
220033	12/0//12	000130	HEIROT EOD HEIRETH						
				CUSTOMER	740.00	0.00	12,691.00		
				CATEGORY	740.00	0.00	12,691.00		

RUN DATE	E 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE					PAGE 1	- 2	99
SALES J	RNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			WEL WELCARE (	OF NY	
				SALE	S REGISTER			BILL WEEK ENI	DING	12/21/12
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220894	12/14/12	000124	WELCARE OF NEW YORK,	INC.	BATILO, MARTA	49.00		842.80	I	
220895	12/14/12	000124	WELCARE OF NEW YORK,	INC.	BISRAM, ROOPKAL	20.00		344.00	I	
220896	12/14/12	000124	WELCARE OF NEW YORK,	INC.	CABRERA, VINICI	35.00		602.00	I	
220897	12/14/12	000124	WELCARE OF NEW YORK,	INC.	CRUZ, LUIS	16.00		275.20	I	
220898	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GODINOT, CARMEN	30.00		516.00	I	
220899	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GOMEZ, RANNIE	8.00		137.60	I	
220900	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO *, MIR	49.00		842.80	I	
220901	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, FIRPO	72.00		1,238.40	I	
220902	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, ISABE	12.00		206.40	I	
220903	12/14/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, MARIA	56.00		963.20	I	
220904	12/14/12	000124	WELCARE OF NEW YORK,	INC.	HAYNES, LAMONT	26.00		447.20	I	
220905	12/14/12	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, MANUEL	72.00		1,238.40	I	
220906	12/14/12	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, VITALIA	60.00		1,032.00	I	
220907	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	36.00		619.20	I	
220908	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MEDINA, MARTHA	15.00		258.00	I	
220909	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MOHAMED, DENISE	40.00		688.00	I	
220910	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MORALES, FRANCI	35.00		602.00	I	
220911	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MORENO, BRUNILD	15.00		258.00	Ī	
220912	12/14/12	000124	WELCARE OF NEW YORK,	INC.	MULLER, ROBERT	16.00		275.20	I	
220913	12/14/12	000124	WELCARE OF NEW YORK.	INC.	NAVARRO, ANTONI	30.00		516.00	I	
220914	12/14/12	000124	WELCARE OF NEW YORK.	INC.	ORTIZ, DOLORES	46.00		791.20	Ī	
220915	12/14/12	000124	WELCARE OF NEW YORK.	INC.	ORTIZ, JOSE	12.00		206.40	Ī	
220916	12/14/12	000124	WELCARE OF NEW YORK.	INC.	PATRICK, IMAGEN	48.00		825.60	T	
220917	12/14/12	000124	WELCARE OF NEW YORK	INC.	PEREZ. JULIO	15.00		258.00	Ī	
220918	12/14/12	000124	WELCARE OF NEW YORK	INC	RAMIREZ ALIDA	45 00		774 00	T	
220919	12/14/12	000124	WELCARE OF NEW YORK	INC.	REGIA MARIA E	40 00		688 00	T	
220920	12/14/12	000121	WELCARE OF NEW YORK	INC.	RIVERA ALIDA	4 00		68 80	Ť	
220921	12/14/12	000124	WELCARE OF NEW YORK	INC.	RODRIGHEZ FRAN	36 00		619 20	T	
220922	12/14/12	000121	WELCARE OF NEW YORK	INC.	CEDDANO CARMEN	28 00		481 60	т	
220923	12/14/12	000124	WELCARE OF NEW YORK,	INC.	VENTURA CLARA	20.00		344 00	T	
220923	12/14/12	000124	WELLCARE OF NEW TORK,	TINC.	VENTORA, CLIARA			344.00		
					CUSTOMER	986.00	0.00	16,959.20		
			WELCARE OF NEW YORK,							
					CATECORY	 986 NN	0.00	16 959 20		
1					CATEGORI	200.00	0.00	10,000.20		

			YSIDE CITYWIDE	DEC MY	NTSZ			-	- 3t	00
SALES UK	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG NY SALES F	NY REGISTEI	<b>&gt;</b>		AMG AMERIGRO		12/21/12
				DALLO 1		.c		DILL WEEK EN	JING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REI	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
000004	10/05/10	000100				15.00		225 25	_	
220924	12/07/12	000132	AMERIGROUP	DENI	NISON, KELVI	17.00		286.96	Τ	
220925	12/14/12	000132	AMERIGROUP	FERI	NANDEZ, NORK	42.00		708.96	I	
220926	12/14/12	000132	AMERIGROUP	GUEF	RRA, LORRAIN	54.00		911.52	I	
220927	12/14/12	000132	AMERIGROUP	HARI	DING, EDNA	20.00		337.60	I	
220928	12/14/12	000132	AMERIGROUP	PRUI	ITT, JOHNNY	4.00		67.52	I	
220929	12/14/12	000132	AMERIGROUP	WALT	TERS, BYRON	25.00		422.00	I	
220930	12/14/12	000132	AMERIGROUP	YOUY	NG, KALEILE	18.00		303.84	I	
					CUSTOMER	180.00	0.00	3,038.40		
					CATEGORY	180.00	0.00	3,038.40		

RUN DATE 12/19/12 - SALES JRNL # 0312		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 HCP HEALTHCA BILL WEEK EN		RTNERS
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220931 12/14/12 220932 12/14/12	000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA TOWLES, ADA	54.00 16.00		911.52 270.08	I	
			CUSTOMER	70.00	0.00	1,181.60		
			CATEGORY	70.00	0.00	1,181.60		

RUN DATE 12/19/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 3	02
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWID	E REG	NY NY			ICS INDEPEND	ENCE	CARE SYSTEMS
			SALE	S REGISTER			BILL WEEK EN	DING	12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220933 12/14/12	000172	INDEPENDENCE CARE	SYSTEMS	AGOSTINI, MONSE	24.00		381.60	I	
220934 12/14/12	000172	INDEPENDENCE CARE	SYSTEMS	JONES, VALERIE	20.00		318.00	I	
220935 12/14/12	000172	INDEPENDENCE CARE	SYSTEMS	MUSHAYEV, BORIS	20.00		318.00	I	
							1 015 60		
				CUSTOMER	64.00	0.00	1,017.60		
				CATEGORY	64.00	0.00	1,017.60		

RUN DATE 12/19/12	- SUP SUNI	NYSIDE CITYWIDE					PAGE 1 -	303
SALES JRNL # 0312	LOC 001	SUNNYSIDE CITYWIDE	REG N	Y NY			VCS VNSNY CHOIC	CE SELECTHEALTH
			SALES	REGISTER			BILL WEEK ENDI	NG 12/21/12
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
220936 12/14/12	000170	VNSNY CHOICE SELECT	HEALTH I	KARASSAVIDES, A	35.00		600.60	I
				CATEGORY	35.00	0.00	600.60	

			YSIDE CITYWIDE	NTSZ NTSZ				- 3	04
SALES URI	NL # 0312	LOC 001	SUNNYSIDE CITYWIDE REG S A L E				PAR PRIVATE BILL WEEK EN	DING	12/21/12
									,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220937	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	ANGEL, LUCY	7.75		112.38	I	
	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	ESCOBAR, MARIA			116.00	Ī	
	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	HERNANDEZ, REGI	8.00		116.00	I	
220940	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	RICKS, WALTER	4.00		58.00	I	
	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	RIZZO, SALVATOR	20.00		290.00	I	
	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	VALDERRATEN, MA	5.00		72.50	I	
220943	12/14/12	000002	SUNNYSIDE COMMUNITY SERVICES	VARELAS, ANNA	8.00		116.00	I	
				CUSTOMER	60.75	0.00	880.88		
220944	12/14/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I	
	12/14/12	000049	DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE	12.00		174.00	I	
220946	12/14/12	000049	DOMINICAN SISTERS FAM HLTH	MORSHELINA, NAS	14.25		206.63	I	
				CUSTOMER	26.25	0.00	380.63		
220947	12/14/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	115.00	0.00	1,695.51		

RUN DATE 12/19/12 - SALES JRNL # 0312		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - CAS CHILDREN'S A BILL WEEK ENDING	ID SOCIETY
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
220948 12/14/12 220949 12/14/12 220950 12/14/12 220951 12/14/12	000088 000088 000088 000088	CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY	DUNNE, MYEISHA SALAS, HELENA VARGAS, BRANDON VARGAS, JOHN	20.00 27.75 13.50 13.50		310.00 I 430.13 I 209.25 I 209.25 I	
			CUSTOMER	74.75	0.00	1,158.63	
			CATEGORY	74.75	0.00	1,158.63	

RUN DATE 12/19/12 - SALES JRNL # 0312	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 306 PAR PRIVATE BILL WEEK ENDING 12/21/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
220952 12/14/12	000098 MILDRED PANSE	PANSE, MILDRED	17.50	271.25 I
		 CATEGORY	17.50 0.00	271.25

RUN DATE 12/19/12 - SALES JRNL # 0312	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVE BILL WEEK ENDI	HEALTH
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
220953 12/14/12 220954 12/14/12	000101 ELDERSERVEHEALTH 000101 ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	15.00 20.00		213.75 285.00	I I
		CUSTOMER	35.00	0.00	498.75	
		CATEGORY	35.00	0.00	498.75	

	12/19/12 NL # 0312	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	_				PAGE 1 CCM COMPREHE	- 30	
				SALE	S REGISTE	R		BILL WEEK EN	DING	12/21/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220955	12/07/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	BONES, ANA	20.00		282.00	I	
220956	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	BONES, ANA	20.00		282.00	I	
220957	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	GARCIA, MARIA	32.00		451.20	I	
220958	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	MELAMED, ESTER	12.00		169.20	I	
220959	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	MERCADO, JULIA	28.00		394.80	I	
220960	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	PULLIAM, WILLIE	17.75		250.28	I	
220961	12/14/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	ROSARIO, CELEST	30.00		423.00	I	
220962	12/07/12	000150	COMPREHENSIVE CARE I	MANAGEMENT	RUDA, EDWIN	4.00		56.40	Ι	
					CUSTOMER	163.75	0.00	2,308.88		
					CATEGORY	 163.75	0.00	2,308.88		

RUN DATE 12/19 SALES JRNL # 0	/12 - SUP SUNNYS 312 LOC 001		G NY NY ES REGISTER			PAGE 1 - PAR PRIVATE BILL WEEK END	- 309 ING 12/21/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS
220963 12/14	/12 000155 I	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I
220964 12/14	/12 000179 I	DOROTHY TABICKMAN	TABICKMAN, DORT	8.00		124.00	I
220965 12/14	/12 000183 8	STEPHEN EDEL	EDEL, CANDACE	81.00		1,279.50	I
			CATEGORY	 257.00	0.00	4,079.50	

RUN DATE 12/19/12 - SALES JRNL # 0312			REG S A L E				PAGE 1 HHH HHH HOME BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220966 11/09/12 220967 12/14/12	000192 000192	HHH LONG TERM HOME H		TOVAR, ELENA TOVAR, ELENA	8.00 40.00		120.00 600.00	I	
				CUSTOMER	48.00	0.00	720.00		
				CATEGORY	48.00	0.00	720.00		

	12/19/12 PNL # 0312	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E I	R		PAGE 1 PAR PRIVATE BILL WEEK EN	- 3	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
220968	12/14/12	000197	KLEA THEOHARIS	THEOHARIS, ARIS	18.00		279.00	I	
220969 220970 220971	11/30/12 12/07/12 12/14/12	000201 000201 000201	DIANE CERVONE DIANE CERVONE DIANE CERVONE	ESPINOZA, LUPE ESPINOZA, LUPE ESPINOZA, LUPE	15.00 26.00 4.00		232.50 403.00 62.00	I I I	
				CUSTOMER	45.00	0.00	697.50		
220972	12/14/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
220973	12/14/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
220974	12/14/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00		337.50	I	
220975	12/14/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
220976	12/14/12	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
220977	12/14/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	4.00		62.00	I	
220978	12/14/12	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I	
220979	12/14/12	010529	STEPHEN WEISS	WEISS, STELLA	6.00		102.00	I	
220980	12/14/12	010530	DANA SITILDES	ANSELMI, PETER	20.00		316.00	I	
220981	12/14/12	011016	MICHAEL SIANO	SIANO, ANDREW	30.00		405.00	I	
220982	12/14/12	011060	ROBIN WARREN CHARLES	WARREN, CYNTHIA	133.00		2,118.50	I	
220983	12/07/12	011394	HELGA JENSEN	JENSEN, HELGA	50.00		775.00	I	
220984 220985	12/07/12 12/14/12	011630 011630	JAMES BENZ JAMES BENZ	CAGAN, RUMANDO CAGAN, RUMANDO	3.00		46.50 124.00	I	
				CUSTOMER	11.00	0.00	170.50		
220986	12/14/12	012165	UNA MCCULLAGH	MCCULLAGH, UNA	9.00		139.50	I	
				CATEGORY	433.00	0.00	6,730.50		
				LOCATION	29,334.50	0.00	465,453.11		
					29,334.50		465,453.11		

RUN DATE 12/19/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 312
SALES JRNL # 0312 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 12/21/12

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

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