RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 5/25/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS CUSTOMER NAME

SENIOR HEALTH PARTNERS
HARIDIN, RAMDIA
SENIOR HEALTH PARTNERS
SIERRA, MIRIAM
SENIOR HEALTH PARTNERS
VASQUEZ, CORNEL
SENIOR HEALTH PARTNERS
VASQUEZ, CORNEL
SENIOR HEALTH PARTNERS
SENIOR HEALTH PARTNERS 195346 5/18/12 000082 57.00 I 195347 5/18/12 000082 57.00 I 171.00 I 195348 5/18/12 000082 195349 5/18/12 000082 498.75 195350 5/18/12 000082 470.25 195351 228.00 5/18/12 000082 195352 5/18/12 000082 57.00 195353 5/18/12 000082 110.44 195354 5/18/12 000082 57.00 456.00 195355 5/18/12 000082 1,400.00 195356 5/18/12 000082 195357 5/18/12 000082 57.00 195358 5/18/12 000082 470.25 195359 2/10/12 000082 157.20 195360 5/18/12 000082 1,923.75 195361 5/18/12 498.75 000082 195362 5/18/12 85.50 000082 195363 5/18/12 000082 1,083.00 195364 285.00 5/18/12 000082 195365 5/18/12 000082 285.00 195366 5/18/12 000082 114.00 195367 5/04/12 000082 684.00 195368 5/18/12 000082 114.00 195369 5/18/12 000082 342.00 195370 5/18/12 000082 171.00 195371 5/18/12 000082 57.00 I \_\_\_\_\_ -----CUSTOMER 603.75 0.00 9,889.89

CATEGORY 603.75 0.00

9,889.89

			YSIDE CITYWIDE				PAGE 1	-	2
SALES JRN	IL # 0282	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE L BILL WEEK EN		5/25/12
				OALES KEGISIEK			DILL MEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195372 195373	5/18/12 5/18/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ABINANTI, IRENE ABREU, ANA	55.50 12.00		809.19 174.96	I	
155575	3/10/12	000000	VIBILING NORDE BERVICE						
				CUSTOMER	67.50	0.00	984.15		
				CATEGORY	67.50	0.00	984.15		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	3
			5	SALES REGISTER			BILL WEEK ENDI	NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195374	5/18/12	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	8.00		116.64	I
				CATEGORY	8.00	0.00	116.64	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	4
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195375	5/18/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
195376	5/18/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
195377	5/18/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	69.75		1,016.96	I	
				CUSTOMER	129.75	0.00	1,891.76		
				CATEGORY	129.75	0.00	1,891.76		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ONL	Y
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195378	5/18/12	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	55.75		812.84 I	
				CATEGORY	55.75	0.00	812.84	

RUN DATE SALES JRN		LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	6 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195379	5/18/12	800000	VISITING NURSE SERVICE	AFZAL, AMIR	2.75		40.10 I	
				CATEGORY	2.75	0.00	40.10	

	05/23/12 - L # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	7
INVOICE#	DATE	CUST NO	CUSTOMER NAME	ALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	-, -,
195380	5/18/12	000008	VISITING NURSE SERVICE	AGUILAR, RAFAEL	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	8
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195381	5/18/12	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		656.10	I	
				CATEGORY	45.00	0.00	656.10		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	9
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
			:	SALES REGISTE:	R		BILL WEEK ENI	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195382	5/18/12	000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	42.00		612.36	I	
195383	5/18/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60	I	
				CUSTOMER	62.00	0.00	903.96		
				CODIONER	02.00	0.00	203.20		
				CATEGORY	62.00	0.00	903.96		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	.0
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195384	5/11/12	000008	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
195385	5/18/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	30.00		437.40	I	
				CUSTOMER	35.00	0.00	510.30		
				CATEGORY	35.00	0.00	510.30		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	
DALLO OIGN	1 H 0202	100 001		SALES REGISTER			BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195386 195387	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	30.00		437.40 14.58	I I
				CUSTOMER	31.00	0.00	451.98	
				CATEGORY	31.00	0.00	451.98	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	12 T
DIEDO OIGN	L    0202	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195388	5/18/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	30.75		448.34 I	
				CATEGORY	30.75	0.00	448.34	

RUN DATE 0		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	3
SALES UNIL	1 # 0202	TOC 001		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	5/18/12 5/18/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	56.00 12.00		816.48 I 174.96 I	
193390	3/10/12	000008	VISITING NORSE SERVICE					
				CUSTOMER	68.00	0.00	991.44	
				CATEGORY	68.00	0.00	991.44	

RUN DATE 05/23/12	- SUP SUN	YSIDE CITYWIDE				PAGE 1	- 14	
SALES JRNL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT	
			SALES REGISTE	R		BILL WEEK ENI	DING 5/25/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
195391 5/18/12	000008	VISITING NURSE SERVICE	ANGULO, ELCY	20.00		291.60	I	
195392 5/18/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	61.00		889.38	I	
			CUSTOMER	81.00	0.00	1,180.98		
			CATECODY	91 00	0.00	1 100 00		
			 CATEGORY	81.00	0.00	1,180.98		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	15
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195393	5/18/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195394	5/18/12	800000	VISITING NURSE SERVICE	APPELL, LAWRENC	17.00		247.86 I	
				CATEGORY	17.00	0.00	247.86	

RUN DATE 0		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 1	.7
SALES UNIL	# 0202	100 001		SALES REGISTER			BILL WEEK ENI		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		30.00 45.75		437.40 667.04	I I	
				CUSTOMER	75.75	0.00	1,104.44		
				CATEGORY	75.75	0.00	1,104.44		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 18
SALES OWN	11 # 0202	100 001		SALES REGISTER			BILL WEEK END	DING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195397 195398	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		23.00 12.00		335.34 174.96	I I
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - : LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195399	5/18/12	800000	VISITING NURSE SERVICE	ASHLEY, CLYDE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

	05/23/12 - IL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 20 VCP CHOICE LHCSA	25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		RPLUS
195400	5/18/12	000008	VISITING NURSE SERVICE	AVILA, ENIDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	556 M. M.			PAGE 1 - 21	
SALES JRI	NL # U282	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW/O BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195401	5/18/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	DEC NV NV			11100	- 22	
SALES JRNI	ь # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH BILL WEEK END		12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPL	US
195402 195403	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	7.75 7.00		113.00 102.06	I I	
				CUSTOMER	14.75	0.00	215.06		
				CATEGORY	14.75	0.00	215.06		

			YSIDE CITYWIDE				PAGE 1	20
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK END	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195404	5/18/12	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	25.00		364.50	I
195405	5/18/12	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	56.00		816.48	I
195406	5/18/12	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	45.00		656.10	I
195407	5/11/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	14.00		204.12	I
195408	5/18/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	50.00		729.00	I
				CUSTOMER	190.00	0.00	2,770.20	
				CATEGORY	190.00	0.00	2,770.20	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 HOA HOSPICE ADULT	24
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195409	5/18/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	25
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195410	5/18/12	000008	VISITING NURSE SERVICE	BELLOROFONTE, M	150.75		2,197.94	I	
195411	5/18/12	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	6.00		87.48	I	
				CUSTOMER	156.75	0.00	2,285.42		
				CATEGORY	 156.75	0.00	2,285.42		

RUN DATE 05/23/1			DDG NV NV			PAGE 1 - 26	
SALES JRNL # 028	2 LOC 001		REG NY NY SALES REGISTER			LTC NURSING HOMEW/C BILL WEEK ENDING	5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195412 5/18/1 195413 5/18/1		VISITING NURSE SERVICE VISITING NURSE SERVICE	·	24.00 30.00		349.92 I 437.40 I	
			CUSTOMER	54.00	0.00	787.32	
			CATEGORY	54.00	0.00	 787.32	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	27
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			i	SALES REGISTER			BILL WEEK ENDI	NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195414	5/18/12	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	47.75		696.20	I
				CATEGORY	47.75	0.00	696.20	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	28
DALLS OIL	1 # 0202	100 001		LES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195415	5/18/12	000008	VISITING NURSE SERVICE	BIANCO HOPKINS,	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	29
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	· ·
					SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195416	5/18/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
					CATEGORY	40.00	0.00	 583.20	
1					CATHOORT	10.00	0.00	303.20	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	30
ı	SALES JRN	L # 0282	LOC 001		REG NY NY			VCP CHOICE LHCSA	
ı				2	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195417	5/18/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	22.00		320.76 I	
					CATEGORY	22.00	0.00	320.76	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 31 ADU ADULT	
SALES OWN	L # 0202	HOC 001		SALES REGISTER				5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195418 195419	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 42.00		291.60 I 612.36 I	
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

- 1				YSIDE CITYWIDE				PAGE 1 -		32
	SALES JRN	L # 0282	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHO		5/25/12
				5	ALES REGISIER			PILL MEEK ENDI	JNG	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	ΥP	SURPLUS
	195420	5/18/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60	I	
					CATEGORY	20.00	0.00	291.60		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33
SALES JRN	IL # 0282	LOC 001		REG NY NY			LTC NURSING HOME	•
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIL	CUSI NO	COSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT TIP	SURPLUS
195421	5/18/12	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
	-,,			,,				
				CATEGORY	25.00	0.00	364.50	

RUN DATE 0			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3 AUR ADULT REHAB ON	34 VLY
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195422	5/18/12	800000	VISITING NURSE SERVICE	BORSARI, ANTOIN	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35
SALES JRN	L # 0282	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195423	5/18/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195424	5/18/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	29.00		422.82 I	
				CATEGORY	29.00	0.00	422.82	

			YSIDE CITYWIDE					37
SALES JRN	IL # 0282	LOC 001		REG NY NY			VCP CHOICE LHCS	
			S	ALES REGISTER			BILL WEEK ENDING	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195425	5/18/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	63.00		918.54 I	
				CATEGORY	63.00	0.00	918.54	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	38
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195426	5/18/12	000008	VISITING NURSE SERVICE	BROWN, BETTY	15.00		218.70 I	
ı					CATEGORY	15.00	0.00	218.70	

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	39	
SALES JRI	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA	
			5	SALES REGISTER			BILL WEEK ENDIN	IG 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
195427	5/18/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		131.22		
				CATEGORY	9.00	0.00	131.22		

RUN DATE (	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 40
SALES JRNI	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
105400	F /10 /10	000000		DITTUG WAR GAREE	40.00		600 04 7
195428	5/18/12	000008	VISITING NURSE SERVICE	BURNS, MARGARET	48.00		699.84 I
				CATEGORY	48.00	0.00	699.84
				CALEGORI	40.00	0.00	0,0,0,0

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LAD NURSING HO		O WALLS LT
				SALES REGISTER			BILL WEEK END		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP	SURPLUS
195429	5/18/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE (		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 VCP CHOICE LH		42
			i	S A L E S R	EGIST	E R		BILL WEEK END	ING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195430	5/18/12	800000	VISITING NURSE SERVICE	CABA,	PURA	10.00		145.80	I	
					CARRODA			145.00		
					CATEGORY	10.00	0.00	145.80		

RUN DATE SALES JRN				REG NY NY			ADU ADULT	43
INVOICE#	DATE	CUST NO		S A L E S R E G I S T E R  REFERENCE	HOURS	TAX AMT	BILL WEEK ENDIN	, -,
195431	5/18/12	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	69.75		1,016.96 I	
				 CATEGORY	69.75	0.00	1,016.96	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 44
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA
				SALES REGISTER			BILL WEEK ENI	DING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195432	5/18/12	800000	VISITING NURSE SERVICE	CALDERON, FRANC	38.00		554.04	I
195433	5/18/12	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	30.00		437.40	I
						0.00	001 44	
				CUSTOMER	68.00	0.00	991.44	
				CATEGORY	68.00	0.00	991.44	

			TYSIDE CITYWIDE					45
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195434	5/18/12	000008	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54	<u>.</u>
				CATEGORY	63.00	0.00	918.54	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195435	5/18/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	54.00		787.32 I	
				CATEGORY	54.00	0.00	787.32	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	47 5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195436	5/18/12	800000	VISITING NURSE SERVICE	CANDIDO, ELENA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	48
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195437	5/18/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	49
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195438	5/18/12	800000	VISITING NURSE SERVICE	CANO, GLORIA	15.00		218.70 I	
					15.00			
1				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	50
SALES JRN	L # 0282	LOC 001		REG NY NY			VCP CHOICE LHCS	
			2	SALES REGISTER			BILL WEEK ENDING	5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
195439	5/18/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	83.00		1,210.14 I	
				CATEGORY	83.00	0.00	1,210.14	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195440	5/18/12	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	31.00		451.98 I	
				CATEGORY	31.00	0.00		

			YSIDE CITYWIDE				PAGE 1	_	52
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTER			BILL WEEK END	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195441	5/18/12	000008	VISITING NURSE SERVICE	CARDONA, MARIA	33.50		488.44	I	
195442	5/18/12	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	53.75		783.68	I	
195443	4/13/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	12.00		174.96	I	
195444	5/18/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	25.50		371.79	I	
195445	5/18/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	19.75		287.96	I	
				CUSTOMER	144.50	0.00	2,106.83		
				CATEGORY	144.50	0.00	2,106.83		

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - HOA HOSPICE ADU BILL WEEK ENDIN	LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195446	5/18/12	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195447	5/18/12	800000	VISITING NURSE SERVICE	CARRENO, CRISTI	3.75		54.68 I	
				CATEGORY	3.75	0.00	54.68	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	55
SALES JR	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
			S A	ALES REGISTER			BILL WEEK ENDING	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
195448	5/18/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	54.75		798.26 I	
				CATEGORY	 54.75	0.00	798.26	

RUN DATE (		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	56
SALES OIGN	L # 0202	100 001		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195449	5/18/12	800000	VISITING NURSE SERVICE	CASTANO, MARIA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	57
SALES JRN	IL # 0282	LOC 001		REG NY NY			VCP CHOICE LHCS	
			\$	SALES REGISTER			BILL WEEK ENDIN	NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
195450	5/18/12	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60	I
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	30
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195451	5/18/12	800000	VISITING NURSE SERVICE	CELIO, MARION	9.00		131.22	I
				CATEGORY	9.00	0.00	131.22	

RUN	DATE (	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SAL	ES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
				S	SALES REGISTEF	}		BILL WEEK ENDI	NG 5/25/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195	452	5/18/12	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	20.75		302.54	Γ
					CATEGORY	 20.75	0.00	302.54	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	60
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195453	5/18/12	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	61
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	L
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
105454	E /10 /10				0.4.00		240.00	
195454	5/18/12	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	24.00		349.92 I	
				CAREGODY	24 00	0.00	340.03	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195455	5/18/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				11102	- 6	53
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		E / 0 E / 1 0
			•	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195456	5/11/12	000008	VISITING NURSE SERVICE	· ·	20.00		291.60	I	
195457	5/18/12	000008	VISITING NURSE SERVICE	CHAUCA, PEDRO	66.00		962.28	Τ	
				CUSTOMER	86.00	0.00	1,253.88		
				***************************************			_,		
				CATEGORY	86.00	0.00	1,253.88		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT	
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS	
195458	5/18/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	34.75		506.66 I		
				CATEGORY	34.75	0.00	506.66		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	65
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195459	5/18/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	66
SALES JRN	IL # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW	•
			2	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195460	5/18/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	29.25		426.47 I	
				CATEGORY	29.25	0.00	426.47	

			YSIDE CITYWIDE						67
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	5		VCP CHOICE L BILL WEEK EN		5/25/12
			•	SALES KEGISIEI	X.		DIDD WEEK EN	DING	3/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195461	5/18/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	55.50		809.19	I	
195462	5/18/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
195463	5/18/12	000008	VISITING NURSE SERVICE	CHUCK, ENA	31.50		459.27	I	
				CUSTOMER	127.00	0.00	1,851.66		
				CATEGORY	127.00	0.00	1,851.66		
				CATEGORI	127.00	0.00	1,031.00		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	68
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195464	5/18/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	51.75		754.52 I	
				CATEGORY	51.75	0.00	754.52	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	69 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195465	5/18/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
				 CATEGORY	6.00	0.00	87.48	

RUN DATE 05/23/1 SALES JRNL # 028		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195466 5/18/1 195467 5/18/1 195468 5/18/1 195469 5/18/1	2 000008 2 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	COLLER, JOSE COLON, ANTONIA	20.00 15.00 36.00 18.00		291.60 I 218.70 I 524.88 I 262.44 I	
			CUSTOMER	89.00	0.00	1,297.62	
			CATEGORY	89.00	0.00	1,297.62	

			YSIDE CITYWIDE				PAGE 1 - 71	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PR	
			2	SALES REGISTER			BILL WEEK ENDING 5/2	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
195470	5/18/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				CATEGORY	168.00	0.00	2,449.44	

			YSIDE CITYWIDE					72
SALES JRN	IL # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
105451	E /10 /10				04.00		242.22	
195471	5/18/12	000008	VISITING NURSE SERVICE	CORREA, MARGARI	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73
SALES JRN	IL # 0282	LOC 001		REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	IG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195472	5/18/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 7 LTC NURSING HOMEW/	
				SALES REGISTE	3		BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195473 195474	5/11/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 21.50		87.48 I 313.48 I	
155474	3/10/12	000000	VISITING NORSE SERVICE	·				
				CUSTOMER	27.50	0.00	400.96	
				CATEGORY	27.50	0.00	400.96	

			YSIDE CITYWIDE				PAGE 1 - 7	5
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
								-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195475	5/18/12	000008	VISITING NURSE SERVICE		7.75		113.00 I	
195476	5/18/12	000008	VISITING NURSE SERVICE	COVALIU, SIMION	34.00		495.73 I	
				CUSTOMER	41.75	0.00	608.73	
				CATEGORY	41.75	0.00	608.73	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRN	L # 0282	LOC 001		REG NY NY			HOA HOSPICE ADUL	
			\$	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195477	5/18/12	800000	VISITING NURSE SERVICE	COX, PETRA	19.00		277.02 I	
				CATEGORY	19.00	0.00	277.02	

			YSIDE CITYWIDE				-	77
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	F / OF / 1 O
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195478	5/18/12	800000	VISITING NURSE SERVICE	COZZOLINO, MARG	7.00		102.06 I	
195479	5/18/12	800000	VISITING NURSE SERVICE	CROUSE, MARIA	6.00		87.48 I	
				CUSTOMER	13.00	0.00	189.54	
				CATEGORY	13.00	0.00	189.54	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	78
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195480	5/18/12	800000	VISITING NURSE SERVICE	CRUZ, HECTOR	36.50		532.18 I	
				CATEGORY	36.50	0.00	 532.18	

_	,	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	
SALES JRN	L # U282	TOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195481	5/18/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	19.50		284.32 I	
				CATEGORY	19.50	0.00	284.32	

RUN DATE 05/23/3 SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER				- 80 HOMEW/O WALLS (LT DING 5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195482 5/18/2 195483 5/18/2		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	25.00 56.00		364.50 816.48	I I
			CUSTOMER	81.00	0.00	1,180.98	
			CATEGORY	81.00	0.00	1,180.98	

			YSIDE CITYWIDE					81
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/25/12
							DIEL WEEK ENDING	3/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195484 195485	5/04/12 5/18/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	6.00 42.00		87.48 I 612.36 I	
				CUSTOMER	48.00	0.00	699.84	
				CATEGORY	48.00	0.00		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	82 5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195486	5/18/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI	HOMEW/	33 O WALLS (LT 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195487 195488 195489	5/18/12 5/18/12 5/18/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DEL CARPIO, FEL DELACRUZ, SEFER DELAROSA, CORAL	32.00 38.00 9.75		466.56 554.04 142.16	I I I	
				CUSTOMER	79.75	0.00	1,162.76		
				CATEGORY	79.75	0.00	1,162.76		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC NV NV			PAGE 1 -	84
SALES JRN	L # UZOZ	TOC 001	SOMMISIDE CITIMIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCS	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195490	5/18/12	000008	VISITING NURSE SERVIC	E DELOSSANTOS, MA	30.00		437.40 I	
195491	5/11/12	800000	VISITING NURSE SERVICE	E DELPOZO, MIGUEL	4.00		58.32 I	
195492	5/18/12	000008	VISITING NURSE SERVICE	E DELPOZO, MIGUEL	28.00		408.24 I	
195493	5/18/12	000008	VISITING NURSE SERVIC	E DELUCA, ANTIONE	28.00		408.24 I	
				CUSTOMER	90.00	0.00	1,312.20	
				CATEGORY	90.00	0.00	1,312.20	

			NYSIDE CITYWIDE					85
SALES JR	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
			2	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195494	5/18/12	000008	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		86
511225 0141	.2    0202	200 001		SALES REGISTE	R		BILL WEEK EN		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195495	5/18/12	000008	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I	
195496	5/18/12	000008	VISITING NURSE SERVICE	DEZUMARAN, REBE	35.25		513.96	I	
195497	5/18/12	800000	VISITING NURSE SERVICE	DIAZ, MARIA	34.75		506.66	I	
195498	5/18/12	800000	VISITING NURSE SERVICE	DIAZ, OLGA	37.00		539.46	I	
195499	5/18/12	800000	VISITING NURSE SERVICE	DIAZ, ROSA	18.00		262.44	I	
				CUSTOMER	128.00	0.00	1,866.26		
				CATEGORY	128.00	0.00	1,866.26		

	05/23/12 - IL # 0282			REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	87 G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
195500	5/18/12	800000	VISITING NURSE SERVICE	DIAZ, ROSA	12.50		182.25 I	
				CATEGORY	12.50	0.00	182.25	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	R		PAGE 1 VCP CHOICE LI BILL WEEK EN	HCSA	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195501 195502 195503	5/18/12 5/18/12 5/18/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DILLUVIO, MATTI DOMINGUEZ, MARI DOMINGUEZ-REIN,	70.00 30.00 20.00		1,020.60 437.40 291.60	I I I	
				CUSTOMER	120.00	0.00	1,749.60		
				CATEGORY	120.00	0.00	1,749.60		

RUN DATE 0	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	39
SALES JRNI	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195504	5/18/12	800000	VISITING NURSE SERVICE	DOMINICK, GINA	7.00		102.06	I	
195505	5/18/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	40.00		583.20	I	
				CUSTOMER	47.00	0.00	685.26		
				CATEGORY	47.00	0.00	685.26		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	90
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195506	5/18/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	91 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195507	5/18/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	15.50		225.99 I	
				CATEGORY	15.50	0.00	225.99	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	92
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	<del>J</del>
				SALES REGISTER			BILL WEEK ENDING	5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195508	5/18/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	93
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
195509	5/18/12	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 94	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195510	5/18/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	95
				ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195511	5/18/12	800000	VISITING NURSE SERVICE	ESPIN, CESAR	51.00		743.58 I	
				CATEGORY	51.00	0.00	743.58	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 9 VCP CHOICE LHCSA	96
SALES URN	L # UZ6Z	LOC UUI		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195512 195513	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	9.00 21.00		131.22 I 306.18 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 05/2 SALES JRNL #		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	97
Bridde Grave II	0202 200 001		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	8/12 000008 8/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• -	71.50 10.00		1,042.47 I 145.80 I	
			CUSTOMER	81.50	0.00	1,188.27	
			CATEGORY	81.50	0.00	1,188.27	

	05/23/12 - NL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	5/25/12 SURPLUS
195516	5/18/12	000008	VISITING NURSE SERVICE		17.75	IAX AMI	258.80 I	SURPLUS
193310	3/10/12	000000	VISITING NORSE SERVICE	FARO, UOSEFII				
				CATEGORY	17.75	0.00	258.80	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	99
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195517	5/18/12	800000	VISITING NURSE SERVICE	FAY, JULIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195518	5/18/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	101
	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195519	5/18/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
					CATEGORY	15.00	0.00	218.70	

RUN DATE (	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 102	
SALES JRNI	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 5/25	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
195520	5/18/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 103	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			\$	SALES REGISTER			BILL WEEK ENDING 5	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
195521	5/18/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN	1	SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	EW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195522	5/18/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	46.00		670.68 I	
				 CATEGORY	46.00	0.00	670.68	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	05
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195523	5/18/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 0 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	5/18/12 5/18/12	000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN FONG, ALEFINA	35.00 3.00		510.30 I	[ F
	5/18/12	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		510.30	
				CUSTOMER	73.00	0.00	1,064.34	
				CATEGORY	73.00	0.00	1,064.34	

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 - 10	07
SALES JRN	⊥ # ∪282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
						11111 11111		DOILI EOD
195527	5/18/12	000008	VISITING NURSE SERVICE	FRADELAKIS, EVA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE				PAGE 1 - 10	
SALES JRI	NL # 0282	LOC 001		REG NY NY	_		LTC NURSING HOMEW/	,
			2	SALES REGISTER	3		BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195528	5/18/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	109
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
			S	BALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195529	5/18/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	27.75		404.60 I	
				CATEGORY	27.75	0.00		

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	10
١	SALES JRN	L # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW	•
ı				2	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195530	5/18/12	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	45.75		667.04 I	
					CATEGORY	45.75	0.00	 667.04	
- 1					CATEGORI	13.75	0.00	007.01	

RUN DATE 05 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195532 5 195533 5	5/18/12 5/18/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GAID, ASILA GALARZA, JOSE GALLARDO, ZOILA GALLINA, VIRGIN	35.00 40.75 35.00 9.00		510.30 I 594.14 I 510.30 I 131.22 I	
				CUSTOMER	119.75	0.00	1,745.96	
				CATEGORY	119.75	0.00	1,745.96	

RUN DATE 05/23/1 SALES JRNL # 028		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 11 LTC NURSING HOMEW/ BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195535 5/18/1 195536 5/18/1		VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · ·	40.00 13.00		583.20 I 189.54 I	
			CUSTOMER	53.00	0.00	772.74	
			CATEGORY	53.00	0.00	772.74	

			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	113
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195537	5/18/12	800000	VISITING NURSE SERVICE	GARCIA, CONCEPC	36.00		524.88	I
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	.4
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	,
			\$	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195538	5/18/12	000008	VISITING NURSE SERVICE	GARCIA, OLGA	24.00		349.92	I	
195539	5/11/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	8.00		116.64	I	
195540	5/18/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	39.75		579.56	I	
				CUSTOMER	71.75	0.00	1,046.12		
				CATEGORY	71.75	0.00	1,046.12		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	15
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CIICT NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIL	COSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI IIP	SURPLUS
195541	5/18/12	000008	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.00		714.42 I	
				,				
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	_6
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	BALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195542	5/18/12	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	44.50		648.82 I	
				CATEGORY	44.50	0.00	648.82	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L17
SALES JRN	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195543	5/18/12	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	26.00		379.08 I	
				 CATEGORY	26.00	0.00	 379.08	
				CALEGORI	20.00	0.00	3/9.00	

RUN DATE 05/23/3 SALES JRNL # 028		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 11 VCP CHOICE LHCSA BILL WEEK ENDING	8 5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195544 5/18/3 195545 5/18/3		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	16.00 25.00		233.28 I 364.50 I	
			CUSTOMER	41.00	0.00	597.78	
			CATEGORY	41.00	0.00	597.78	

RUN DATE 0			YSIDE CITYWIDE	REG NY NY				19
SALES URNL	J # UZ8Z	LOC 001		SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GOMEZ, ROSANA GOMEZ, VICTORIA	34.00 32.75		495.72 I 477.50 I	
				CUSTOMER	66.75	0.00	973.22	
				CATEGORY	 66.75	0.00	973.22	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 120
BILLED OIG	0202	100 001		ALES REGISTER			BILL WEEK END:	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
195548 195549	5/11/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GOMEZ-VIDAL, AL GOMEZ-VIDAL, AL	3.00 9.00		43.74 131.22	I I
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/23/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 12	21
SALES JRI	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195550	5/18/12	800000	VISITING NURSE SERVICE	GONGORA, MARUJA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	122 NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195551	5/18/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	9.00		131.22	I
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 123	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 5/25	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
195552	5/18/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195553	5/18/12	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

	23/12 - SUP SUNN						- 125
SALES JRNL #	0282 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENI	DING 5/25/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195554 5/3	18/12 000008	VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00		437.40	I
195555 5/3	18/12 000008	VISITING NURSE SERVICE	GOVERDOVSKIY, N	21.00		306.18	I
			CUSTOMER	51.00	0.00	743.58	
			CODIONER	31.00	0.00	713.30	
			CATEGORY	51.00	0.00	743.58	

RUN DATE 0 SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		26 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195557	5/11/12 5/18/12 5/18/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GOYES, ELBA GOYES, ELBA GRAVER, EDNA	4.00 28.00 40.00		58.32 408.24 583.20	I I I	
				CUSTOMER	72.00	0.00	1,049.76		
				CATEGORY	72.00	0.00	1,049.76		

			YSIDE CITYWIDE					.27
SALES JRN	L # 0282	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195559	5/18/12	000008	VISITING NURSE SERVICE	GREENBAUM, MASA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	8
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI	AIDS	ADULT POPUL
			S	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195560	4/27/12	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	7.00		102.06	I	
195561	5/18/12	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	35.00		510.30	I	
				CUSTOMER	42.00	0.00	612.36		
				CODIONEIC	12.00	0.00	012.50		
				CATEGORY	42.00	0.00	612.36		

RUN DATE 05/23/12 SALES JRNL # 0282			REG NY NY			PAGE 1 - ADU ADULT	129
BILLIE GIAVE II GEGE	1 100 001		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195562 5/18/12 195563 5/18/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	',	84.00 47.00		1,224.72 I 685.26 I	
			CUSTOMER	131.00	0.00	1,909.98	
			CATEGORY	131.00	0.00		

			YSIDE CITYWIDE					130
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			LTC NURSING HOMEV	•
			5	ALES KEGISTEK			BIDD WEEK ENDING	3/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195564	5/18/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

	/23/12 - SUP SUNN					PAGE 1 - 131	
SALES JRNL ‡	# 0282 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 5/25/12	
		5	SALES KEGISIEK			BILL WEEK ENDING 3/23/12	
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
105565	/10 /10 00000					001 60 -	
	/18/12 000008 /18/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 27.00		291.60 I 393.66 I	
195500 5/	/16/12 000006	VISITING NURSE SERVICE	HENDY, BERNICE	27.00		393.00 1	
			CUSTOMER	47.00	0.00	685.26	
				47.00	0.00		
			CATEGORY	47.00	0.00	685.26	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.32
SALES URIN	L # UZ6Z	LOC UUI		SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195567 195568	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - ,	56.00 28.00		816.48 I 408.24 I	
				CUSTOMER	84.00	0.00	1,224.72	
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE SALES JRN				REG NY NY			PAGE 1 - VCP CHOICE LHCSA	7
				SALES REGISTER			BILL WEEK ENDING	-, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195569	5/18/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE					- 13	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	,	
			:	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195570	5/18/12	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	31.50		459.27	I	
195571	5/18/12	800000	VISITING NURSE SERVICE	HERRERA, HORACI	18.00		262.44	I	
195572	5/18/12	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		583.20	I	
				CUSTOMER	89.50	0.00	1,304.91		
				CATEGORY	89.50	0.00	1,304.91		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	135
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195573	5/18/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	36
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195574	5/18/12	800000	VISITING NURSE SERVICE	ICIANO, ALFREDO	20.00		291.60 I	
				CATEGORY	20.00	0.00		

-	, - ,		YYSIDE CITYWIDE SUNNYSIDE CITYWIDE S .	REG NY NY A L E S R E G I S T E R			PAGE 1 - 1 LAA LOMBARDI AIDS BILL WEEK ENDING	S ADULT POPUL
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195575	5/18/12	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	44.50		648.81 I	
				CATEGORY	44.50	0.00	648.81	

			YSIDE CITYWIDE				PAGE 1 - 138	
SALES JRN	L # 0282	TOG 001	SUNNYSIDE CITYWIDE S A	REG NY NY LES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195576	5/18/12	800000	VISITING NURSE SERVICE	INSERRA, CATHER	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L39
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195577	5/18/12	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	40
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195578	5/18/12	800000	VISITING NURSE SERVICE	JACSO, ERZSEBET	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	ALES REGISTER  REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	-, -,
195579	5/18/12	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	46.00	IAX ANI	670.68 I	SORFIOS
	-,,							
				CATEGORY	46.00	0.00	670.68	

	05/23/12 - IL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 14	:2
BALLO OICE	1L # 0202	100 001		SALES REGISTER			BILL WEEK END		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195580 195581	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	JARA DEURUCHIM, JARAMILLO PAL,	10.00		145.80 14.58	I I	
				CUSTOMER	11.00	0.00	160.38		
				CATEGORY	11.00	0.00	160.38		

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195582	5/18/12	800000	VISITING NURSE SERVICE	JASZKOWSKI, GEN	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE				11101	- 14	:4
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			\$	SALES REGISTER			BILL WEEK END	ING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195583	5/18/12	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE	77.00		1,122.66	I	
195584	5/18/12	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	24.00		349.92	I	
				CUSTOMER	101.00	0.00	1,472.58		
				CATEGORY	101.00	0.00	1,472.58		

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
0111111	- 11 0202	200 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195585	5/18/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

	05/23/12 - IL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 146 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
195586	5/18/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	26.00		379.08 I
				CATEGORY	26.00	0.00	379.08

			YSIDE CITYWIDE				PAGE 1 - 1	L <b>4</b> 7
SALES JRN	L # 0282	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195587	5/18/12	800000	VISITING NURSE SERVICE	JIMENEZ, BETTY	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	148
			S	ALES REGISTER			BILL WEEK ENDING	5 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195588	5/18/12	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	149	
SALES JRN	JL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
195589	5/18/12	800000	VISITING NURSE SERVICE	JOHNSON, FANNY	20.00		291.60 I		
				CATEGORY	20.00	0.00	291.60		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	50
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195590	5/18/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	25.75		375.44	I	
195591	5/18/12	800000	VISITING NURSE SERVICE	JORRIN, NILIO	39.00		568.62	I	
				CUSTOMER	64.75	0.00	944.06		
				CATEGORY	64.75	0.00	944.06		

			YSIDE CITYWIDE	DDG 191				- 15	51
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		F /OF /10
			S	ALES REGISTER			BILL WEEK EN	JING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195592	5/18/12	000008	VISITING NURSE SERVICE	KAUR, SARD	8.00		116.64	I	
195593	5/18/12	800000	VISITING NURSE SERVICE	KAUR, SHARAN	51.00		743.58	I	
195594	5/18/12	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	16.00		233.28	I	
195595	5/11/12	800000	VISITING NURSE SERVICE	KILIMLIAN, PEPR	8.00		116.64	I	
195596	5/18/12	800000	VISITING NURSE SERVICE	KILIMLIAN, PEPR	48.00		699.84	I	
195597	5/18/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	48.00		699.84	I	
				CUSTOMER	179.00	0.00	2,609.82		
				CATEGORY	179.00	0.00	2,609.82		

			NYSIDE CITYWIDE				-	52
SALES	5 JRNL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
								-, -,
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19559	98 5/18/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN	DATE 05	5/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	53
SALE	S JRNL	# 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
					SALES REGISTER			BILL WEEK ENDING	5/25/12
INVO	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1955	599 5	5/18/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	54.00		787.32 I	
					CATEGORY	54.00	0.00	787.32	

RUN DATE 05/23/12 SALES JRNL # 0282			REG NY NY			PAGE 1 - ADU ADULT	154
			SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195600 5/18/12 195601 5/18/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	9.00 19.00		131.22 I 277.02 I	
3/10/12	000000	VISITING NORSE SERVICE	CUSTOMER	28.00	0.00	408.24	
			CUSTOMER	28.00	0.00	408.24	
			CATEGORY	28.00	0.00	408.24	

	05/23/12 - IL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING 1 BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195602 195603	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	24.00 12.00		349.92 174.96	I I	
				CUSTOMER	36.00	0.00	524.88		
				CATEGORY	36.00	0.00	524.88		

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	6
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			:	SALES REGISTER			BILL WEEK END	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195604	5/18/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48	I	
195605	5/18/12	800000	VISITING NURSE SERVICE	LIRIANO, FRANCI	68.00		991.44	I	
195606	5/18/12	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	20.00		291.60	I	
				CUSTOMER	144.00	0.00	2,099.52		
				CATEGORY	144.00	0.00	2,099.52		

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 157 ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 5/	25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
195607	5/18/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	7.00		102.06 I	
				CATEGORY	7.00	0.00	102.06	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	8
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	IOMEW/	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK END	ING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195608	5/11/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	16.00		233.28	I	
195609	5/18/12	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	48.00		699.84	I	
195610	5/18/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	42.00		612.36	I	
				CUSTOMER	106.00	0.00	1,545.48		
				CATEGORY	106.00	0.00	1,545.48		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 159	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING 5	/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
195611	5/18/12	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	10.00		145.80 I	
195612	5/18/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	20.00		291.60 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 - 160	
SALES JRI	NL # 0282	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195613	5/18/12	000008	VISITING NURSE SERVICE	LONDONO, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	161
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195614	5/18/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	35.00		510.30 I	
195615	5/18/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	12.00		174.96 I	
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	62
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195616	5/18/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE				PAGE 1 - 1	63	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/25/12	
				SALES KEGISIEK			BILL WEEK ENDING	3/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
195617	5/18/12	800000	VISITING NURSE SERVICE	LOPEZDELCASTIL,	25.25		368.15 I		
				CATEGORY	25.25	0.00	368.15		

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195618	5/18/12	800000	VISITING NURSE SERVICE	LOZADA, LAURA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 165	
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 5	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
195619	5/18/12	800000	VISITING NURSE SERVICE	LUCES, LETICIA	19.25		280.68 I	
				CATEGORY	19.25	0.00	280.68	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 166	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 5	/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
195620	5/18/12	800000	VISITING NURSE SERVICE	LYMN, ANGIE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RI	UN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 167	
Si	ALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE P	ROGRAM
				5	SALES REGISTER			BILL WEEK ENDING 5/	25/12
Ι,,	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
11	NVOICE#	DAIL	COSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT TIP SUI	KPLUS
19	95621	5/18/12	800000	VISITING NURSE SERVICE	LYMN, ANGIE	10.00		145.80 I	
					CATEGORY	10.00	0.00	145.80	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	168
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195622	5/18/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		597.78 I	
				CATEGORY	41.00	0.00	597.78	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	69
SALES JRN	IL # 0282	LOC 001		REG NY NY			CCL CONGREGATE CA	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195623	5/18/12	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 05/23/13 SALES JRNL # 0283		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END		5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195624 5/18/1: 195625 5/18/1: 195626 5/18/1:	2 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAGNANI, VINCEN MANGAN, JOHN MANNINO, FRANCE	76.50 20.00 77.00		1,115.37 291.60 1,122.66	I I I	
			CUSTOMER	173.50	0.00	2,529.63		
			CATEGORY	173.50	0.00	2,529.63		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 171
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			2	SALES REGISTER			BILL WEEK END	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
195627	5/11/12	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	8.00		116.64	I
195628	5/18/12	800000	VISITING NURSE SERVICE	MANOS, ARCHIE	56.00		816.48	I
195629	5/18/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	28.00		408.24	I
				CUSTOMER	92.00	0.00	1,341.36	
				CATEGORY	92.00	0.00	1,341.36	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 172	2
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK END	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195630	5/18/12	000008	VISITING NURSE SERVICE	MARGOLIS, GERTR	3.75		54.68	I	
195631	5/18/12	800000	VISITING NURSE SERVICE	MARINO, ANN	30.00		437.40	I	
				CUSTOMER	33.75	0.00	492.08		
				CODICIENT	55.75	0.00	192.00		
				CATEGORY	33.75	0.00	492.08		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
SALES URN.	L # UZOZ	LOC UUI		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195632	5/18/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	4
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195633	4/27/12	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	7.00		102.06	I	
195634	5/18/12	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94	I	
				CUSTOMER	50.00	0.00	729.00		
				CATEGORY	50.00	0.00	729.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	175
Bribbs ord	12    0202	100 001		SALES REGISTER			BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195635 195636	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	4.00 15.00		58.32 218.70	I I
				CUSTOMER	19.00	0.00	277.02	
				CATEGORY	19.00	0.00	277.02	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY A L E S R E G I S T E R			PAGE 1 - 17 ADU ADULT BILL WEEK ENDING	76 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195637	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ OSORI,	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	77
SALES JRN	IL # 0282	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195638	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 178	8
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195639	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	60.00		874.80 I	
				CATEGORY	60.00	0.00	874.80	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 179
SALLS UKN	11 # 0202	LOC 001		SALES REGISTER			BILL WEEK END	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
195640 195641	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	7.00 1.00		102.06 14.58	I
				CUSTOMER	8.00	0.00	116.64	
				CATEGORY	8.00	0.00	116.64	

RUN DATE 05/23/12 SALES JRNL # 0282	- SUP SUNI LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	80 5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195642 5/11/12 195643 5/18/12 195644 5/18/12 195645 5/18/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARGA MARTINEZ, MARTA MARTINEZ, ROSA	6.00 25.00 24.00 84.00		87.48 I 364.50 I 349.92 I 1,224.72 I	
			CUSTOMER	139.00	0.00	2,026.62	
			CATEGORY	139.00	0.00	2,026.62	

	05/23/12 - L # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 181 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
195646	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04 I
				CATEGORY	38.00	0.00	554.04

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	182
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			5	SALES REGISTER			BILL WEEK ENDI	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195647	5/18/12	800000	VISITING NURSE SERVICE	MATOS, ROSA	56.00		816.48	I
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 18	33
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			\$	SALES REGISTER			BILL WEEK ENI	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195648	5/18/12	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54	I	
195649	5/18/12	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44	I	
				CUSTOMER	231.00	0.00	3,367.98		
				CATEGORY	231.00	0.00	3,367.98		

- 1				YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	.84
	DALLED UKN.	H 0202	10C 001		SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195650	5/18/12	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	53.75		783.68 I	
ı					CATEGORY	53.75	0.00	783.68	

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - 189 ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195651	5/18/12	800000	VISITING NURSE SERVICE	MCKAY, DOROTHY	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE (		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	86
SALES URNI	L # UZOZ	TOC 001		REGNY NY SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195652 195653	5/18/12 5/18/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	17.00 24.00		247.86 I 349.92 I	
193033	3/10/12	000008	VISITING NORSE SERVICE					
				CUSTOMER	41.00	0.00	597.78	
				CATEGORY	41.00	0.00	597.78	

			YSIDE CITYWIDE				PAGE 1 - 1	
SALES JRN	L # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW	·
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195654	5/18/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.88
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195655	5/18/12	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
SALES URN.	L # UZOZ	LOC UUI		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195656	5/18/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	77.75		1,133.60 I	
				GAMPGODY			1 122 60	
				CATEGORY	77.75	0.00	1,133.60	

			YSIDE CITYWIDE					190
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			۵	SALES REGISTER			BILL WEEK ENDING	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
195657	5/18/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		568.62 I	
				CATEGORY	39.00	0.00	568.62	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
BALLS OIL	1L # 0202	HOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195658 195659	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	11.00 28.25		160.39 I 411.89 I	
				CUSTOMER	39.25	0.00	572.28	
				CATEGORY	39.25	0.00	572.28	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE A		)2
		200 001		SALES REGISTER			BILL WEEK ENI	-	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195660 195661	5/11/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• ,	12.00 36.00		174.96 524.88	I	
193001	5/16/12	000008	VISITING NURSE SERVICE	MOLINA, ANA			524.00		
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	193
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195662	5/18/12	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	10.00		145.80 I	
195663	5/18/12	800000	VISITING NURSE SERVICE	MONTES, MARTA	19.00		277.02 I	
195664	5/18/12	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30 I	
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

-	, - ,		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195665	5/18/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	36.00		524.88 I	
				CATEGORY	36.00	0.00		

RUN DATE 05/2 SALES JRNL #	23/12 - SUP SUNN 0282 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	195 5/25/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195667 5/1	.8/12 000008 .8/12 000008 .8/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MORALES, GENERO MOURAS, ANNA MUSSALLI, NAIM	42.00 10.00 6.00		612.36 I 145.80 I 87.48 I	
			CUSTOMER	58.00	0.00	845.64	
			CATEGORY	58.00	0.00		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	196
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195669	5/18/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 197	
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
				S	SALES REGISTER			BILL WEEK ENDING 5/25/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	195670	5/18/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
					CATEGORY	20.00	0.00	 291.60	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	198
SALES URNI	L # UZOZ	TOC 001		SALES REGISTER			BILL WEEK ENDIN	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	41.25 1.00		601.43 I 14.58 I	
				CUSTOMER	42.25	0.00	616.01	
				CATEGORY	42.25	0.00	616.01	

	05/23/12 - IL # 0282			REG NY NY A L E S R E G I S T E R			PAGE 1 - 199 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195673	5/18/12	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

]	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	200
1	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195674	5/18/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	63.00		918.54 I	
					CATEGORY	63.00	0.00	918.54	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20	)1
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195675	5/18/12	000008	VISITING NURSE SERVICE	NIEVES, NANCY	45.00		656.10 I	
195676	5/18/12	800000	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60 I	
				CUSTOMER	65.00	0.00	947.70	
				CATEGORY	65.00	0.00	947.70	

RUN DATE 05/23/12 SALES JRNL # 0282	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	PAGE 1 - 202 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12				
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195677 5/18/12 195678 5/18/12	000008 VISITING NURSE SERVICE VISITING NURSE SERVICE	NOBLIN, ELOISE NOBOADESALAZAR,	25.00 34.00		364.50 495.72	I I
		CUSTOMER	59.00	0.00	860.22	
		 CATEGORY	59.00	0.00	860.22	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	3
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			\$	SALES REGISTER			BILL WEEK END	ING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195679	5/18/12	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
195680	5/18/12	800000	VISITING NURSE SERVICE	OCHOA, LUIS	42.75		623.30	I	
				CUSTOMER	91.75	0.00	1,337.72		
				CATEGORY	91.75	0.00	1,337.72		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	204
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	BALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195681	5/18/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	27.00		393.66 I	
				CATEGORY	27.00	0.00	393.66	

RUN DATE 05/23/1: SALES JRNL # 028			REG NY NY			PAGE 1 - ADU ADULT	205
DALLO OIGGE # 020	2 100 001		SALES REGISTE	R		BILL WEEK ENDING	5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195682 4/27/1 195683 5/18/1		VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00 9.00		43.74 I 131.22 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00		

RUN DATE 05/23/12 SALES JRNL # 0282		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195684 5/18/12 195685 5/18/12 195686 5/18/12	800000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORTEGA, CARLOS OSPINA, ANA PANASKAROLIDIS,	16.00 8.00 36.50		233.28 I 116.64 I 532.18 I	
			CUSTOMER	60.50	0.00	882.10	
			CATEGORY	60.50	0.00	882.10	

			YSIDE CITYWIDE					07	
SALES JRN	L # 0282	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
195687	5/18/12	800000	VISITING NURSE SERVICE	PAOLONI, MARY	14.00		204.12 I		
				CATEGORY	14.00	0.00	204.12		

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	)8
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195688	3/16/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	10.00		145.80	I	
195689	5/11/12	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	20.00		291.60	I	
195690	5/18/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I	
195691	5/18/12	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48	I	
195692	5/18/12	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I	
				CUSTOMER	142.00	0.00	2,070.36		
				CATEGORY	142.00	0.00	2,070.36		

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	209
SALES JRN	L # 0282	LOC 001		REG NY NY			LTC NURSING HOME	
			i	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIE	COSI NO	COSTOMER NAME	REF ERENCE	CAUUR	IAA AMI	AMOUNI IIP	SURPLUS
195693	5/18/12	000008	VISITING NURSE SERVICE	PARK, SUNG	1.00		14.58 I	
	-, -,			, ====				
				CATEGORY	1.00	0.00	14.58	

RUN DATE 05, SALES JRNL	/23/12 - SUP SUN # 0282 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	D		VCP CHOICE LHCSA	
			SALES REGISTE:	R		BILL WEEK ENDING	5/25/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	/18/12 000008 /18/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PENA, VICTORIA PENAGOS, MARIA	35.50 25.00		517.59 I 364.50 I	
			CUSTOMER	60.50	0.00	882.09	
			CATEGORY	60.50	0.00	882.09	

			YSIDE CITYWIDE				PAGE 1 - 2	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB O	
			2	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195696	5/18/12	800000	VISITING NURSE SERVICE	PENNACCHIA, MAR	11.75		171.32 I	
				CATEGORY	11.75	0.00	171.32	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	212
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195697	5/18/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	48.25		703.49 I	
				CATEGORY	48.25	0.00	703.49	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195698	5/18/12	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	29.25		426.47 I	
				CATEGORY	29.25	0.00	426.47	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 214	1
SALES JRN	L # 0282	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195699	5/18/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	36.75		535.82 I	
				CATEGORY	36.75	0.00	535.82	

		05/23/12 - L # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 215 ADU ADULT	
~	311111111111111111111111111111111111111	2    0202	200 001		SALES REGISTER			BILL WEEK ENDING 5/25/12	
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
1	195700	5/18/12	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	24.00		349.92 I	
					CATEGORY	24.00	0.00	349.92	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 216	
SALES JRN	L # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW/O	•
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195701	5/18/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		17 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195702 195703 195704 195705	5/18/12 5/18/12 5/04/12 5/18/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PHILIPPS, MARY PIZARRO, BARBAR PLACIDO, GENARO PLACIDO, GENARO	30.50 1.00 11.00 29.50		444.69 14.58 160.38 430.11	I I I	
				CUSTOMER	72.00	0.00	1,049.76		
				CATEGORY	72.00	0.00	1,049.76		

	05/23/12 - NL # 0282	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 21 ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195706	5/18/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	36.00		524.88 I	
				CATEGORY	36.00	0.00	 524.88	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 23 VCP CHOICE LHCSA BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195707	5/18/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 220	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
			S	ALES REGISTER			BILL WEEK ENDING 5/25/1	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
195708	5/18/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	_

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 221	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 5/25/	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	LUS
195709	5/18/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	27.75		404.60 I	
				CATEGORY	27.75	0.00	404.60	

ı	RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	222
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195710	5/18/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	3
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195711	5/18/12	800000	VISITING NURSE SERVICE	QUINTERO, INES	27.75		404.60 I	
1				CATEGORY	27.75	0.00	404.60	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 224	
SALES JRN	rL # 0282	LOC 001		REG NY NY			LTC NURSING HOMEW/O WALLS	•
			:	SALES REGISTER			BILL WEEK ENDING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195712	5/18/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	225
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDE	S PEDIATRIC
ı				S	SALES REGISTER			BILL WEEK ENDING	5/25/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	195713	5/18/12	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
ı									
ı									
ı					CATEGORY	40.00	0.00	583.20	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 226	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (	$_{ m LT}$
				SALES REGISTER			BILL WEEK END	OING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
195714	5/18/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	48.00		699.84	I	
195715	5/18/12	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	25.00		364.50	I	
				CUSTOMER	73.00	0.00	1,064.34		
							1 064 24		
				CATEGORY	73.00	0.00	1,064.34		

RUN DATE ( SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 AUR ADULT REHAB C	NLY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	5/25/12 SURPLUS
195716	5/18/12	000008	VISITING NURSE SERVICE		32.00	IAA AMI	466.56 I	SURPLUS
155710	3/10/12	000000	VIBITING NORDE BERVICE					
				CATEGORY	32.00	0.00	466.56	

RUN DATE		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		
DALLO OIGI.	L # 0202	100 001		ALES REGISTER			BILL WEEK END		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
195717	5/18/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96	I	
195718	5/18/12	800000	VISITING NURSE SERVICE	RANDAZZO, ROSAL	20.00		291.60	I	
195719	5/18/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I	
195720	5/18/12	800000	VISITING NURSE SERVICE	REINA, JOSE	20.00		291.60	I	
195721	5/18/12	800000	VISITING NURSE SERVICE	RICCA, MARIE	10.75		156.74	I	
195722	5/18/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		291.60	I	
				CUSTOMER	88.75	0.00	1,293.98		
				CATEGORY	88.75	0.00	1,293.98		

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	229
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	G 5/25/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	195723	5/18/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	55.75		812.84 I	
ı									
ı									
ı					CATEGORY	55.75	0.00	812.84	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 230	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING 5/	25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
195724	5/18/12	000008	VISITING NURSE SERVICE	RIVERA, CARMEN	20.00		291.60 I	
195725	5/18/12	800000	VISITING NURSE SERVICE	RIVERA, ERNESTO	20.00		291.60 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	231
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	·
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195726	5/18/12	000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	05/23/12 - L # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	232 G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195727	5/18/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 233 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	36.25 12.00		528.53 I 174.96 I
				CUSTOMER	48.25	0.00	703.49
				CATEGORY	48.25	0.00	703.49

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 234	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			5	SALES REGISTER			BILL WEEK END	ING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195730	5/18/12	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	235
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195731	5/18/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 236	б
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			\$	SALES REGISTER			BILL WEEK ENI	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195732	5/11/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, FERM	10.00		145.80	I	
195733	5/18/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	17.75		258.80	I	
195734	5/18/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	34.00		495.72	I	
				CUSTOMER	61.75	0.00	900.32		
				CATEGORY	61.75	0.00	900.32		

F	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 237	
S	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING 5	5/25/12
I	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
1	195735	5/18/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
					CATEGORY	84.00	0.00	1,224.72	

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	38
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
١				5	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	195736	5/18/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I	
ı									
					CATEGORY	25.00	0.00	364.50	

				YSIDE CITYWIDE				PAGE 1 - 2	
1	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				2	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195737	5/18/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	46.50		677.98 I	
					CATEGORY	46.50	0.00	677.98	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 240	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195738	5/18/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	41.50		605.08 I	
				CATEGORY	41.50	0.00	605.08	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	11
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
	D	GTTGT 170	GUGEONED MANE	DEFERENCE	******		31/07777	arra ar rea
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195739	5/18/12	000008	VISITING NURSE SERVICE	DODDIGHER WIMA	48.00		699.84 I	
195/39	5/18/12	000008	VISITING NURSE SERVICE	E RODRIGUEZ, YLMA	48.00		699.84 1	
				CATEGORY	48.00	0.00	699.84	
				CATHOORT	10.00	0.00	000.01	

RUN DATE 05/23/12 SALES JRNL # 0282		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 242 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
195740 5/11/12 195741 5/18/12	000008 000008	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	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	243
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
TATTOTOT	DAME	GIIGE NO	CHICHOMED NAME	DEFEDENCE	HOHD	max anm	AMOUNTE TO	CLID DI 110
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195742	5/18/12	000008	VISITING NURSE SERVICE	ROMERO, SANTHY	45.00		656.10 I	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	4
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195743	5/18/12	000008	VISITING NURSE SERVICE	ROMO, FLOR	56.00		816.48	I	
195744	5/18/12	800000	VISITING NURSE SERVICE	ROSA, ANA	32.00		466.56	I	
				CUSTOMER	88.00	0.00	1,283.04		
				CATEGORY	88.00	0.00	1,283.04		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	245
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195745	5/18/12	800000	VISITING NURSE SERVICE	ROSA, LUZ E	52.50		765.45 I	
				CATEGORY	52.50	0.00	765.45	

RUN DATE 05/23/12 SALES JRNL # 0282		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 246 VCP CHOICE LHCSA BILL WEEK ENDING	5/25/12
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195746 5/18/12 195747 5/11/12 195748 5/18/12	7 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSA, MANOLO ROSARIO, ELSA ROSARIO, MARIA	16.00 6.00 21.50		233.28 I 87.48 I 313.47 I	
			CUSTOMER	43.50	0.00	634.23	
			CATEGORY	43.50	0.00	634.23	

RUN DATE 05/23/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	47 5/25/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195749 5/18/ 195750 5/18/ 195751 5/18/	12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSARIOBREU, EM RUBIN, EVGENY RUECKHER, PATRI	25.00 20.00 15.00		364.50 I 291.60 I 218.70 I	
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 248	
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 5	/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
195752	5/18/12	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	249
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	MEW/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDIN	IG 5/25/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	195753	5/18/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	31.00		451.99 I	- -
ı									
ı									
ı					CATEGORY	31.00	0.00	451.99	

			NYSIDE CITYWIDE				PAGE 1 - 2	250
SALES JRN	IL # 0282	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195754	5/18/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	69.25		1,009.67 I	
				CATEGORY	69.25	0.00	1,009.67	

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	251
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	5/25/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	195755	5/18/12	800000	VISITING NURSE SERVICE	SAAVEDRA, STELL	32.75		477.50 I	
ı									
ı									
ı					CATEGORY	32.75	0.00	477.50	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		52 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195756 195757	5/18/12 5/18/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 77.00		218.70 1,122.66	I I	
				CUSTOMER	92.00	0.00	1,341.36		
				CATEGORY	92.00	0.00	1,341.36		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	53
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
105750	F /10 /10	00000	THE THE MED OF CORNING		26 00		F24 88 F	
195758	5/18/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE	DDG 1971			PAGE 1 -	201
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHC	
							DIDD WEEK ENDI	3/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195759	5/18/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	17.00		247.86	I
195760	5/18/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	42.00		612.36	I
				CUSTOMER	59.00	0.00	860.22	
				CATEGORY	59.00	0.00	860.22	

I	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	255
5	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				9	SALES REGISTER			BILL WEEK ENDING	5/25/12
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
-	195761	5/18/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
					CATEGORY	30.00	0.00	437.40	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 256	
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 5/25/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	iS
195762	5/18/12	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	23.00		335.35 I	
				CATEGORY	23.00	0.00	335.35	-

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2: ADU ADULT	57
			\$	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195763	5/18/12	000008	VISITING NURSE SERVICE	, -	7.00		102.06 I	
195764	5/18/12	000008	VISITING NURSE SERVICE	,	6.00		87.48 I	
195765	5/18/12	800000	VISITING NURSE SERVICE	SCHNEIER, CATHE	7.75		113.00 I	
				CUSTOMER	20.75	0.00	302.54	
				CATEGORY	20.75	0.00	302.54	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 25	58
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195766	5/18/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	56.00		816.48	I	
195767	5/18/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I	
195768	5/18/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	16.00		233.28	I	
195769	5/18/12	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	48.00		699.84	I	
195770	5/18/12	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	41.25		601.43	I	
				CUSTOMER	197.25	0.00	2,875.91		
				CATEGORY	197.25	0.00	2,875.91		

			YSIDE CITYWIDE 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
195771	5/18/12	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	29.50		430.11 I	
				CATEGORY	29.50	0.00	430.11	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 26	50
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195772	5/18/12	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	261
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195773	5/18/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	62
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195774 195775	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 15.00		437.40 I 218.70 I	
				CUSTOMER	45.00	0.00	656.10	
				CATEGORY	45.00	0.00	656.10	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195776	5/18/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 264	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
			5	SALES REGISTER			BILL WEEK ENDING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195777	5/18/12	000008	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN				REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195778	5/18/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40	[
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE					66
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195779	5/18/12	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	8.00		116.64 I	
				CAMPICODY			116 64	
1				CATEGORY	8.00	0.00	116.64	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 26' ADU ADULT	7
SALES URN	L # UZOZ	LOC UUI		SALES REGISTER				5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195780	5/18/12	800000	VISITING NURSE SERVICE	STAMATIADES, ME	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/23/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 2	68
SALES JRN	NL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195781	5/18/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	23.25		338.99 I	
				CATEGORY	23.25	0.00	338.99	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	
DALLO OIGN	Δ <sub>π</sub> 0202	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195782	5/18/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

	05/23/12 - JL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 270 ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195783	5/18/12	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

	05/23/12 - IL # 0282		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - AUR ADULT REHAB BILL WEEK ENDING	ONLY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195784	5/18/12	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	272
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195785	5/18/12	800000	VISITING NURSE SERVICE	STICKELL, BLANC	40.00		583.20	I
195786	5/18/12	800000	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88	I
				CUSTOMER	76.00	0.00	1,108.08	
				CATEGORY	76.00	0.00	1,108.08	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	273
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195787	5/18/12	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	38.25		557.69 I	
				CATEGORY	38.25	0.00	557.69	

			YSIDE CITYWIDE					- 27	74
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE L BILL WEEK EN		5/25/12
			'	SALES REGISIER			DILL MEEV EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195788	5/18/12	000008	VISITING NURSE SERVICE		4.00		58.32	I	
195789	5/18/12	000008	VISITING NURSE SERVICE	TABOADA, ELIZAB	66.00		962.29	I	
				CUSTOMER	70.00	0.00	1,020.61		
				CODIONER	70.00	0.00	1,020.01		
				CATEGORY	70.00	0.00	1,020.61		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	2		PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
195790 195791	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	56.00 20.00		816.48 I 291.60 I	
				CUSTOMER	76.00	0.00	1,108.08	
				CATEGORY	76.00	0.00	1,108.08	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	276
			S	SALES REGISTER			BILL WEEK ENDING	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	P SURPLUS
195792	5/18/12	800000	VISITING NURSE SERVICE	TAVERAS, BERNAR	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 277	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195793	5/18/12	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	REG NY NY			PAGE 1 - 278	
SALES URI	NL # 0282	TOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 5/25	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURF	LUS
195794	5/18/12	800000	VISITING NURSE SERVICE	TEJADA, MARIA	2.00		29.16 I	
				CATEGORY	2.00	0.00	 29.16	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	279
SALES ON	1 # 0202	100 001		ALES REGISTER	1		BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195795	5/18/12	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	42.00		612.36	I
195796	5/18/12	000008	VISITING NURSE SERVICE	TINOCO, INES	35.00		510.30	I
195797	5/18/12	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	29.00		422.82	I
195798	5/18/12	800000	VISITING NURSE SERVICE	TORO, PURA	84.00		1,224.72	I
195799	5/18/12	800000	VISITING NURSE SERVICE	TORRES, EMELINA	40.00		583.20	I
195800	5/18/12	800000	VISITING NURSE SERVICE	TORRES, LUZ M	81.00		1,180.98	I
				CUSTOMER	311.00	0.00	4,534.38	
				CATEGORY	311.00	0.00	4,534.38	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 280	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WAI	LLS (LT
			S	SALES REGISTER			BILL WEEK ENDING 5/25	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	PLUS
195801	5/18/12	800000	VISITING NURSE SERVICE	TORRES, MARGOT	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

				YSIDE CITYWIDE				PAGE 1 - 2	281
SAI	LES JRN	L # 0282	LOC 001		REG NY NY			ADU ADULT	5 /05 /10
				:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INV	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195	5802	5/18/12	000008	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
					CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	CSA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS
195803 195804 195805 195806	4/20/12 5/11/12 5/18/12 5/18/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TRUJILLO, AMPAR TRUJILLO, AMPAR TSOLISOS, FOTIN	4.00 8.00 8.00 54.25		58.32 116.64 116.64 790.97	I I I
				CUSTOMER	74.25	0.00	1,082.57	
				CATEGORY	74.25	0.00	1,082.57	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	283
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195807	5/18/12	800000	VISITING NURSE SERVICE	TSUAI, PING	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	284
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	G 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195808	5/18/12	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	58.75		856.58 I	
195809	5/18/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	3.00		43.74 I	
				CUSTOMER	61.75	0.00	900.32	
				CATEGORY	61.75	0.00	900.32	

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	35
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195810	5/18/12	800000	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 28 AUR ADULT REHAB ON BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195811	5/18/12	800000	VISITING NURSE SERVICE	VACCA, MARIA	9.00		131.22 I	
				 CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 287 ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 5/25	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
195812	5/18/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	10.00		145.80 I	
				CAMPRODY.	10.00		145.00	
1				CATEGORY	10.00	0.00	145.80	

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	288
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195813	5/18/12	000008	VISITING NURSE SERVICE	VALENTI, HELEN	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 - 28	39
SALES JRNI	L # U282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.00 12.00		291.60 I 174.96 I	
				CUSTOMER	32.00	0.00	466.56	
				CATEGORY	32.00	0.00	466.56	

	/23/12 - SUP SUNN # 0282 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 290 LTC NURSING HOMEW/O WA BILL WEEK ENDING 5/2	LLS (LT 5/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
	/18/12 000008 /18/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.75 6.00		83.84 I 87.48 I	
			CUSTOMER	11.75	0.00	171.32	
			CATEGORY	11.75	0.00	171.32	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	291
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195818	5/18/12	800000	VISITING NURSE SERVICE	VASQUEZ, ARTURO	41.50		605.08 I	
				CATEGORY	41.50	0.00	605.08	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	12
SALES JRN	rL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195819	5/18/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		481.14	I	
195820	5/18/12	000008	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	18.00		262.44	I	
195821	5/18/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	39.50		575.91	I	
				CUSTOMER	90.50	0.00	1,319.49		
				CATEGORY	90.50	0.00	1,319.49		

RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	293
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195822	5/18/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195823	5/18/12	800000	VISITING NURSE SERVICE	VENTURA, ROSA	47.50		692.56 I	
				CATEGORY	47.50	0.00	692.56	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	295
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195824	5/18/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 296	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 5/25	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
195825	5/18/12	800000	VISITING NURSE SERVICE	VIGORITO, ANN	19.50		284.31 I	
				CATEGORY	19.50	0.00	284.31	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 297	
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 5	/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
195826	5/11/12	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	6.00		87.48 I	
195827	5/18/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	24.00		349.92 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	98
SALES JRN	ъ # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195828	5/18/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	3.25		47.39 I	
				CATEGORY	3.25	0.00	47.39	

ı	RUN DATE	05/23/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	199
ı	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	
ı				i	SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195829	5/18/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	18.00		262.44 I	
					CATEGORY	18.00	0.00		
ı					CAILGORI	10.00	0.00	202.44	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE 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 TYP	P SURPLUS
195830	5/18/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	60.00		874.80 I	
				CATEGORY	60.00	0.00	874.80	

			YSIDE CITYWIDE				PAGE 1 - 301	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 5/25/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
195831	5/18/12	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
Brilles orde	12    0202	100 001		ALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	P SURPLUS
195832 195833	5/18/12 5/18/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VOLASTRO, JOHN WEINHAUS, SUSAN	3.00 30.00		43.74 437.40	[ [
				CUSTOMER	33.00	0.00	481.14	
				CATEGORY	33.00	0.00	481.14	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	03
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			i	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195834	5/18/12	800000	VISITING NURSE SERVICE	WERKMEISTER, JO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

ı	RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	)4
١	SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı					SALES REGISTER			BILL WEEK ENDING	5/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195835	5/18/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28 I	
					CATEGORY	16.00	0.00	233.28	

RUN DATE	05/23/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	)5
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195836	5/18/12	000008	VISITING NURSE SERVICE	YELLAPAH, DOLLI	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

			YSIDE CITYWIDE				PAGE 1 - 306	
SALES JRNI	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 5/25/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195837	5/18/12	800000	VISITING NURSE SERVICE	ZAMBRANO, CRUZM	8.00		116.64 I	
195838	5/18/12	000008	VISITING NURSE SERVICE	ZAMBRANO, VICTO	12.00		174.96 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE 1 - 307 PAGE SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/25/12 REFERENCE HOURS TAX AMT AMOUNT

ACENNO, CLAIRE 23.75 344.85

ALI, AMRUNISSA 20.00 290.40

AMABLE, ANTOIN 7.00 1,321.04

AYALA, ENRIQUE 52.00 755.04

BEGUN, JAMILA 72.00 1,045.44

BUCARO, CONCETT 45.00 653.40

CARSWELL LUELL 69.50 1,094.62

CEPEDA, TOMASA 30.00 425.60

COLAVITTI, JEAN 56.00 833.12

COLEMAN, REGINA 22.75 333.12

COLEMAN, REGINA 22.75 333.12

COLEMAN, REGINA 22.75 363.30

DIAZ, ALICIA 45.00 653.40

DONOSO, MARGARE 20.00 290.40

DONOSO, MARGARE 20.00 290.40

ESPINOZA, MARIA 45.00 653.40

ESPINOZA, MARIA 45.00 551.76

FERRAINOZA, MARIA 45.00 551.76

FERRAINOZA, MARIA 45.00 653.40

ESPINOZA, MARIA 45.00 551.76

FERRARA, ANN 42.00 609.84

GOMEZ, VOLANDA 37.5 54.45

GREENSPAN, ALIC 20.00 290.00

HUSTIU, SILVIA 6.00 87.12

JIMENEZ, EUGENI 90.00 1,306.80

JOHNSON, DOROTH 61.00 885.72

LATVIS, CHARLES 6.00 1,132.32

MANGRAY, KARMAD 40.00 580.80

MARTINEZ, ERMA 6.00 87.12

MARTINEZ, GENT 10.00 1,45.20

MICHEL, DOROTHY 56.00 813.12

MONCRIEF, LOIS 47.50 689.70

MORA, MARIA 8.00 116.16

MOSCICKA, JADWI 24.00 363.00

NETTLES, DONNA 8.00 116.16

MOSCICKA, JADWI 24.00 363.00

NETTLES, DONNA 8.00 116.16

MOSCICKA, JADWI 24.00 348.48

MUSCAT, CARREN 25.00 363.00

NISHIMURA, ALBE 60.00 871.20

NINEZ, IRIS 24.00 363.00

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, SEGOR 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, KEGO 41.25

PAZIOULIS, SEGOR 41.25

PAZIOULIS, SEGOR 41.25

PAZIOULIS, SEGOR 41.25

PAZIOULIS, KEGO 435.60

PAZIOULIS, SEGOR 41.25

PAZIOULIS, INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 195839 344.85 I 5/18/12 000010 GUILDNET 195840 290.40 I 5/18/12 000010 GUILDNET 1,321.04 I 755.04 I 1,045.44 I 195841 5/18/12 000010 GUILDNET 195842 5/18/12 000010 GUILDNET GUILDNET 195843 5/18/12 000010 GUILDNET 195844 5/18/12 000010 195845 5/18/12 000010 GUILDNET 195846 5/18/12 000010 GUILDNET 195847 5/18/12 000010 GUILDNET 195848 5/18/12 000010 GUILDNET 195849 5/18/12 000010 GUILDNET GUILDNET 195850 5/18/12 000010 195851 5/18/12 000010 GUILDNET 195852 5/18/12 000010 GUILDNET 195853 5/18/12 000010 GUILDNET 195854 5/18/12 000010 GUILDNET 195855 5/18/12 000010 GUILDNET 195856 5/18/12 000010 GUILDNET 195857 5/18/12 000010 GUILDNET 195858 5/18/12 000010 GUILDNET 195859 GUILDNET 5/18/12 000010 195860 GUILDNET 5/18/12 000010 195861 5/18/12 000010 GUILDNET 195862 5/18/12 000010 GUILDNET 195863 5/18/12 000010 GUILDNET 195864 4/06/12 000010 GUILDNET 195865 5/18/12 000010 GUILDNET 195866 5/18/12 000010 GUILDNET 195867 5/18/12 000010 GUILDNET 195868 5/18/12 000010 GUILDNET 195869 5/18/12 000010 GUILDNET 195870 5/18/12 000010 GUILDNET 195871 5/18/12 000010 GUILDNET 195872 5/18/12 000010 GUILDNET 195873 5/18/12 000010 GUILDNET 195874 5/18/12 000010 GUILDNET 195875 5/18/12 000010 GUILDNET 195876 5/18/12 000010 GUILDNET 195877 000010 GUILDNET 5/18/12 195878 000010 GUILDNET 5/18/12 195879 5/18/12 000010 GUILDNET 195880 5/18/12 000010 GUILDNET 195881 5/18/12 000010 GUILDNET 195882 5/18/12 GUILDNET 000010 195883 5/18/12 GUILDNET 000010 195884 5/18/12 000010 GUILDNET 195885 5/18/12 000010 GUILDNET 195886 5/18/12 000010 GUILDNET 5/18/12

195887

000010 GUILDNET

RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE							PAGE 2	- 30	38	
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			GUI GUILDNET		
				SALES	REGISTE	R		BILL WEEK ENI	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195888	5/18/12	000010	GUILDNET	P1	CHARDO, MARIA	63.00		914.76	I	
195889	5/18/12	000010	GUILDNET	PF	ROANO, ALICIA	18.00		279.36	I	
195890	5/18/12	000010	GUILDNET	PF	ROANO, BRUNO	28.00		434.56	I	
195891	5/18/12	000010	GUILDNET	PF	RYCE, CLYDIA	10.00		145.20	I	
195892	5/18/12	000010	GUILDNET	R.A	AMOS, ESTHER	18.00		261.36	I	
195893	5/18/12	000010	GUILDNET	RI	ESTULA, VINCEN	20.00		290.40	I	
195894	5/18/12	000010	GUILDNET	R.I	IVAS, GERTRUDI	19.00		275.88	I	
195895	5/18/12	000010	GUILDNET	RO	DRIGUEZ, FABI	25.00		363.00	I	
195896	5/18/12	000010	GUILDNET	RO	DRIGUEZ, HOLG	63.00		914.76	I	
195897	5/18/12	000010	GUILDNET	RO	DJAS, ANGEL	15.00		232.80	I	
195898	5/18/12	000010	GUILDNET	RO	JAS, HAYDEE	20.00		310.40	I	
195899	5/04/12	000010	GUILDNET	RO	JO, MANUEL	4.00		58.08	I	
195900	5/18/12	000010	GUILDNET	RU	JBIANO, MARIA	20.00		290.40	I	
195901	5/18/12	000010	GUILDNET	SA	ALJANIN, DILJA	58.50		849.42	I	
195902	5/18/12	000010	GUILDNET	SA	ANCHEZ, ELIZAB	43.00		624.36	I	
195903	5/18/12	000010	GUILDNET	SH	HELTON, AGUEDA	7.00		101.64	I	
195904	5/18/12	000010	GUILDNET	SH	HELTON, AGUEDA	14.00		203.28	I	
195905	5/18/12	000010	GUILDNET	TO	ROSSIAN, PARI	27.75		402.93	I	
195906	5/18/12	000010	GUILDNET	V	LLACRES, LUZ	8.00		116.16	I	
195907	5/18/12	000010	GUILDNET	VI	LAHOS, MARIE	44.00		638.88	I	
195908	5/18/12	000010	GUILDNET	WE	EISZ, KLARA	4.00		58.08	I	
195909	5/18/12	000010	GUILDNET	WH	HITE, GLORIA	5.00		72.60	I	
195910	5/18/12	000010	GUILDNET	WH	HITLEY, MYRNA	20.00		290.40	I	
195911	5/18/12	000010	GUILDNET	YI	I, CARLOS	24.00		348.48	I	
195912	5/11/12	000010	GUILDNET	YI	ANTSELIS, VIR	8.00		1,509.76	I	
195913	5/18/12	000010	GUILDNET	ZA	ARE, GLORIA	48.00		696.96	I	
195914	5/18/12	000010	GUILDNET	Zt	JMAETA, FANNY	64.00		929.28	I I	
					CCHARDO, MARIA ROANO, ALICIA ROANO, BRUNO RYCE, CLYDIA MMOS, ESTHER ESTULA, VINCEN LVAS, GERTRUDI DDRIGUEZ, FABI DDRIGUEZ, HOLG DJAS, ANGEL DJAS, HAYDEE DJO, MANUEL JBIANO, MARIA ALJANIN, DILJA ANCHEZ, ELIZAB HELTON, AGUEDA JECTON, AGUEDA JECTON, MARIE LLACRES, LUZ LAHOS, MARIE EISZ, KLARA HITLEY, MYRNA L, CARLOS LANTSELIS, VIR ARE, GLORIA JMAETA, FANNY  CUSTOMER	2,317.25	0.00	38,766.80		
								38,766.80		
					CATEGORY	2,317.25	0.00	38,766.80		

RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE			YSIDE CITYWIDE				PAGE 1	- 30	)9
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	IRST	
				SALES REGISTER			BILL WEEK ENI	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
105015	F /10 /10	000100	HEALEN ETDOM	DECLIN MANUADA	20 00		470 64	-	
195915	5/18/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		4/2.64		
195916	5/18/12	000122	HEALTH FIRST	BHAIRU, KOWSILI	56.00		945.28		
195917	5/18/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	Τ_	
195918	5/18/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		6/5.20	Τ_	
195919	5/18/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	Ţ	
195920	5/18/12	000122	HEALTH FIRST	CEBALLOS, ANA	40.00		675.20		
195921	5/18/12	000122	HEALTH FIRST	CHARITAR, RAMKA	25.00		422.00	I	
195922	5/18/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	Τ.	
195923	5/18/12	000122	HEALTH FIRST	DORNELLAS, STEL	8.00		135.04	Ι	
195924	5/18/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	12.00		202.56	I	
195925	5/18/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	16.00		270.08	I	
195926	5/18/12	000122	HEALTH FIRST	ESTEVES, JOSE	41.00		692.08	I	
195927	5/18/12	000122	HEALTH FIRST	FERGERSON, TINA	35.00		590.80	I	
195928	5/18/12	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
195929	5/18/12	000122	HEALTH FIRST	FONTANES, PEDRO	49.00		827.12	I	
195930	5/18/12	000122	HEALTH FIRST	FRANCISCO, RICH	54.00		911.52	I	
195931	5/18/12	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
195932	5/18/12	000122	HEALTH FIRST	HERRING, CHARLE	12.00		202.56	I	
195933	5/18/12	000122	HEALTH FIRST	KAUR, HARBANS	38.00		641.44	I	
195934	5/18/12	000122	HEALTH FIRST	LARA, TOMASA	28.00		472.64	I	
195935	5/18/12	000122	HEALTH FIRST	LAZALA, GLADYS	72.00		1,215.36	I	
195936	5/18/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	68.00		1,147.84	I	
195937	5/18/12	000122	HEALTH FIRST	MACARENA, SAHAR	63.00		1,063.44	I	
195938	5/18/12	000122	HEALTH FIRST	MARTIN, ARIANA	12.00		202.56	I	
195939	5/18/12	000122	HEALTH FIRST	ORTIZ, TULA	25.00		422.00	I	
195940	5/18/12	000122	HEALTH FIRST	RIVERA, CHRISTO	21.00		354.48	I	
195941	5/18/12	000122	HEALTH FIRST	RIVERA, EDDIE	6.00		101.28	I	
195942	5/18/12	000122	HEALTH FIRST	RIVERA, EDDIE	9.00		151.92	I	
195943	5/18/12	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
195944	5/18/12	000122	HEALTH FIRST	RUIZ JR, SAMUEL	17.00		286.96	I	
195945	5/18/12	000122	HEALTH FIRST	SALAZAR, LUZ MA	48.00		810.24	I	
195946	5/18/12	000122	HEALTH FIRST	SALHUANA, YOLAN	40.00		675.20	I	
195947	5/18/12	000122	HEALTH FIRST	SPIVEY, PATRICI	19.00		320.72	I	
195948	5/18/12	000122	HEALTH FIRST	ST ROMAINE, CLA	68.00		1,147.84	I	
195949	5/18/12	000122	HEALTH FIRST	SURIEL, GERTRUD	24.00		405.12	I	
195950	5/18/12	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	I	
195951	5/18/12	000122	HEALTH FIRST	WILLIAMS, RODNE	24.00		405.12	I	
				REFERENCE  BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DORNELLAS, STEL ESPAILLAT, AMPA ESPAILLAT, AMPA ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HERRING, CHARLE KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA ORTIZ, TULA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VEGA, GLORIA WILLIAMS, RODNE  CUSTOMER  CUSTOMER  CATEGORY	1,205.00	0.00	20,340.40		
				CATEGORY	1,205.00	0.00	20,340.40		<u>_</u>

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE R S A L				PAGE 1	- 33	10
SALES JRN	IL # 0282	LOC 001	SUNNYSIDE CITYWIDE R	EG NY NY	_		NHP NEIGHBORE	HOOD I	HEALTH
			SAL	ES REGISTER	₹		BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195952	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS AHMED, UMARA	56.00		945.28	I	
195953	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS AKHTER, SELINA	45.00		759.60	I	
195954	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS ARDITTO, PATRIC	28.50		481.08	I	
195955	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS CHUKWUJIORAH, T	50.00		844.00	I	
195956	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS DIAZ, CARMEN	20.00		337.60	I	
195957	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS FERNANDEZ, MARI	12.00		202.56	I	
195958	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS FLORES, MARITZA	70.00		1,181.60	I	
195959	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS JONES, CYNTHIA	36.00		607.68	I	
195960	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KHALIL, RASHAN	36.00		607.68	I	
195961	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KHAN, FARUQUE	78.00		1,316.64	I	
195962	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KROLL, KATHERIN	39.00		658.32	I	
195963	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS MORALES FERNAD	43.00		725.84	I	
195964	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS MOSKOWITZ, RONA	29.75		502.18	I	
195965	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS OCASIO, VIRGINI	22.00		371.36	I	
195966	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ, JESS	25.00		422.00	I	
195967	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ, MARI	12.00		202.56	I	
195968	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS SALVATO, MARY	56.00		945.28	I	
195969	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS SCOTT, MICHAEL	40.00		675.20	I	
195970	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS SHEPPARD, ERMA	59.75		1,008.58	I	
195971	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS WELLS, WYNORIA	12.00		202.56	I	
195972	5/18/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS WILSON, SHERYL	34.00		573.92	I	
				CUSTOMER	804.00	0.00	13,571.52		
					804.00		13,571.52		

DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE	PAGE 1 - 311
ES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	FID NY CATHOLIC/FIDELIS
SALES REGISTER	BILL WEEK ENDING 5/25/12
DICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMI	T AMOUNT TYP SURPLUS
973 5/18/12 000126 NYS CATHOLIC/FIDELIS BATISTA, JOSE 49.00	826.63 I
974 5/18/12 000126 NYS CATHOLIC/FIDELIS BERGES, MARITZA 40.00	674.80 I
975 5/18/12 000126 NYS CATHOLIC/FIDELIS GIL, ALICIA M 35.00	590.45 I
976 5/18/12 000126 NYS CATHOLIC/FIDELIS LITMAN, GAIL 25.00	421.75 I
977 5/18/12 000126 NYS CATHOLIC/FIDELIS MARTINEZ, LUISA 84.00	1,417.08 I
978 5/18/12 000126 NYS CATHOLIC/FIDELIS PANOS, DESPINA 63.00	1,062.81 I
979 5/18/12 000126 NYS CATHOLIC/FIDELIS SAMOJEDNY, MICH 40.00	674.80 I
980 5/18/12 000126 NYS CATHOLIC/FIDELIS SZE, BECKY 33.00	556.71 I
981 5/18/12 000126 NYS CATHOLIC/FIDELIS VARGAS, RAOUEL 63.00	1,062.81 I
0,10,11 000110 1110 011110210,11121110 111101110,11112011	
CUSTOMER 432.00 0.00	7,287.84
CATEGORY 432.00 0.00	7,287.84

RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 312 SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY UHC UNITED HEALTH									
SALES UKN	L # 0202	HOC 001	SUNNISIDE CITIWIDE	SALES REGISTER			BILL WEEK EN		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195982	5/18/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	60.00		1,029.60	I	
195983	5/18/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	24.00		411.84	I	
195984	5/18/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	15.00		257.40	I	
195985	5/18/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I	
195986	5/18/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I	
				CUSTOMER	183.00	0.00	3,140.28		
				CATEGORY	183.00	0.00	3,140.28		

RUN DATE SALES JRN	, - ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 EHP EMBLEM H	- 31 EALTH	13
511225 014.	2    0202	200 001	5011115155 011111151	SALES REGIST	E R		BILL WEEK EN		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195987	5/18/12	000114	EMBLEM HEALTH	CAMPBELL, CARO	L 21.50		301.00	I	
195988	5/18/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
195989	5/18/12	000114	EMBLEM HEALTH	GAFFNEY, FREDE	R 20.00		280.00	I	
195990	5/18/12	000114	EMBLEM HEALTH	JACKSON, FRANC	E 35.00		490.00	I	
195991	5/18/12	000114	EMBLEM HEALTH	KEATON, CATHER	I 84.00		1,176.00	I	
195992	5/18/12	000114	EMBLEM HEALTH	REYNOLDS, HARR	I 12.00		168.00	I	
195993	5/18/12	000114	EMBLEM HEALTH	WESTFIELD, BRE	N 56.00		784.00	I	
				CUSTOMER	312.50	0.00	4,375.00		
				CATEGORY	312.50	0.00	4,375.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG	NY NY			PAGE 1 HIP HEALTH I	- 31 NSURAN	
				S A L E	S REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195994	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	AHMAD, AMATUL	20.00		337.60	I	
195995	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	54.00		911.52	I	
195996	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	62.00		1,046.56	I	
195997	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	20.00		337.60	I	
195998	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	30.00		506.40	I	
195999	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	PARADISE, ANITA	16.00		270.08	I	
196000	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	SHAH, HANSIKABE	5.00		84.40	I	
196001	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	16.00		270.08	I	
196002	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	20.00		337.60	I	
196003	3/30/12	000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	24.00		405.12	Ι	
					CUSTOMER	267.00	0.00	4,506.96		
					CATEGORY	267.00	0.00	4,506.96		

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SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HPS HEALTH PI		
				SALES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196004	5/18/12	000138	HEALTH PLUS PHSP, INC	DENNISON, KELVI	28.00		476.00	I	
196005	5/18/12	000138	HEALTH PLUS PHSP, INC	ESPERSON, CLAUD	16.00		272.00	I	
196006	5/18/12	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	24.00		408.00	I	
196007	5/18/12	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	25.00		425.00	I	
196008	5/18/12	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	18.00		306.00	I	
				CUSTOMER	111.00	0.00	1,887.00		
				CATEGORY	111.00	0.00	1,887.00		

			YSIDE CITYWIDE	DEG MY MY			PAGE 1 -	- 316
SALES JRN	IL # 0282	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			MPH METROPLUS	
				SALES REGISIER			BILL WEEK END	ING 5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
196009	5/18/12	000130	METROPLUS HEALTH	ANDERSON, BETH	26.00		445.90	I
196010	5/18/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I
196011	5/18/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	35.00		600.25	I
196012	5/18/12	000130	METROPLUS HEALTH	BEDOYA, MONICA BRACERO, HELEN BRIGGS, LOUIS CORDERO, ROSEND DAVIS, ANGIE DEWANJEE, MIRA	56.00		960.40	I
196013	5/18/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS	36.00		617.40	I
196014	5/18/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I
196015	5/04/12	000130	METROPLUS HEALTH METROPLUS HEALTH METROPLUS HEALTH	DAVIS, ANGIE	121.00		2,075.15	I
196016	5/18/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I
196017	5/04/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	16.00		274.40	I
196018	5/18/12	000130	METROPLUS HEALTH	GALAS, TERESA			600.25	I
196019	5/18/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I
196020	5/18/12	000130	METROPLUS HEALTH	PERSAD, USHA	16.00		274.40	I
196021	5/18/12	000130	METROPLUS HEALTH	PERSAD, USHA	35.00		600.25	I
196022	5/18/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA	56.00		960.40	I
196023	5/18/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	24.00		411.60	I
196024	5/18/12	000130	METROPLUS HEALTH	RYALS, CHARLES	4.00		68.60	I
196025	5/11/12	000130	METROPLUS HEALTH METROPLUS HEALTH	SANTORO, MATTHE SHUMON, NUK-FNU	48.00		823.20	I
196026	5/18/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20	I
196027	5/18/12	000130	METROPLUS HEALTH	VALLE, BLASINA	45.00		771.75	I
				CUSTOMER			13,359.85	
				CATEGORY	779.00	0.00	13,359.85	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE		G NY NY			PAGE 1 WEL WELCARE		
				SALI	ES REGISTER			BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196028	5/18/12	000124	WELCARE OF NEW YORK,	INC.	GENAO, DANIELA	55.00		946.00	I	
196029	5/18/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH	45.50		782.60	I	
196030	5/18/12	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	42.00		722.40	I	
196031	5/18/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	18.00		309.60	I	
196032	5/18/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	35.75		614.90	I	
					CUSTOMER	196.25	0.00	3,375.50		
					CATEGORY	196.25	0.00	3,375.50		

			YSIDE CITYWIDE	DEC 1	NT17 NT17				- 318
SALES JRN	L # U282	LOC 001	SUNNYSIDE CITYWIDE	REG I				NPS NY PRESBYT BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
196033	5/18/12	000134	NY-PRESBYTERIAN SYSTEM	1 SELECT	KARASSAVIDES, A	35.00		600.60	I
					CATEGORY	35.00	0.00	600.60	

RUN DATE 05/23/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 319 SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY AMG AMERIGROUP									
	_	200 001	SOUNTEDED CITIVIDE	SALES REGISTER			BILL WEEK ENI		5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196034	5/18/12	000132	AMERIGROUP	FERNANDEZ, NORK	42.00		708.54	I	
196035	5/18/12	000132	AMERIGROUP	GUERRA, LORRAIN	62.00		1,045.94	I	
196036	5/18/12	000132	AMERIGROUP	HAWKINS S, MA	70.00		1,180.90	I	
196037	5/04/12	000132	AMERIGROUP	LINARES, NANCY	24.00		404.88	I	
196038	5/18/12	000132	AMERIGROUP	PRUITT, JOHNNY	8.00		135.04	I	
				CUSTOMER	206.00	0.00	3,475.30		
				CATEGORY	206.00	0.00	3,475.30		

		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			PAGE 1 PAR PRIVATE	- 32	20
BALLED OILL	iL π 0202	100 001	S A L E				BILL WEEK EN	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196039 196040 196041 196042 196043 196044	5/18/12 5/18/12 5/18/12 5/18/12 5/18/12 5/18/12	000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES	CAIALA, SALLY GRECH, JANE KOZHUSHICO, ROZ MANIACE, AGNES MANIACE, VINCEN TUCCI, DOROTHY	3.00		29.00 116.00 54.00 43.50 58.00 116.00	I I I I I	
				CUSTOMER	29.00	0.00	416.50		
196045	5/18/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	16.00		248.00	I	
196046 196047	5/18/12 5/18/12	000049 000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE MORSHELINA, NAS	25.00 15.00		344.75 206.85	I	
				CUSTOMER	40.00	0.00	551.60		
196048	5/18/12	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
196049	5/18/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	100.00	0.00	2,678.10		

RUN DATE (	, - ,	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 3 CAS CHILDREN'S AI BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196050 196051 196052 196053	5/18/12 5/18/12 5/18/12 5/18/12	000088 000088 000088 000088	CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI SALAS, HELENA	25.00 4.00 4.00 23.50		387.50 I 62.00 I 62.00 I 364.27 I	
				CUSTOMER	56.50	0.00	875.77	
				CATEGORY	56.50	0.00	875.77	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3: PAR PRIVATE BILL WEEK ENDING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196054	5/18/12	000098	MILDRED PANSE	PANSE, MILDRED	20.00		310.00 I	
				CATEGORY	20.00	0.00	310.00	

RUN DATE ( SALES JRN)		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVE BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196055 196056	5/18/12 5/18/12	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	25.00 19.50		356.25 277.88	I I
				CUSTOMER	44.50	0.00	634.13	
				CATEGORY	44.50	0.00	634.13	

5/25/12
SURPLUS

RUN DATE	05/23/12	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 32	5
SALES JRN	L # 0282	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			CCM COMPREHEN	ISIVE	CARE MGMT
				SALE	S REGISTER			BILL WEEK END	DING	5/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196059	5/18/12	000150	COMPREHENSIVE CARE	MANAGEMENT	BONES, ANA	12.00		169.20	I	
196060	5/11/12	000150	COMPREHENSIVE CARE	MANAGEMENT	GARCIA, MARIA	16.00		225.60	I	
196061	5/18/12	000150	COMPREHENSIVE CARE	MANAGEMENT	GARCIA, MARIA	40.00		564.00	I	
196062	5/18/12	000150	COMPREHENSIVE CARE	MANAGEMENT	ROSARIO, CELEST	34.75		489.98	I	
					CUSTOMER	102.75	0.00	1,448.78		
					CATEGORY	102.75	0.00	1,448.78		

RUN DATE 05/23/12 - SALES JRNL # 0282		SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE		REG NY NY SALES REGISTER			PAGE 1 - 326 PAR PRIVATE BILL WEEK ENDING 5/25/12		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE		RS TAX AMT	AMOUNT		SURPLUS
196063	5/18/12	000155	ROSEMARY JIBAJA	JIBAJA, RO			2,676.00	I	BOILT HOD
196064	5/18/12	000155	MR. BRUCE J. TUCCI	TUCCI, DOF		00	62.00	I	
				,					
196065	5/18/12	002215	KEITH SALMON	LAWRANCE,			322.00	I	
196066	5/18/12	003108	NIGRO, CATHERINE	NIGRO, CAT			310.00	I	
196067	5/18/12	003743	VICTOR NICASSIO	NICASSIO,	VICTO 13.	00	201.50	I	
196068	5/18/12	004784	CAMILLERI, JOSEPH	CAMILLERI,	JOSE 20.	00	270.00	I	
196069	5/18/12	006337	STEPHEN EDEL	EDEL, CANI	DACE 72.	25	1,143.89	I	
196070	5/18/12	007630	MAUREEN MAIORANA	MAIORANA,	MAURE 7.	75	125.94	I	
196071	5/18/12	007631	MICHAEL MAIRANO	MAIORANA,	MICHE 12.	00	195.00	I	
196072	5/18/12	007883	ABBAMONTE, RUTH	ABBAMONTE,	RUTH 6.	00	99.00	I	
196073	5/18/12	009498	LOUIS LE NOACH	LENOACH, I	LOUIS 9.	00	148.50	I	
196074	5/18/12	009566	ELIZABETH CERNY	CERNY, ELI	ZABET 25.	00	387.50	I	
196075	5/18/12	009605	OLGA OBYMAKO	OBYMAKO, O	DLGA 6.	00	93.00	I	
196076	5/18/12	009752	PETER CAPORASO	CAPORASO,	VINCE 12.	00	204.00	I	
196077	5/18/12	009854	HELEN TAYLOR	HERNANDEZ,	FRAN 4.	00	62.00	I	
196078	5/18/12	010269	ANGELINA MARASA	MARASA, AN	IGELIN 9.	00	139.50	I	
196079	5/18/12	010352	BETTIE GIACOMO	GIACOMO, E	BETTIE 4.	00	62.00	I	
196080	5/18/12	010375	DOMINICA IRAOLA	IRAOLA, LI	ILIAN 9.	00	146.25	I	
196081	5/18/12	010377	DOMINICA IRAOLA	IRAOLA, AN	TONIO 9.	00	146.25	I	
196082	5/18/12	010530	DANA SITILDES	ANSELMI, E	PETER 4.	00	62.00	I	
				CATE	 EGORY 434.		6,856.33		
				LOCA	ATION 21,740.		334,755.01		
				COME	PANY 21,740.	00 0.00	334,755.01		

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SALES JRNL # 0282 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 5/25/12

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

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