	08/07/13 - IL # 0345		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK ENI		1 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252838 252839 252840 252841 252842 252843 252844 252845 252846 252847 252848 252849 252850 252851 252852 252853 252854	8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13	000008 000008 000008 000008 000008 000008 000008 000008 000008 000008 000008 000008		ABINANTI, IRENE ABINANTI, IRENE ACOSTA, ALBERTO ACOSTA, ALBERTO ADAMES, OLGA ADAMES, OLGA ADAMES, RICARDO ADAMES, RICARDO ADAMS, MYRIAM ADAMS, MYRIAM ADAMS, MYRIAM ADAMS, MYRIAM ADAMS, MYRIAM ADAMS, MYRIAM AFZAL, AMIR AGUILAR-PROCE, AGUILAR-PROCE, AHMED, BALAL AHMED, BALAL AHMED, BALAL	15.50 20.00 10.00 15.00 4.75 25.00 5.00 10.00 49.75 20.00 4.00 35.00 14.00 3.00		256.96 248.93 321.20 160.60 240.90 76.29 401.50 80.30 160.60 798.99 321.20 64.24 562.10 224.84 48.18 144.54 64.24		
				CUSTOMER	260.00	0.00	4,175.61		
				CATEGORY	260.00	0.00	4,175.61		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
252855 252856	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	25.00 10.00		401.50 I 160.60 I	
				CUSTOMER	35.00	0.00	562.10	
				CATEGORY	35.00	0.00	562.10	

			YSIDE CITYWIDE	DEC MY MY			PAGE 1 -	3
SALES JRN	ш # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252857 252858	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 4.00		128.48 I 64.24 I	
				CUSTOMER	12.00	0.00	192.72	
				CATEGORY	12.00	0.00	192.72	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADULT	4
DILLEG GIAV	1 1 0313	100 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252859 252860	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	40.00 16.00		642.40 I 256.96 I	
	0, 02, 20			CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	5
SALES UKN	п # ОЗ43	LOC 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
252861 252862	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, ~-	6.00 3.00		96.36 I 48.18 I	
				CUSTOMER	9.00	0.00	144.54	
				CATEGORY	9.00	0.00	144.54	

			YSIDE CITYWIDE				PAGE 1 -	· ·
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			S Z	ALES REGISTER	<u>.</u>		BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
252863	8/02/13	000008	VISITING NURSE SERVICE	AMOBARAK, MIKHA	3.00		48.18	I
252864	8/02/13	800000	VISITING NURSE SERVICE	AMOBARAK, MIKHA	4.00		64.24	I
252865	8/02/13	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	32.00		513.92	I
252866	8/02/13	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	16.00		256.96	I
252867	8/02/13	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	12.00		192.72	I
252868	8/02/13	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	8.00		128.48	I
252869	8/02/13	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	39.75		638.39	I
252870	8/02/13	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	16.00		256.96	I
252871	8/02/13	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	27.00		433.62	I
				CUSTOMER	157.75	0.00	2,533.47	
				CATEGORY	157.75	0.00	2,533.47	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	7
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDIN	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
252872	8/02/13	000008	VISITING NURSE SERVICE	ANDREWS, JOHNNI	9.00		144.54 I	
252873	8/02/13	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	18.00		289.08 I	
				CUSTOMER	27.00	0.00	433.62	
				COSTOMER	27.00	0.00	433.02	
				CATEGORY	27.00	0.00	433.62	

			YSIDE CITYWIDE						8
SALES JRNL	# 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		•
			i	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252874	8/02/13	000008	VISITING NURSE SERVICE	ANGULO, ELCY	21.00		337.26	I	
252875	8/02/13	800000	VISITING NURSE SERVICE	ANGULO, ELCY	14.00		224.84	I	
				CUSTOMER	35.00	0.00	562.10		
				COSTOMER	35.00	0.00	302.10		
				CATEGORY	35.00	0.00	562.10		

			YSIDE CITYWIDE	DEC NV	2777			PAGE 1		9
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	-	NY EGISTE	' p		VCP CHOICE L BILL WEEK EN		8/09/13
				N GELAG		1 10		DIDD WEEK EN	DING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
050086	0 /00 /10	000000		7.00	3.7.7.0.7	42.00		600 50	_	
252876	8/02/13	000008	VISITING NURSE SERV	- ,	ALICE	43.00		690.58	Τ	
252877	8/02/13	800000	VISITING NURSE SERV	ICE ANUT,	ALICE	18.00		289.08	I	
252878	7/19/13	800000	VISITING NURSE SERV	ICE AOUN,	ODETTE	6.00		96.36	I	
252879	8/02/13	800000	VISITING NURSE SERV	ICE AOUN,	ODETTE	18.00		289.08	I	
252880	8/02/13	800000	VISITING NURSE SERV	ICE AOUN,	ODETTE	12.00		192.72	I	
252881	8/02/13	800000	VISITING NURSE SERV	ICE ARHOI	EKAS, ATHI	7.75		124.47	I	
					=					
					CUSTOMER	104.75	0.00	1,682.29		
					-	104 85		1 600 00		
					CATEGORY	104.75	0.00	1,682.29		

RUN DATE 08/07/13 SALES JRNL # 0345	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCM VNS	10
		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
252882 8/02/13 252883 8/02/13	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	40.00 16.00		642.40 I 256.96 I	
		CUSTOMER	56.00	0.00	899.36	
		CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 LTC NURSING	_	11 /O WALLS (LT
				SALES R	EGISTI	E R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252884 252885	8/02/13 8/02/13	800000	VISITING NURSE SERVICE		ABUL	7.00 6.00		112.42 96.37	I	
252885	8/02/13	000008	VISITING NURSE SERVICE	AZAD,	ABUL	6.00		90.37	1	
					CUSTOMER	13.00	0.00	208.79		
					CATEGORY	13.00	0.00	208.79		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	12
SALES OW	T # 0343	ПОС 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252886 252887	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BADILLO, JOVITA BADILLO, JOVITA	8.00 4.00		128.48 I 64.24 I	
				CUSTOMER	12.00	0.00	192.72	
				CATEGORY	12.00	0.00		

RUN DATE 08/07/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13
SALES JRNL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		\$	SALES REGISTER			BILL WEEK ENDING 8/09/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
252888 8/02/13	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	20.00		321.20 I
252889 8/02/13	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	10.00		160.60 I
			CUSTOMER	30.00	0.00	481.80
			CATEGORY	30.00	0.00	481.80

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		14
SALES URN	ш # 0343	LOC 001		SALES REGISTER			BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252890	8/02/13	000008	VISITING NURSE SERVICE	BANEGAS, SANTOS	2.00		32.12	I	
252891	8/02/13	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	60.00		963.60	I	
252892	8/02/13	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	24.00		385.44	I	
				CUSTOMER	86.00	0.00	1,381.16		
				CATEGORY	86.00	0.00	1,381.16		

RUN DAT	E 08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	15
SALES J	RNL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252893	8/02/13	800000	VISITING NURSE SERVICE	BARLAS, ALEXAND	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
252894	8/02/13	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	34.50		554.07 I	
252895	8/02/13	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	14.00		224.84 I	
				CUSTOMER	48.50	0.00	778.91	
				CATEGORY	48.50	0.00	778.91	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252896	8/02/13	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	14.00		224.84 I	
252897	8/02/13	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	7.00		112.42 I	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

			YSIDE CITYWIDE				PAGE 1 - 1	8
SALES JRN	L # 0345	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252898 252899	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	24.00 6.00		385.44 I 96.36 I	
				CUSTOMER	30.00	0.00	481.80	
				CATEGORY	30.00	0.00	481.80	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	SALES REGISTER			BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
252900	8/02/13	000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	14.00		224.84 I	
252901	8/02/13	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	10.00		160.60 I	
				CUSTOMER	24.00	0.00	385.44	
				CATEGORY	24.00	0.00	385.44	

-	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI		20
SALES JRN	ш # 0345	TOC 001	SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER	2		BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252902	8/02/13	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	27.75		445.67	I	
252903	8/02/13	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	20.00		321.20	I	
252904	8/02/13	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	24.00		385.44	I	
252905	8/02/13	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	16.00		256.96	I	
252906	7/26/13	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	1.00		16.06	I	
252907	8/02/13	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	17.50		281.05	I	
252908	8/02/13	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	12.00		192.72	I	
252909	8/02/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	12.00		192.72	I	
252910	8/02/13	000008	VISITING NURSE SERVICE	BONILLA, LYDIA	8.00		128.48	I	
				CUSTOMER	138.25	0.00	2,220.30		
				CATEGORY	138.25	0.00	2,220.30		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	21
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252911	8/02/13	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	15.00		240.90 I	
252912	8/02/13	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	10.00		160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

			YSIDE CITYWIDE						22
SALES JRN	r∟ # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			S I	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252913	8/02/13	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		192.72	I	
252914	8/02/13	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	8.00		128.48	I	
252915	8/02/13	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	23.00		369.38	I	
252916	8/02/13	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	12.00		192.72	I	
252917	8/02/13	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	40.00		642.40	I	
252918	8/02/13	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	20.00		321.20	I	
252919	8/02/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	59.75		959.59	I	
252920	8/02/13	000008	VISITING NURSE SERVICE	BRACERO, HELEN	24.00		385.44	I	
252921	8/02/13	000008	VISITING NURSE SERVICE	BRINDIS, MARIA	8.00		128.48	I	
252922	8/02/13	000008	VISITING NURSE SERVICE	BRINDIS, MARIA	4.00		64.24	I	
252923	8/02/13	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	6.00		96.36	I	
252924	8/02/13	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	3.00		48.18	I	
				CUSTOMER	219.75	0.00	3,529.19		
				CATEGORY	219.75	0.00	3,529.19		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 ADU ADULT	
SALES UKN	ш # 0343	TOC 001		SALES REGISTER			BILL WEEK ENDING 8/09	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
252925 252926	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BUSCARELLO, JOH BUSCARELLO, JOH	40.00 16.00		642.40 I 256.96 I	
232920	0/02/13	000008	VISITING NORSE SERVICE	·				
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN	IYSIDE CITYWIDE	DEC MY MY			PAGE 1 VCP CHOICE L		24
SALES URN	ь # 0345	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			BILL WEEK EN		8/09/13
			5		•		5122 N22N 2N	2110	0,00,10
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252927	8/02/13	000008	VISITING NURSE SERVICE	CABRERA, HERMIN	13.00		208.78	т	
252927	8/02/13	000008	VISITING NURSE SERVICE	CABRERA, HERMIN	8.00		128.48		
252929	8/02/13	000008	VISITING NURSE SERVICE	CAIPO, MATILDE	21.00		337.26	T	
252930	8/02/13	000008	VISITING NURSE SERVICE	CAIPO, MATILDE	14.00		224.84	Ī	
252931	8/02/13	000008	VISITING NURSE SERVICE	CALABRO, JOSEPH	49.00		786.94	Ī	
252932	8/02/13	000008	VISITING NURSE SERVICE	CALABRO, JOSEPH	20.00		321.20	I	
				CUSTOMER	125.00	0.00	2,007.50		
				CATEGORY	125.00	0.00	2,007.50		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCM VNS	- 25
DALLS OW	ш # ОЭ4Э	100 001		SALES REGISTER			BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
252933 252934	7/26/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 32.00		128.48 513.92	I
252935	8/02/13	000008	VISITING NURSE SERVICE	- ,	16.00		256.96	Ī
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	 899.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	26
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252936 252937	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	40.00		642.40 I 256.96 I	
252937	0/02/13	000008	VISITING NURSE SERVICE	CAMBARA, JOSEFA	16.00		250.90 1	
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 LTC NURSING	- 2 HOMEW/	
BALLO ORN	ш т 0515	100 001			EGISTE	R		BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252938 252939	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		ADELINA ADELINA	30.00 12.00		481.80 192.72	I	
232939	0/02/13	000008	VISITING NURSE SERVICE	CANO,	ADELINA					
					CUSTOMER	42.00	0.00	674.52		
					CATEGORY	42.00	0.00	674.52		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
SALES UKN	ш # 0343	LOC 001		SALES REGISTER			BILL WEEK END:	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
252940 252941	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CAPORASO, VINCE CAPORASO, VINCE	59.75 24.00		959.59 385.44	I I
				CUSTOMER	83.75	0.00	1,345.03	
				CATEGORY	83.75	0.00	1,345.03	

			YSIDE CITYWIDE	DEG NY NY			PAGE 1 - 29)
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252942 252943	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		23.00 12.00		369.38 I 192.72 I	
				CUSTOMER	35.00	0.00	562.10	
				CATEGORY	35.00	0.00	562.10	

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	50
DALLS OW	н озтэ	ПОС 001		ALES REGISTER	2		BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
252944	8/02/13	000008	VISITING NURSE SERVICE	CARDONA, MARIA	25.00		401.50	I
252945	8/02/13	800000	VISITING NURSE SERVICE	CARDONA, MARIA	10.00		160.60	I
252946	8/02/13	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	59.50		955.57	I
252947	8/02/13	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	23.00		369.38	I
252948	8/02/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	12.00		192.72	I
252949	8/02/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	8.00		128.48	I
				CUSTOMER	137.50	0.00	2,208.25	
				CATEGORY	137.50	0.00	2,208.25	

RUN DATE (SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 3 ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252950	8/02/13	800000	VISITING NURSE SERVICE	CARRASCO, JACOB	1.00		16.06 I	
				CATEGORY	1.00	0.00	16.06	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 32 LAD NURSING HOME W	O WALLS LT
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252951	8/02/13	000008	VISITING NURSE SERVICE		39.50		634.37 I	
252952	8/02/13	000008	VISITING NURSE SERVICE	CARTAGENA, FRAN	16.00		256.96 I 	
				CUSTOMER	55.50	0.00	891.33	
				CATEGORY	55.50	0.00	891.33	

			YSIDE CITYWIDE				PAGE 1		33
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			VCP CHOICE LE		
			S	ALES REGISTER			BILL WEEK ENI	DING	8/09/13
TATTOTOTOTI	DARR	CITCE NO	GUGEOMED NAME		HOHDG	max avm	AMOTINE	m.r.	GIIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252953	7/26/13	000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	21.00		337.26	I	
252954	8/02/13	000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	26.50		425.59	I	
252955	8/02/13	000008	VISITING NURSE SERVICE		7.00		112.42	Ī	
252956	8/02/13	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME			192.72	T	
252957	8/02/13	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME			128.48	T	
252958	8/02/13	000008	VISITING NURSE SERVICE	CERNILLI, MARIA			337.26	T	
252959	8/02/13	000008	VISITING NURSE SERVICE	CERRA, ADA			128.48	T	
252960	8/02/13	000008	VISITING NURSE SERVICE	CERRA, ADA	4.00		64.24	T	
252961	8/02/13	000008	VISITING NURSE SERVICE	CESPEDES, CRIST			240.90	Ī	
252962	8/02/13	000008	VISITING NURSE SERVICE	CESPEDES, CRIST			80.30	Ī	
252963	7/26/13	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE			321.20	T	
252964	8/02/13	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	14.00		224.84	T	
252965	8/02/13	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	8.00		128.48	T	
252966	8/02/13	000008	VISITING NURSE SERVICE	CHARITAR, RAMKA			385.44	Ī	
252967	8/02/13	000008	VISITING NURSE SERVICE	CHARITAR, RAMKA			192.72	T	
252968	8/02/13	000008	VISITING NURSE SERVICE	CHARLES PIERRE,			289.08	T	
252969	8/02/13	000008	VISITING NURSE SERVICE	CHARLES PIERRE,			192.72	T	
202303	0,02,13	00000	VIDITING NONDE BENVIOL						
				CUSTOMER	235.50	0.00	3,782.13		
				CATEGORY	235.50	0.00	3,782.13		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	ME W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDIN	IG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
252970	7/26/13	000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		160.60	
252971	8/02/13	800000	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		160.60 I	
252972	8/02/13	800000	VISITING NURSE SERVICE	CHARLES, JOSE	5.00		80.30	•
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	_	5
Bridde Grav	L 0313	100 001		SALES REGISTER			BILL WEEK END		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP	SURPLUS
252973	8/02/13	000008	VISITING NURSE SERVICE	·	57.25		919.44	I	
252974 252975	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	24.00 24.00		385.44 385.44	I I	
252976	8/02/13	000008	VISITING NURSE SERVICE	CHIANETTA, JOSE	16.00		256.96	I	
				CUSTOMER	121.25	0.00	1,947.28		
				CATEGORY	121.25	0.00	1,947.28		

RUN DATE 08/07/13			DEC MY MY			PAGE 1 - 36	
SALES JRNL # 0345	5 LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 8/09	/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
252977 7/26/13 252978 8/02/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	CHOPRA, DARSHAN CHOPRA, DARSHAN	7.00 14.00		112.42 I 224.84 I	
			CUSTOMER	21.00	0.00	337.26	
			CATEGORY	21.00	0.00	337.26	

			YSIDE CITYWIDE				PAGE 1	- 37
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
			S	SALES REGISTER			BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
252979	6/21/13	000008	VISITING NURSE SERVICE	CHUCK, ENA	5.00		80.30	I
252980	8/02/13	000008	VISITING NURSE SERVICE	CHUCK, ENA	21.75		349.31	I
252981	8/02/13	800000	VISITING NURSE SERVICE	CHUCK, ENA	8.00		128.48	I
252982	8/02/13	800000	VISITING NURSE SERVICE	CIMI, SAVA	18.00		289.08	I
252983	8/02/13	800000	VISITING NURSE SERVICE	CIMI, SAVA	12.00		192.72	I
				CUSTOMER	64.75	0.00	1,039.89	
				CATEGORY	64.75	0.00	1,039.89	

			YSIDE CITYWIDE				PAGE 1 - 38	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 8/09/	13
							5122 N221 2N51110 0,007	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
252984 252985	8/02/13 8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 6.00		144.54 I 96.36 I	
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

			YSIDE CITYWIDE	DEC MY MY			11102 -		39 /O WALLS /LE
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			LTC NURSING BILL WEEK EN	,	8/09/13
			5	ALLO KECIOIEK			DILL WEEK EN	DING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252986	8/02/13	800000	VISITING NURSE SERVICE	COLLER, FELISA	11.50		184.70	I	
252987	8/02/13	000008	VISITING NURSE SERVICE	COLLER, FELISA	8.00		128.48	I	
252988	8/02/13	800000	VISITING NURSE SERVICE	COLLER, JOSE	12.00		192.72	I	
252989	8/02/13	000008	VISITING NURSE SERVICE	COLLER, JOSE	8.00		128.48	I	
252990	8/02/13	000008	VISITING NURSE SERVICE	COLON, ANTONIA	30.00		481.80	I	
252991	8/02/13	800000	VISITING NURSE SERVICE	COLON, ANTONIA	13.75		220.83	I	
				CUSTOMER	83.25	0.00	1,337.01		
				CATEGORY	83.25	0.00	1,337.01		

RUN DATE SALES JRN		- SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATI BILL WEEK END	E CARE PROGRAM
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
252992 252993 252994	5/03/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CORDERO, NELLY CORDERO, NELLY CORDERO, NELLY	12.00 120.00 48.00		192.72 1,927.20 770.88	I I I
				CUSTOMER	180.00	0.00	2,890.80	
				 CATEGORY	180.00	0.00	2,890.80	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 4	41
SALES UKN	ш # 0343	TOC 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252995	8/02/13	000008	VISITING NURSE SERVICE	CORREA, MARGARI	18.00		289.08 I	
252996	8/02/13	800000	VISITING NURSE SERVICE	CORREA, MARGARI	12.00		192.72 I	
252997	8/02/13	000008	VISITING NURSE SERVICE	COSTA, ANTOINET	15.00		240.90 I	
252998	8/02/13	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	10.00		160.60 I	
				CUSTOMER	55.00	0.00	883.30	
				CATEGORY	55.00	0.00	883.30	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 4	.2
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENI	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252999	8/02/13	000008	VISITING NURSE SERVICE	COSTA, ARSENE	38.00		610.28	I	
253000	8/02/13	800000	VISITING NURSE SERVICE	COSTA, ARSENE	16.00		256.96	I	
				CUSTOMER	54.00	0.00	867.24		
				CATEGORY	54.00	0.00	867.24		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	13
DALLO OIGV	н 0515	100 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
253001	8/02/13	000008	VISITING NURSE SERVICE	COVALIU, SIMION	11.50		184.69	I
253002	8/02/13	800000	VISITING NURSE SERVICE	COVALIU, SIMION	8.00		128.48	I
253003	8/02/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	50.00		803.00	I
253004	8/02/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	20.00		321.20	I
				CUSTOMER	89.50	0.00	1,437.37	
				CATEGORY	89.50	0.00	1,437.37	

RUN DATE 08/	/07/13 - SUP :	SUNNYSIDE CITY	YWIDE					PAGE 1	- 4	14
SALES JRNL #	# 0345 LOC (001 SUNNYSID	DE CITYWIDE	REG NY	NY			LAD NURSING	HOME W	M/O WALLS LT
				SALES R	EGISTE	R		BILL WEEK EN	DING	8/09/13
INVOICE# I	DATE CUST	NO CUSTOMER	NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252005	/02/12 0000	00 1710101110	MID CE CEDIA	an aniir	TIEGEOD	22.00		252 20	-	
	/02/13 00000		NURSE SERVI		, HECTOR	22.00		353.32	Τ Τ	
253006 8/	/02/13 00000	U8 VISITING	NURSE SERVI	CE CRUZ	, HECTOR	10.00		160.60	Т	
					- CIICHOMED	32.00	0.00	F12 02		
					CUSTOMER	32.00	0.00	513.92		
					CATEGORY	32.00	0.00	513.92		
					CAILGORI	32.00	0.00	313.72		

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	_	NY E G I S T E	E R		PAGE 1 VCP CHOICE L BILL WEEK EN	HCSA	45 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253008	8/02/13 8/02/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CRUZ, CRUZ,	JUANA JUANA LIDIA LIDIA	12.00 8.00 21.00 14.00		192.72 128.48 337.26 224.84	I I I	
					CUSTOMER	55.00	0.00	883.30		
					CATEGORY	 55.00	0.00	883.30		

RUN DATE 08/ SALES JRNL #	07/13 - SUP SUNN 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 46 LTC NURSING HOMEW/C BILL WEEK ENDING	
INVOICE# D.	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	02/13 000008 02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 10.00		240.90 I 160.60 I	
			CUSTOMER	25.00	0.00	401.50	
			CATEGORY	25.00	0.00	401.50	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 47 VCP CHOICE LHCSA	,
SALES UKN	T # 0343	TOC 001		SALES REGISTER				8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253013 253014	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		29.50 12.00		473.77 I 192.72 I	
				CUSTOMER	41.50	0.00	666.49	
				CATEGORY	41.50	0.00	 666.49	

			YSIDE CITYWIDE				PAGE 1	_	-
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGAT BILL WEEK END		E PROGRAM 8/09/13
				SALES KEGISIEK			DIDD WEEK END	ING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
053015	0 /00 /10	000000			0.00		144 54	_	
253015 253016	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	9.00 6.00		144.54 96.36		
255010	0/02/13	000000	VIBITING NORSE BERVICE						
				CUSTOMER	15.00	0.00	240.90		
				CATEGORY	15.00	0.00	240.90		

			YSIDE CITYWIDE						49
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		0 / 0 0 / 1 0
			S .	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253017	8/02/13	000008	VISITING NURSE SERVICE	DEBARRENECHE, E	21.00		337.26	I	
253018	8/02/13	800000	VISITING NURSE SERVICE	DEBARRENECHE, E	14.00		224.84	I	
253019	8/02/13	800000	VISITING NURSE SERVICE	DEBAZALAR, ANTO	18.00		289.08	I	
253020	8/02/13	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	26.00		417.56	I	
253021	8/02/13	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	12.00		192.72	I	
253022	8/02/13	800000	VISITING NURSE SERVICE	DELOSSANTOS, MA	19.50		313.17	I	
253023	8/02/13	800000	VISITING NURSE SERVICE	DELOSSANTOS, MA	14.00		224.84	I	
253024	8/02/13	000008	VISITING NURSE SERVICE	DELPOZO, MIGUEL	8.00		128.48	I	
253025	8/02/13	000008	VISITING NURSE SERVICE	DELUCA, ANTIONE	30.00		481.80	I	
253026	8/02/13	000008	VISITING NURSE SERVICE	DELUCA, ANTIONE	10.00		160.60	I	
253027	8/02/13	000008	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		48.18	I	
253028	8/02/13	800000	VISITING NURSE SERVICE	DEY, KRISHNA	2.75		44.17	I	
				CUSTOMER	178.25	0.00	2,862.70		
				CATEGORY	178.25	0.00	2,862.70		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	50
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			:	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253029	8/02/13	000008	VISITING NURSE SERVICE	DIAZ, ELEODORA	18.00		289.08	I	
253030	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, ELEODORA	12.00		192.72	I	
				CUSTOMER	30.00	0.00	481.80		
				CATEGORY	30.00	0.00	481.80		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	_	51
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LAD NURSING	HOME	W/O WALLS LT
			:	SALES R	EGIST	E R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253031	8/02/13	000008	VISITING NURSE SERVICE	DIAZ,	HILDA	4.00		64.24	I	
253032	8/02/13	800000	VISITING NURSE SERVICE	DIAZ,	HILDA	4.00		64.24	I	
					CUSTOMER	8.00	0.00	128.48		
					CATEGORY	8.00	0.00	128.48		

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	52
DALLS OIL	ш # 0343	HOC 001		ALES REGISTE	R		BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253033	8/02/13	000008	VISITING NURSE SERVICE	DIAZ, OLGA	30.00		481.80 I	
253034	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, OLGA	12.00		192.72 I	
253035	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, ROSA	24.00		385.44 I	
253036	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, ROSA	12.00		192.72 I	
253037	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, WILLIAM	35.00		562.10 I	
253038	8/02/13	800000	VISITING NURSE SERVICE	DIAZ, WILLIAM	14.00		224.84 I	
				CUSTOMER	127.00	0.00	2,039.62	
				CATEGORY	127.00	0.00	2,039.62	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 53 ADU ADULT	
SALES UKN	ш # 0343	TOC 001		SALES REGISTER				8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253039 253040	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	49.00 20.00		786.94 I 321.20 I	
				CUSTOMER	69.00	0.00	1,108.14	
				CATEGORY	69.00	0.00	1,108.14	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- !	54
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			S	SALES REGISTER			BILL WEEK ENI	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253041	8/02/13	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI	43.00		867.24	I	
253042	8/02/13	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	20.00		321.20	I	
253043	8/02/13	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	9.00		144.54	I	
253044	8/02/13	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	26.00		417.56	I	
253045	8/02/13	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	14.00		224.84	I	
				CUSTOMER	112.00	0.00	1,975.38		
				CATEGORY	112.00	0.00	1,975.38		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 55	5
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			:	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253046	8/02/13	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	6.00		96.36 I	
				CATEGORY	6.00	0.00	96.36	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 -	56
SALES JRNL	# 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
	8/02/13 8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	26.75 14.00		429.61 I 224.84 I	
253040	0/02/13	000008	VISITING NORSE SERVICE	ECHEGARAI, MARI			224.04 1	
				CUSTOMER	40.75	0.00	654.45	
				CATEGORY	40.75	0.00	654.45	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	57
SALES OR	ш # ОЗ-13	HOC 001		SALES REGISTER			BILL WEEK ENDI	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253049 253050	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	EDELMAN, MILDRE EDELMAN, MILDRE	9.00 6.00		144.54 96.36	[[
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	58
SALES JRN	L # 0345	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253051	8/02/13	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.50		72.27 I	
				CATEGORY	4.50	0.00	72.27	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - !	59
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	
			:	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253052	8/02/13	000008	VISITING NURSE SERVICE	EPSTEIN, GEORGE	12.00		192.72 I	
253053	8/02/13	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	8.00		128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				CODICIENT	20.00	0.00	522.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 6	0
SALES ON	₩ 0343	100 001		ALES REGISTER			BILL WEEK ENI		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253054	8/02/13	000008	VISITING NURSE SERVICE	ESPEJO, FLORENC	18.00		289.08	I	
253055	8/02/13	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	12.00		192.72	I	
253056	8/02/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	28.75		461.73	I	
253057	8/02/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	16.00		256.96	I	
253058	7/19/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	5.00		80.30	I	
253059	8/02/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	16.00		256.96	I	
253060	8/02/13	000008	VISITING NURSE SERVICE	ESPINAL, JOSE	10.00		160.60	I	
253061	8/02/13	800000	VISITING NURSE SERVICE	ESTADES, MARIA	30.00		481.80	I	
253062	8/02/13	800000	VISITING NURSE SERVICE	ESTADES, MARIA	13.50		216.81	I	
253063	8/02/13	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	14.00		224.84	I	
253064	8/02/13	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	7.00		112.42	I	
253065	8/02/13	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	3.00		48.18	I	
253066	8/02/13	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	3.00		48.18	I	
				CUSTOMER	176.25	0.00	2,830.58		
				CATEGORY	176.25	0.00	2,830.58		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		8/09/13
				SALES REGISIER			RILL MEEK ENI	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253067	8/02/13	000008	VISITING NURSE SERVICE	FAY, JULIA	14.00		224.84	I	
253068	8/02/13	000008	VISITING NURSE SERVICE	FELICIANO, JOAN	15.00		240.90	I	
253069	8/02/13	000008	VISITING NURSE SERVICE	FELICIANO, JOAN	6.00		96.36	I	
				CUSTOMER	35.00	0.00	562.10		
				CATEGORY	35.00	0.00	562.10		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253070	8/02/13	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	12.00		192.72 I	
253071	8/02/13	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	8.00		128.48 I	
253072	8/02/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	12.00		192.72 I	
253073	8/02/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	6.00		96.36 I	
				CUSTOMER	38.00	0.00	610.28	
				CATEGORY	38.00	0.00	610.28	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADU	63 LT
			S	GALES REGISTER			BILL WEEK ENDIN	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253074 253075	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FIGUEROA, EDNA FIGUEROA, EDNA	24.00 12.00		385.44 I 192.72 I	
233073	0/02/13	000000	VIBILING NORDE BERVICE	,				
				CUSTOMER	36.00	0.00	578.16	
				CATEGORY	36.00	0.00	578.16	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 64
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
253076	8/02/13	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	37.00		594.22	I
253077	8/02/13	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	16.00		256.96	I
				CUSTOMER	53.00	0.00	851.18	
				CUSTOMER	53.00	0.00	851.18	
				CATEGORY	53.00	0.00	851.18	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 65 VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 8/0	09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUI	RPLUS
253078	8/02/13	800000	VISITING NURSE SERVICE	FONG, ALEFINA	10.00		160.60 I	
253079	8/02/13	800000	VISITING NURSE SERVICE	FONG, ALEFINA	5.00		80.30 I	
253080	8/02/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	20.00		321.20 I	
253081	8/02/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	5.00		80.30 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	66
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	8/09/13 SURPLUS
253082	8/02/13	000008	VISITING NURSE SERVICE		11.75	IAX AMI	188.71 I	SURPLUS
233002	0/02/13	000000	VIBITING NORDE BERVICE					
				CATEGORY	11.75	0.00	188.71	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	67
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	V/O WALLS (LT
			;	SALES REGISTE	R		BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253083	8/02/13	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	24.00		385.44 I	
253084	8/02/13	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	16.00		256.96 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

			YSIDE CITYWIDE	DEC MY MY			-	68
SALES JRN	⊥ # ∪345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253085	8/02/13	000008	VISITING NURSE SERVI	CE FUNES, GEORGINA	25.00		401.50 I	
253086	8/02/13	800000	VISITING NURSE SERVI		10.00		160.60 I	
253087 253088	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVIOUSITING NURSE SERVIO	•	6.00 3.00		96.36 I 48.18 I	
	.,.,			·				
				CUSTOMER	44.00	0.00	706.64	
				CATEGORY	44.00	0.00	706.64	

	08/07/13 - L # 0345		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING 1 BILL WEEK EN	HOMEW/	59 O WALLS (LT 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253089 253090	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		13.00 11.75		208.78 188.71	I	
				CUSTOMER	24.75	0.00	397.49		
				CATEGORY	24.75	0.00	397.49		

RUN DATE	N DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 70									
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT			
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS		
253091	8/02/13	800000	VISITING NURSE SERVICE	GARCIA, CARMEN	8.00		128.48 I			
253092	8/02/13	800000	VISITING NURSE SERVICE	GARCIA, CARMEN	8.00		128.48 I			
253093	8/02/13	000008	VISITING NURSE SERVICE	GARCIA, MARIA	3.00		48.18 I			
253094	8/02/13	800000	VISITING NURSE SERVICE	GARCIA, MARIA	3.00		48.18 I			
				CUSTOMER	22.00	0.00	353.32			
				CATEGORY	22.00	0.00	353.32			

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	71
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				MEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDI	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253095	8/02/13	000008	VISITING NURSE SERVICE	GARCIA, OLGA	18.00		289.08	I
253096	8/02/13	800000	VISITING NURSE SERVICE	GARCIA, OLGA	12.00		192.72	I
				CUSTOMER	30.00	0.00	481.80	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		72
			S	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP	SURPLUS
253097 253098 253099	8/02/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GEBHARDT, DOROT GEORGE, MERCEDE GEORGE, MERCEDE	24.00 35.00 14.00		385.44 562.10 224.84	I I I	
				CUSTOMER	73.00	0.00	1,172.38		
				CATEGORY	73.00	0.00	1,172.38		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE	
				SALES REGISTER			BILL WEEK ENDIN	IG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253100	8/02/13	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	40.00		642.40	- -
253101	8/02/13	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	16.00		256.96	- -
				CUSTOMER	 56.00	0.00	899.36	
				COSTOMER	50.00	0.00	099.30	
				CATEGORY	56.00	0.00	899.36	

			YSIDE CITYWIDE				PAGE 1 - 74	4
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			·	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253102	8/02/13	000008	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	15.00		240.90 I	
253103	8/02/13	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	10.00		160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	75
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253104	8/02/13	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	15.25		244.92 I	
253105	8/02/13	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	13.50		216.82 I	
253106	8/02/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	23.00		369.38 I	
253107	8/02/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	10.50		168.63 I	
				CUSTOMER	62.25	0.00	999.75	
				CATEGORY	62.25	0.00	999.75	

RUN DATE	08/07/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253108	8/02/13	000008	VISITING NURSE SERVICE	GONZALEZ, DOLOR	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

			YSIDE CITYWIDE	DDG 1991				77
SALES JRN	L # ∪345	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253109	8/02/13	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	16.00		256.96 I	
				CATEGORY	16.00	0.00		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	78
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
				SALES REGISTEI	R		BILL WEEK ENDIN	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253110	8/02/13	000008	VISITING NURSE SERVICE	GONZALEZ, ELBA	15.00		240.90 I	
253111	8/02/13	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	10.00		160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				==-				
				CATEGORY	25.00	0.00	401.50	

			YSIDE CITYWIDE	DEG NY NY			PAGE 1 - 79	9
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253112 253113	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		15.00 5.00		240.90 I 80.30 I	
				CUSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 80 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 6.00		240.90 I 96.36 I	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253116	8/02/13	800000	VISITING NURSE SERVICE	GOYES, ELBA	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

			YSIDE CITYWIDE						82
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			VCP CHOICE LE		
			S	ALES REGISTER			BILL WEEK ENI	DING	8/09/13
T1770 T G 7	53.00	GTTGT 370	GUGEOVED MANE		*******		21/07777		G11D D1 11G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TAB	SURPLUS
253117	8/02/13	000008	VISITING NURSE SERVICE	GRAVER, EDNA	17.50		281.05	I	
253118	8/02/13	000008	VISITING NURSE SERVICE	GRAVER, EDNA	16.00		256.96	Ī	
253119	8/02/13	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL				Ī	
253120	8/02/13	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	7 00		112.42	T	
253121	8/02/13	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	60.00		963.60	T	
253122	8/02/13	000008	VISITING NURSE SERVICE	GUTIERREZ, ANGE	59.25		951.57	Ī	
253123	8/02/13	000008	VISITING NURSE SERVICE	GUTIERREZ, ANGE			385.44	T	
253124	8/02/13	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE			642.40	Ť	
253125	8/02/13	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	16.00		256.96	T	
253126	7/26/13	000008	VISITING NURSE SERVICE	HARRISON, GLORI	6.50		104.39	Ī	
253127	8/02/13	000008	VISITING NURSE SERVICE	HARRISON, GLORI			642.40	Ī	
253128	8/02/13	000008	VISITING NURSE SERVICE	HARRISON, GLORI	16.00		256.96	T	
253120	8/02/13	000008	VISITING NURSE SERVICE	HENAO, VICTORIA			256.96	I	
253125	8/02/13	000008	VISITING NURSE SERVICE	HENAO, VICTORIA			128.48	I	
253130	7/12/13	000008	VISITING NURSE SERVICE	HENDY, BERNICE	2 75		60.23	I	
253131	8/02/13	000008	VISITING NURSE SERVICE	HENDY, BERNICE			232.87	± +	
253132	8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HENDY, BERNICE	14.00		224.84		
233133	0/02/13	000008	VISITING NORSE SERVICE	HENDI, BERNICE	14.00		224.04		
				CUSTOMER	386.25	0.00	6,203.20		
				2 2 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			· , · · · · · ·		
				CATEGORY	386.25	0.00	6,203.20		

			YSIDE CITYWIDE				PAGE 1 - 8	3
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
							DIEL WEEK ENDING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
252124	0 /00 /13	000000	TITATETNA NUDAR ARRITAR	HEND TOLLEG MAD T	22 00		F12 00 T	
253134 253135	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - ,	32.00 16.00		513.92 I 256.96 I	
233133	0/02/13	000000	VIBILING NORDE BERVICE					
				CUSTOMER	48.00	0.00	770.88	
				CATEGORY	48.00	0.00	770.88	

			YSIDE CITYWIDE				PAGE 1		:
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		0.400.410
			i	SALES REGISTER			BILL WEEK END	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253136	8/02/13	000008	VISITING NURSE SERVICE	HERNANDEZ, JUAN	39.75		638.39	I	
253137	8/02/13	800000	VISITING NURSE SERVICE	HERNANDEZ, JUAN	6.00		96.36	I	
				CUSTOMER	45.75	0.00	734.75		
				CATEGORY	45.75	0.00	734.75		

RUN DATE 08/07/13 - SUP SUNNYS	SIDE CITYWIDE				PAGE 1	- 85
SALES JRNL # 0345 LOC 001	SUNNYSIDE CITYWIDE REG					HOMEW/O WALLS (LT
	SALE	S REGISTER			BILL WEEK ENI	DING 8/09/13
INVOICE# DATE CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
253138 8/02/13 000008 V	JISITING NURSE SERVICE	HERRERA, ANGELA	18.00		289.08	I
253139 8/02/13 000008 V	JISITING NURSE SERVICE	HERRERA, ANGELA	12.00		192.72	I
		CUSTOMER	30.00	0.00	481.80	
		CATEGORY	30.00	0.00	481.80	

RUN DATE 08/0 SALES JRNL #	07/13 - SUP SUNN 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - HOA HOSPICE ADULT BILL WEEK ENDING	86 8/09/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253141 8/0	26/13 000008 02/13 000008 02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HOEPPNER, RAYMO HOEPPNER, RAYMO HOEPPNER, RAYMO	15.00 9.00 6.00		240.90 I 144.54 I 96.36 I	
			CUSTOMER	30.00	0.00	481.80	
			CATEGORY	30.00	0.00	481.80	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 87	7
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253143	8/02/13	000008	VISITING NURSE SERVICE	HUNGRIA, SABINA	26.00		417.56 I	
253144	8/02/13	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	14.00		224.84 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	88
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS	ADULT POPUL
			i	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253145	8/02/13	000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	28.50		457.71 I	
253146	8/02/13	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	14.00		224.84 I	
					40.50			
				CUSTOMER	42.50	0.00	682.55	
				CATEGORY	42.50	0.00	682.55	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	39
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253147	8/02/13	800000	VISITING NURSE SERVICE	JACKSON, REGINA	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE (08/07/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	90
SALES JRNI	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	SA
			S	ALES REGISTER			BILL WEEK ENDI	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	YP SURPLUS
253148	8/02/13	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	30.00		481.80	I
253149	8/02/13	800000	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	16.00		256.96	I
253150	8/02/13	800000	VISITING NURSE SERVICE	JAMES, DAVINA	24.50		393.47	I
253151	8/02/13	800000	VISITING NURSE SERVICE	JAMES, DAVINA	5.00		80.30	I
				CUSTOMER	75.50	0.00	1,212.53	
				CATEGORY	75.50	0.00	1,212.53	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 91 ADU ADULT	L
SALES URN	ь # 0345	TOC 001		SALES REGISTER				8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253152 253153	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 4.00		128.48 I 64.24 I	
				CUSTOMER	12.00	0.00	192.72	
				CATEGORY	12.00	0.00	192.72	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 92
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
			S	ALES REGISTER			BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
253154	8/02/13	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE	55.00		883.30	I
253155	8/02/13	800000	VISITING NURSE SERVICE	JEWAT, LUCILLE	21.75		349.31	I
253156	8/02/13	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	11.75		188.71	I
253157	8/02/13	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	8.00		128.48	I
							1 540 00	
				CUSTOMER	96.50	0.00	1,549.80	
				CATEGORY	96.50	0.00	1,549.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK ENDI	DULT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS
253158 253159	8/02/13 8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	JIANNARAS, ANNA JIANNARAS, ANNA	50.00		803.00 321.20	I I
				CUSTOMER	70.00	0.00	1,124.20	
				CATEGORY	70.00	0.00	1,124.20	

RUN DATE	08/07/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	94
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S.	ALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253160	8/02/13	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	24.00		385.44 I	
				CATEGORY	24.00	0.00	385.44	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	95
SALES OWN	н озтэ	ПОС 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253161 253162	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	JORRIN, HORTENS JORRIN, HORTENS	29.75 6.00		477.79 I 96.36 I	
				CUSTOMER	35.75	0.00	574.15	
				 CATEGORY	35.75	0.00	574.15	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 - 96	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 8/	09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
253163 253164	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	4.00		64.24 I 32.12 I	
				CUSTOMER	6.00	0.00	96.36	
				CATEGORY	6.00	0.00	96.36	

RUN DATE SALES JRN			TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADU BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253165 253166	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	KHAN, MARGARET KHAN, MARGARET	5.00 14.00		80.30 I 224.84 I	
				CUSTOMER	19.00	0.00	305.14	
				CATEGORY	19.00	0.00	305.14	

			YSIDE CITYWIDE				PAGE 1 -	70
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHC BILL WEEK ENDI	-
			•	SALES KEGISIEK			DILL WEEK ENDI	NG 0/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
052168	0 /00 /10	000000		WTT TW TAN DEDD	40.00		640.40	_
253167 253168	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	KILIMLIAN, PEPR KILIMLIAN, PEPR	40.00 16.00		642.40 256.96	1
253100	0/02/13	000008	VISITING NORSE SERVICE	KILIMLIAN, PEPK	10.00		250.90	
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	99
SALES UKN	п # ОЗ43	LOC UUI		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253169 253170	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	KOESTNER, MARIE KOESTNER, MARIE	3.00 6.00		48.18 I 96.36 I	
				CUSTOMER	9.00	0.00	144.54	
				CATEGORY	9.00	0.00	144.54	

		SUNNYSIDE CITYWIDE				PAGE 1 -	
SALES JRNL	# 0345 LOC		REG NY NY ALES REGISTER			VCP CHOICE LHO	
		5	ALES KEGISIEK			PILL MEEK ENDI	ING 0/09/13
INVOICE#	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
253171 8	3/02/13 0000	08 VISITING NURSE SERVICE	KOSTIKIAN, MARI	15.00		240.90	I
253172 8	3/02/13 0000	08 VISITING NURSE SERVICE	KOSTIKIAN, MARI	10.00		160.60	I
253173 8	3/02/13 0000	08 VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		642.40	I
253174 8	3/02/13 0000	08 VISITING NURSE SERVICE	KOUTROUBAS, THE	16.00		256.96	I
253175 8	3/02/13 0000	08 VISITING NURSE SERVICE	LARA-MORA, BELE	40.00		642.40	I
253176 8	3/02/13 0000	08 VISITING NURSE SERVICE	LARA-MORA, BELE	15.25		244.92	I
			CUSTOMER	136.25	0.00	2,188.18	
			CATEGORY	136.25	0.00	2,188.18	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	01
	_ " " " " " " " " " " " " " " " " " " "			GALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253177 253178	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	LASAK, MICHAEL LASAK, MICHAEL	12.00 4.00		192.72 I 64.24 I	
				CUSTOMER	16.00	0.00	256.96	
				CATEGORY	16.00	0.00	256.96	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	₹		PAGE 1 - 102 LTC NURSING HOMEW/O W BILL WEEK ENDING 8/	JALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
253179 253180	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	12.00 4.00		192.72 I 64.24 I	
				CUSTOMER	16.00	0.00	256.96	
				 CATEGORY	16.00	0.00	 256.96	

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	103
SALES UKN	ш # ОЭ4Э	LOC UUI		ALES REGISTER			BILL WEEK ENDI	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253181	8/02/13	000008	VISITING NURSE SERVICE	LEGASPI, CECILI	8.00		128.48	I
253182	8/02/13	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	4.25		68.26	I
253183	7/12/13	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	1.00		16.06	I
253184	7/26/13	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	4.00		64.24	I
253185	8/02/13	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	8.00		128.48	I
253186	8/02/13	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	8.00		128.48	I
				CUSTOMER	33.25	0.00	534.00	
				CATEGORY	33.25	0.00	534.00	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	4
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253187	8/02/13	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	40.00		642.40	I	
253188	8/02/13	800000	VISITING NURSE SERVICE	LEWIS, CATHERIN	16.00		256.96	I	
253189	8/02/13	800000	VISITING NURSE SERVICE	LINARES, ELSA	3.50		56.21	I	
253190	8/02/13	800000	VISITING NURSE SERVICE	LINARES, ELSA	4.00		64.24	I	
				CUSTOMER	63.50	0.00	1,019.81		
				CATEGORY	63.50	0.00	1,019.81		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
253191	8/02/13	800000	VISITING NURSE SERVICE	LIOLIOS, ANNA	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE 08/07/13	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	106
SALES JRNL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTE	R		BILL WEEK ENDING	8/09/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253192 8/02/13	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	30.00		481.80 I	
253193 8/02/13	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	6.00		96.36 I	
253194 8/02/13	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	49.75		798.99 I	
253195 8/02/13	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	20.00		321.20 I	
			CUSTOMER	105.75	0.00	1,698.35	
			CATEGORY	105.75	0.00	1,698.35	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY	D		PAGE 1 - 107 LTC NURSING HOMEW/O WALLS (L	т
				SALES REGISTE	R		BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
253196 253197	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 12.00		481.80 I 192.72 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE	08/07/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	18
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253198	8/02/13	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	24.50		393.48	I	
253199	8/02/13	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	9.75		156.59	I	
253200	8/02/13	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	15.00		240.90	I	
253201	8/02/13	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	5.00		80.30	I	
				CUSTOMER	54.25	0.00	871.27		
				CATEGORY	54.25	0.00	871.27		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 109 AUR ADULT REHAB ON	-
DALLO OIUV	ш т ОЭ1Э	HOC 001		SALES REGISTER				8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253202	8/02/13	800000	VISITING NURSE SERVICE	LOPEZ, TRINIDAD	1.00		16.06 I	
				CATEGORY	1.00	0.00	16.06	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253203	8/02/13	800000	VISITING NURSE SERVICE	LORE, GIOVANNA	4.00		64.24 I	
				CATEGORY	4.00	0.00		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGATE BILL WEEK ENDI	
				SALES REGISTER			DIDD WEEK ENDI.	NG 0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253204	8/02/13	000008	VISITING NURSE SERVICE	LUCES, LETICIA	11.75		188.71	т
253204	8/02/13	000008	VISITING NURSE SERVICE		3.75		60.23	I
				CUSTOMER	15.50	0.00	248.94	
				CATEGORY	15.50	0.00	248.94	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 11	.2
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA	
			:	SALES R	EGISTI	E R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253206	7/26/13	000008	VISITING NURSE SERVICE	LUNA,	YSABEL	40.00		642.40	I	
253207	8/02/13	800000	VISITING NURSE SERVICE	LUNA,	YSABEL	24.00		385.44	I	
253208	8/02/13	800000	VISITING NURSE SERVICE	LUNA,	YSABEL	16.00		256.96	I	
					-					
					CUSTOMER	80.00	0.00	1,284.80		
					_					
					CATEGORY	80.00	0.00	1,284.80		

	07/13 - SUP SUNN					PAGE 1 - 11:	3
SALES JRNL #	0345 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	02/13 000008 02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	31.00 10.00		497.86 I 160.60 I	
			CUSTOMER	41.00	0.00	658.46	
			CATEGORY	41.00	0.00	658.46	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	114
BALLS OIL	ш н 0515	HOC 001		ALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253211 253212	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MADRID, ANA MADRID, ANA	12.00 8.00		192.72 I 128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 CCL CONGREGATE CA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253213 253214 253215	7/26/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAGILLIGAN, LOR	6.00 24.00 12.00		96.36 I 385.44 I 192.72 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWID	E REG NY NY			PAGE 1 VCP CHOICE L	- 11	16
DILLEG GIGN	,E 0313	100 001	BONNIBIDE CITIMID	SALES REGIST	ER		BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253216	8/02/13	000008	VISITING NURSE SERV	VICE MAHDI, LILLIE	12.00		192.72	I	
253217	8/02/13	000008	VISITING NURSE SERV	VICE MAHDI, LILLIE	8.00		128.48	I	
253218	8/02/13	000008	VISITING NURSE SERV	VICE MAIO, CHINGTSA	00.8 I		128.48	I	
253219	8/02/13	000008	VISITING NURSE SERV	VICE MAIO, CHINGTSA	4.00		64.24	I	
253220	7/26/13	000008	VISITING NURSE SER	VICE MALDONADO, MAR	5.00		80.30	I	
253221	8/02/13	000008	VISITING NURSE SER	VICE MALDONADO, MAR	lI 15.00		240.90	I	
253222	8/02/13	800000	VISITING NURSE SER	VICE MALDONADO, MAR	10.00		160.60	I	
				CUSTOMER	62.00	0.00	995.72		
				CATEGORY	62.00	0.00	995.72		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
253223 253224 253225 253226	7/12/13 7/26/13 8/02/13 8/02/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MANOS, VASILIKE MANOS, VASILIKE MANOS, VASILIKE MANOS, VASILIKE	7.00 7.00 31.00 14.00		112.42 I 112.42 I 497.86 I 224.84 I	
				CUSTOMER	59.00	0.00	947.54	
				CATEGORY	 59.00	0.00	947.54	

	07/13 - SUP SUNN		DEC MY MY			PAGE 1 - 118
SALES JRNL #	0345 LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 8/09/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	02/13 000008 02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARCOVICH, CLAR MARCOVICH, CLAR	30.00 7.75		481.80 I 124.47 I
			CUSTOMER	37.75	0.00	606.27
			CATEGORY	37.75	0.00	606.27

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	3 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
253229	8/02/13	000008	VISITING NURSE SERVICE	MARINO, ANN	18.00		289.08 I	
253230	8/02/13	800000	VISITING NURSE SERVICE	MARINO, ANN	12.00		192.72 I	
253231	7/26/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		401.50 I	
253232	8/02/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	15.00		240.90 I	
253233	8/02/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	10.00		160.60 I	
				CUSTOMER	80.00	0.00	1,284.80	
				CATEGORY	80.00	0.00	1,284.80	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE:	R		PAGE 1 - 120 LTC NURSING HOMEW/O WALLS (L' BILL WEEK ENDING 8/09/13	Т
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
253234 253235	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	29.00 14.00		465.74 I 224.84 I	
				CUSTOMER	43.00	0.00	690.58	
				 CATEGORY	43.00	0.00	690.58	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 121 ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253236	8/02/13	000008	VISITING NURSE SERVICE	~ - ,	4.00		64.24 I	
253237	8/02/13	000008	VISITING NURSE SERVICE	MARTE, JOSE	3.75 		60.23 I	
				CUSTOMER	7.75	0.00	124.47	
				CATEGORY	7.75	0.00	124.47	

			YSIDE CITYWIDE				PAGE 1 -	122
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE	
			i	SALES REGISTER			BILL WEEK ENDIN	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253238	8/02/13	000008	VISITING NURSE SERVICE	MARTINEZ, ELENA	50.00		803.00	[
253239	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	10.00		160.60	[
				CUSTOMER	60.00	0.00	963.60	
				0001011211	00.00	3.00	203.00	
				CATEGORY	60.00	0.00	963.60	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	23
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253240	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	21.00		337.26	I	
253241	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	14.00		224.84	I	
253242	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	24.00		385.44	I	
253243	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		192.72	I	
				CUSTOMER	71.00	0.00	1,140.26		
				CATEGORY	71.00	0.00	1,140.26		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	24
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253244	8/02/13	000008	VISITING NURSE SERVICE	MARTINEZ, RAMON	15.00		240.90 I	
253245	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, RAMON	10.00		160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

			YSIDE CITYWIDE				PAGE 1	- 12	:5
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			:	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253246	8/02/13	000008	VISITING NURSE SERVICE	MARTINEZ, ROSA	120.00		1,927.20	I	
253247	8/02/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	48.00		770.88	I	
				CUSTOMER	168.00	0.00	2,698.08		
				CATEGORY	168.00	0.00	2,698.08		

RUN DATE 08	/07/13 - SUP SUNN # 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 12 LTC NURSING HOMEW, BILL WEEK ENDING	
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	/02/13 000008 /02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	26.00 12.00		417.56 I 192.72 I	
			CUSTOMER	38.00	0.00	610.28	
			CATEGORY	38.00	0.00	610.28	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 127	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTE	R		BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253250	8/02/13	000008	VISITING NURSE SERVICE	MATOS, ROSA	30.00		481.80 I	
253251	8/02/13	800000	VISITING NURSE SERVICE	MATOS, ROSA	12.00		192.72 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	128
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253252	8/02/13	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	45.00		722.70 I	
253253	8/02/13	800000	VISITING NURSE SERVICE	MAZZONE, FRANCE	18.00		289.08 I	
253254	8/02/13	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	120.00		1,927.20 I	
253255	8/02/13	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	48.00		770.88 I	
				CUSTOMER	231.00	0.00	3,709.86	
				CATEGORY	231.00	0.00	3,709.86	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 12 HCSA	.9
				SALES REGISTER			BILL WEEK ENI	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253256 253257	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		50.00 20.00		803.00 321.20	I I	
				CUSTOMER	70.00	0.00	1,124.20		
				CATEGORY	70.00	0.00	1,124.20		

			YSIDE CITYWIDE				PAGE 1 -	130
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	NTC 0/00/12
			S	SALES REGISTER			BILL WEEK ENDI	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253258	8/02/13	000008	VISITING NURSE SERVICE	MEDINA, CECILIA	12.00		192.72	I
253259	8/02/13	800000	VISITING NURSE SERVICE	MEDINA, CECILIA	8.00		128.48	I
253260	8/02/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	6.00		96.36	I
				CUSTOMER	26.00	0.00	417.56	
				CATEGORY	26.00	0.00	 417.56	
1				CALEGORI	20.00	0.00	417.30	

RUN DATE		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	131
SALES UKN.	п # 0343	TOC 001		ALES REGISTER	}		BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253261	8/02/13	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	27.25		437.64 I	
253262	8/02/13	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	10.00		160.60 I	
253263	8/02/13	000008	VISITING NURSE SERVICE	MEJIA, CLAUDIO	28.00		449.68 I	
253264	8/02/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	14.00		224.84	
253265	8/02/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	16.00		256.96 I	•
253266	8/02/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	8.00		128.48 I	· -
				CUSTOMER	103.25	0.00	1,658.20	
				CATEGORY	103.25	0.00	1,658.20	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 132 LTC NURSING HOMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253267 253268	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		15.75 15.75		252.95 I 252.95 I
				CUSTOMER	31.50	0.00	505.90
				CATEGORY	31.50	0.00	505.90

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 133	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
				SALES REGISTER			BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
253269	8/02/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		80.30 I	
				CATEGORY	5.00	0.00	80.30	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 134
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253270	7/26/13	000008	VISITING NURSE SERVICE	MENDOZA, JULIO	7.00		112.42 I
253271	8/02/13	000008	VISITING NURSE SERVICE	MENDOZA, JULIO	15.00		240.90 I
253272	8/02/13	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	12.00		192.72 I
				CUSTOMER	34.00	0.00	546.04
				CATEGORY	34.00	0.00	546.04

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			-	- 13	35
SALES URN	L # U345	TOC 001		REGNY NY ALES REGISTER			VCP CHOICE LE		8/09/13
			5 -				D111 1111 1111	2110	0,00,20
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
053053	0 /00 /10	000000		V-0.01111 0111-1	2 00		40.10	_	
253273	8/02/13	800000	VISITING NURSE SERVICE	MESSIHA, SAMIRA	3.00		48.18	I	
253274	8/02/13	800000	VISITING NURSE SERVICE	MESSIHA, SAMIRA	3.00		48.18	I	
253275	8/02/13	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	9.00		144.54	I	
253276	8/02/13	000008	VISITING NURSE SERVICE	MONTOYA, ROSALB	16.00		256.96	I	
253277	8/02/13	800000	VISITING NURSE SERVICE	MONTOYA, ROSALB	8.00		128.48	I	
253278	8/02/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	24.00		385.44	I	
253279	8/02/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	12.00		192.72	I	
253280	8/02/13	800000	VISITING NURSE SERVICE	MULLER, ROBERT	24.00		385.44	I	
253281	8/02/13	800000	VISITING NURSE SERVICE	MULLER, ROBERT	12.00		192.72	I	
253282	8/02/13	800000	VISITING NURSE SERVICE	NAGY, GEORGE	40.00		642.40	I	
253283	8/02/13	800000	VISITING NURSE SERVICE	NAGY, GEORGE	16.00		256.96	I	
				CUSTOMER	167.00	0.00	2,682.02		
				CATEGORY	167.00	0.00	2,682.02		

			YSIDE CITYWIDE				PAGE 1 - 13	36
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253284	8/02/13	800000	VISITING NURSE SERVICE	NANIS, EVMENIA	12.00		192.72 I	
253285	8/02/13	800000	VISITING NURSE SERVICE	NANIS, EVMENIA	8.00		128.48 I	
253286	8/02/13	800000	VISITING NURSE SERVICE	NANIS, KOSTAS	12.00		192.72 I	
253287	8/02/13	800000	VISITING NURSE SERVICE	NANIS, KOSTAS	8.00		128.48 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

			YSIDE CITYWIDE				-	137
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGATE	
			'	SALES REGISTER			BILL WEEK ENDIN	G 0/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253288	8/02/13	800000	VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	12.00		192.72 I	
253289	8/02/13	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	8.00		128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				COSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

			YSIDE CITYWIDE				PAGE 1 - 1	138
SALES JRN	L # 0345	LOC 001		REG NY NY			ADU ADULT	0.400.413
			2	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253290	8/02/13	000008	VISITING NURSE SERVICE	NEWMAN, BERTHA	1.00		16.06 I	
				CATEGORY	1.00	0.00	16.06	

RUN DATE 08/0	7/13 - SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 13	9
SALES JRNL #	0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW/	O WALLS (LT
		S	BALES R	EGISTE	R		BILL WEEK EN	DING	8/09/13
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253291 8/0	2/13 000008	VISITING NURSE SERVICE	NIDO,	MICHAEL	33.25		534.00	I	
253292 8/0	2/13 000008	VISITING NURSE SERVICE	NIDO,	MICHAEL	14.00		224.84	I	
				CUSTOMER	47.25	0.00	758.84		
				CATEGORY	47.25	0.00	758.84		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGA	- 14	
BALLS OICH	ш # 0515	100 001		SALES REGISTER			BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253293 253294	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		45.00 18.00		722.70 289.08	I I	
				CUSTOMER	63.00	0.00	1,011.78		
				CATEGORY	63.00	0.00	1,011.78		

	RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 141										
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		0 / 0 0 / 1 0		
				SALES REGISTER			BILL WEEK END)ING	8/09/13		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
253295	8/02/13	000008	VISITING NURSE SERVIC	E NINO, CARMEN	12.00		192.72	I			
253296	8/02/13	800000	VISITING NURSE SERVIC	E NINO, CARMEN	8.00		128.48	I			
253297	7/26/13	800000	VISITING NURSE SERVIC	E NOBLIN, ELOISE	5.00		80.30	I			
253298	8/02/13	800000	VISITING NURSE SERVIC	E NOBLIN, ELOISE	17.00		273.02	I			
253299	8/02/13	800000	VISITING NURSE SERVIC	E NOBLIN, ELOISE	10.00		160.60	I			
				CUSTOMER	52.00	0.00	835.12				
				CATEGORY	52.00	0.00	835.12				

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 142 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253300 253301	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		18.00 8.00		289.08 I 128.48 I
				CUSTOMER	26.00	0.00	417.56
				CATEGORY	26.00	0.00	417.56

			YSIDE CITYWIDE	DEG NU NU			-	- 14	13
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		8/09/13
			_						2, 22, 22
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253302	8/02/13	000008	VISITING NURSE SERVICE	NOGUE, FIDELINA	12.00		192.72	т	
253303	8/02/13	000008	VISITING NURSE SERVICE	NOGUE, FIDELINA	8.00		128.48	Ī	
253304	8/02/13	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	40.00		642.40	I	
253305	8/02/13	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	16.00		256.96	I	
253306	8/02/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	29.00		465.74	I	
253307	8/02/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	7.00		112.42	I	
				CUSTOMER	112.00	0.00	1,798.72		
				CATEGORY	112.00	0.00	1,798.72		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	4
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			;	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253308	8/02/13	000008	VISITING NURSE SERVICE	OLVERA, ROSALIA	24.00		385.44 I	
253309	8/02/13	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	16.00		256.96 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	145
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
				SALES REGISTER			BILL WEEK ENDI	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253310	8/02/13	000008	VISITING NURSE SERVICE	PANASKAROLIDIS,	8.00		128.48	I
253311	8/02/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	16.00		256.96	I
				CUSTOMER	24.00	0.00	385.44	
				CATEGORY	24.00	0.00	385.44	

RUN DATE 08/ SALES JRNL ‡	/07/13 - SUP SUNN # 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 146 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13	
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	/02/13 000008 /02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	8.00 8.00		128.48 I 128.48 I	
			CUSTOMER	16.00	0.00	256.96	
			CATEGORY	16.00	0.00	 256.96	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 147	7
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253314	8/02/13	000008	VISITING NURSE SERVICE	PANTALEONDEREN,	15.00		240.90 I	
253315	8/02/13	800000	VISITING NURSE SERVICE	PANTALEONDEREN,	10.00		160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

			YSIDE CITYWIDE				PAGE 1 - 148	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 8	3/09/13
							DILL WEEK ENDING	3/03/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
253316 253317	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	12.00 8.00		192.72 I 128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 14	19
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	SALES REGISTER			BILL WEEK END	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
052210	0 /00 /10	000000		D1D15T111 W1D17	20.00		401 00	_	
253318	8/02/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI PAPAZIAN, MANNI PAPP, TEREZIA PENA, VICTORIA PENA, VICTORIA PENA, VICTORIA PENAGOS, MARIA DENAGOS, MARIA	30.00		481.80	I	
253319	8/02/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	20.00		321.20	I	
253320	8/02/13	000008	VISITING NURSE SERVICE	PAPP, TEREZIA	1.00		16.06	I	
253321	7/26/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA	6.00		96.36	I	
253322	8/02/13	800000	VISITING NURSE SERVICE	PENA, VICTORIA	19.00		305.14	I	
253323	8/02/13	800000	VISITING NURSE SERVICE	PENA, VICTORIA	8.25		132.50	I	
253324	8/02/13	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	15.00		240.90	I	
253325	8/02/13	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	10.00		160.60	I	
253326	8/02/13	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	35.00		562.10	I	
253327	8/02/13	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	14.00		224.84	I	
253328	8/02/13	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	18.00		289.08	I	
253329	8/02/13	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	12.00		192.72	I	
253330	8/02/13	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	40.00		642.40	I	
253331	8/02/13	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	8.00		128.48	I	
253332	8/02/13	800000	VISITING NURSE SERVICE	PINEDA, EMILIA	15.75		252.95	I	
253333	8/02/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA PENAGOS, MARIA PEREZ MONSER, C PEREZ MONSER, C PEREZ, GLADYS PEREZ, GLADYS PHILIPPS, MARY PHILIPPS, MARY PINEDA, EMILIA PIZARRO, BARBAR	1.00		16.06	I	
253334	8/02/13	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	25.00		401.50	T	
253335	8/02/13	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	10.00		160.60	Ī	
253336	8/02/13	000008	VISITING NURSE SERVICE	PLACIDO, MERCED	30.00		481.80	T	
253337	8/02/13	000008	VISITING NURSE SERVICE	PLACIDO, MERCED	12.00		192.72	T	
253338	8/02/13	000008	VISITING NURSE SERVICE	POGGI EMERITA	23 75		381 43	Ī	
253339	8/02/13	000008	VISITING NURSE SERVICE	DOGGI EMERITA	12 00		192 72	T	
255555	0/02/13	000000	VIBITING NORBE BERVICE	PLACIDO, BARBAR PLACIDO, GENARO PLACIDO, MERCED PLACIDO, MERCED PLACIDO, MERCED POGGI, EMERITA POGGI, EMERITA					
				CUSTOMER	365.75	0.00	5,873.96		
				CATEGORY	 365.75	0.00	 5,873.96		
1									

RUN DATE 08/	/07/13 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 150
SALES JRNL #	# 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENI	DING 8/09/13
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
253340 8/	/02/13 000008	VISITING NURSE SERVICE	POLANCO, JUAN	30.50		489.84	I
253341 8/	/02/13 000008	VISITING NURSE SERVICE	POLANCO, JUAN	13.50		216.81	I
			CUSTOMER	44.00	0.00	706.65	
			CATEGORY	44.00	0.00	706.65	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHO	
				ALES REGISIER			BILL WEEK END.	ING 0/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
052240	0 /00 /13	000000	MIGITALING NUIDGE GERMAGE	DOLUMENT HELEN	24.00		205 44	-
253342	8/02/13	000008	VISITING NURSE SERVICE	POLITIS, HELEN	24.00		385.44	1
253343	8/02/13	000008	VISITING NURSE SERVICE	POLITIS, HELEN	16.00		256.96	1
253344	8/02/13	800000	VISITING NURSE SERVICE	PONCE, ALICIA	24.00		385.44	I
253345	8/02/13	800000	VISITING NURSE SERVICE	PONCE, ALICIA	16.00		256.96	I
				CUSTOMER	80.00	0.00	1,284.80	
				CATEGORY	80.00	0.00	1,284.80	
1				CALEGORI	00.00	0.00	1,204.00	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15:	2
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER	₹		BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253346	8/02/13	000008	VISITING NURSE SERVICE	PONCECEVALLOS,	6.00		96.36 I	
253347	8/02/13	800000	VISITING NURSE SERVICE	PONCECEVALLOS,	6.00		96.36 I	
				CUSTOMER	12.00	0.00	192.72	
				CATEGORY	12.00	0.00	192.72	

RUN DATE	, - , -		YSIDE CITYWIDE					- 15	;3
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		0 / 0 0 / 1 0
			S	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253348	7/26/13	000008	VISITING NURSE SERVICE	PULLIZA, DIANNE	5.00		80.30	I	
253349	8/02/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	26.00		417.56	I	
253350	8/02/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	10.00		160.60	I	
253351	8/02/13	800000	VISITING NURSE SERVICE	QUINONES, MARIA	6.00		96.36	I	
253352	8/02/13	800000	VISITING NURSE SERVICE	QUINONES, MARIA	3.00		48.18	I	
253353	8/02/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	21.00		337.26	I	
253354	8/02/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	14.00		224.84	I	
				CUSTOMER	85.00	0.00	1,365.10		
				CATEGORY	85.00	0.00	1,365.10		

RUN DATE 08/07/13 SALES JRNL # 0345		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253355 8/02/13 253356 8/02/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - '	34.25 14.50		550.06 I 232.87 I	
			CUSTOMER	48.75	0.00	782.93	
			CATEGORY	48.75	0.00		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	5
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	ALES REGISTER			BILL WEEK END	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253357	8/02/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	6.00		96.36	I	
253358	8/02/13	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	6.00		96.36	I	
253359	8/02/13	000008	VISITING NURSE SERVICE	RAJA, HANIFA	16.75		269.01	I	
253360	8/02/13	800000	VISITING NURSE SERVICE	RAJA, HANIFA	12.00		192.72	I	
				CUSTOMER	40.75	0.00	654.45		
				CATEGORY	40.75	0.00	654.45		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	6
SALES JRN	IL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES	
			\$	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253361	8/02/13	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	24.00		385.44 I	
253362	8/02/13	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	16.00		256.96 I	
					40.00	0.00		
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	157
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	IG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253363	8/02/13	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	29.00		465.74 I	
253364	8/02/13	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	14.00		224.84 I	•
				CUSTOMER	43.00	0.00	690.58	
				CATEGORY	43.00	0.00	690.58	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 158	
SALES JRN	ъ # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 8/0	9/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
253365	8/02/13	000008	VISITING NURSE SERVICE	RAMIREZ, ROSA	6.00		96.36 I	
253366	8/02/13	000008	VISITING NURSE SERVICE	RAMIREZ, ROSA	3.00		48.18 I	
				CUSTOMER	9.00	0.00	144.54	
				CATEGORY	9.00	0.00	144.54	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	59
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253367	8/02/13	800000	VISITING NURSE SERVICE	RAMOS, ISMAEL	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

	IN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 160 ALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCSA									
DILLEG GIGN	,E 0313	100 001	SOMMISIDE CITIVIDE	SALES REGISTER			BILL WEEK EN		8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
253368	8/02/13	000008	VISITING NURSE SERVI	E RAMPHAL, INDRIA	12.00		192.72	I		
253369	8/02/13	800000	VISITING NURSE SERVI	E RAMPHAL, INDRIA	8.00		128.48	I		
253370	8/02/13	000008	VISITING NURSE SERVI	E REINA, JOSE	12.00		192.72	I		
253371	8/02/13	000008	VISITING NURSE SERVI	E RENDON, EDUARDO	12.00		192.72	I		
253372	8/02/13	000008	VISITING NURSE SERVI	E RENDON, EDUARDO	8.00		128.48	I		
253373	8/02/13	000008	VISITING NURSE SERVI	E RICCA, MARIE	12.00		192.72	I		
253374	8/02/13	800000	VISITING NURSE SERVI	E RICCA, MARIE	4.00		64.24	I		
				CUSTOMER	68.00	0.00	1,092.08			
				CATEGORY	68.00	0.00	1,092.08			

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGAT	- 16 TE CAR	
				SALES REGISTER			BILL WEEK ENI	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253375 253376	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	39.00 14.00		626.34 224.84	I I	
				CUSTOMER	53.00	0.00	851.18		
				CATEGORY	53.00	0.00	851.18		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253377 253378	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 8.00		192.72 I 128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 - 163
SALES JRN	ш # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253379 253380	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE	·	40.00 16.00		642.40 I 256.96 I
253360	0/02/13	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	10.00		250.90 1
				CUSTOMER	56.00	0.00	899.36
				CATEGORY	56.00	0.00	899.36

RUN DATE 08/07 SALES JRNL # 0		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	
	200 001		LES REGISTER			BILL WEEK ENDI	
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
253381 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, CARMEN	18.00		289.08	I
253382 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, CARMEN	6.00		96.36	I
253383 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, CAROL	16.00		256.96	I
253384 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, CAROL	4.00		64.24	I
253385 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	12.00		192.72	I
253386 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	4.00		64.24	I
253387 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	12.00		192.72	I
253388 8/02	2/13 000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	4.00		64.24	I
			CUSTOMER	76.00	0.00	1,220.56	
			CATEGORY	 76.00	0.00	1,220.56	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	5
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	E CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK END	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP	SURPLUS
253389	8/02/13	000008	VISITING NURSE SERVICE	RIVERA, RAOUEL	25.00		401.50	I	
253390	8/02/13	000008	VISITING NURSE SERVICE	RIVERA, RAQUEL	10.00		160.60	I	
253391	8/02/13	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	32.00		513.92	I	
253392	8/02/13	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	16.00		256.96	I	
				CUSTOMER	83.00	0.00	1,332.98		
				CATEGORY	83.00	0.00	1,332.98		

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY							PAGE 1 - 166 VCP CHOICE LHCSA		
			S	SALES REGISTER			BILL WEEK ENDING 8	8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS	
253393	7/05/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, ANA	6.00		96.36 I		
253394	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, ANA	18.00		289.08 I		
253395	8/02/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, ANA	12.00		192.72 I		
				CUSTOMER	36.00	0.00	578.16		
				CATEGORY	36.00	0.00	578.16		

			YSIDE CITYWIDE				PAGE 1 - 1	67
SALES JRN	L # U345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253396 253397	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00		48.18 I 48.18 I	
				CUSTOMER	6.00	0.00	96.36	
				CATEGORY	6.00	0.00	96.36	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	8
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	A L E S R E G I S T E R			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253398	8/02/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	30.00		481.80	I	
253399	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	12.00		192.72	I	
253400	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	59.75		959.59	I	
253401	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	24.00		385.44	I	
				CUSTOMER	125.75	0.00	2,019.55		
				CATEGORY	125.75	0.00	2,019.55		

			YSIDE CITYWIDE				PAGE 1			
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT			
			S	SALES REGISTER			BILL WEEK END	DING	8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
253402	8/02/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	15.00		240.90	I		
253403	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	10.00		160.60	I		
253404	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	28.00		449.68	I		
253405	8/02/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	12.00		192.72	I		
253406	8/02/13	000008	VISITING NURSE SERVICE	ROLON, JUANITA	24.00		385.44	I		
253407	8/02/13	800000	VISITING NURSE SERVICE	ROLON, JUANITA	15.00		240.90	I		
				CUSTOMER	104.00	0.00	1,670.24			
				CATEGORY	104.00	0.00	1,670.24			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	170
BILLED GIAV	1 1 0313	100 001		SALES REGISTER			BILL WEEK ENDIN	IG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253408 253409	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROMEOS, IRENE ROMEOS, IRENE	4.00 4.00		64.24 I 64.24 I	
				CUSTOMER	8.00	0.00	128.48	
				CATEGORY	8.00	0.00	128.48	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDING	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253410	8/02/13	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	24.00		385.44 I	
253411 253412	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROMERO, SANTHY ROMO, FLOR	12.00 40.00		192.72 I 642.40 I	
253413	8/02/13	800000	VISITING NURSE SERVICE	ROMO, FLOR	16.00 		256.96 I	
				CUSTOMER	92.00	0.00	1,477.52	
				CATEGORY	92.00	0.00	1,477.52	

RUN DATE (08/07/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 17	2
SALES JRNI	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	-	NY			LTC NURSING	HOMEW/	,
				SALES R	EGISTE	R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253414	8/02/13	000008	VISITING NURSE SERVICE	ROSA,	ANA	16.00		256.96	I	
253415	8/02/13	800000	VISITING NURSE SERVICE	ROSA,	ANA	16.00		256.96	I	
					CUSTOMER	32.00	0.00	513.92		
					- CATEGORY	32.00	0.00	513.92		

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	73
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253416	8/02/13	800000	VISITING NURSE SERVICE	ROSA, LUZ E	39.75		638.39	I	
253417	8/02/13	800000	VISITING NURSE SERVICE	ROSA, LUZ E	16.00		256.96	I	
253418	8/02/13	800000	VISITING NURSE SERVICE	ROSA, MANOLO	11.75		188.71	I	
253419	8/02/13	800000	VISITING NURSE SERVICE	ROSA, MANOLO	6.00		96.36	I	
253420	8/02/13	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	21.00		337.26	I	
253421	8/02/13	000008	VISITING NURSE SERVICE	ROSARIO, ELSA	6.25		100.38	I	
253422	7/12/13	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	5.00		80.30	I	
253423	8/02/13	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	13.25		212.80	I	
253424	8/02/13	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	5.00		80.30	I	
253425	8/02/13	000008	VISITING NURSE SERVICE	ROSARIOBREU, EM	15.00		240.90	I	
253426	8/02/13	000008	VISITING NURSE SERVICE	ROSARIOBREU, EM	10.00		160.60	I	
				CUSTOMER	149.00	0.00	2,392.96		
							,		
				CATEGORY	149.00	0.00	2,392.96		
1									

RUN DATE 08/07/13 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 174
SALES JRNL # 0345	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCM VNS
	S	ALES REGISTER		BILL WEEK ENDING 8/09/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
253427 8/02/13	000008 VISITING NURSE SERVICE	RUEDA, INES	36.00	578.16 I
253428 8/02/13	000008 VISITING NURSE SERVICE	RUEDA, INES	15.00	240.90 I
		CUSTOMER	51.00 0.00	819.06
		CATEGORY	51.00 0.00	819.06

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 175	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 8/	09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
253429	8/02/13	000008	VISITING NURSE SERVICE	RUFFEN, SANDRA	18.00		289.08 I	
253430	8/02/13	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	13.75		220.83 I	
				CUSTOMER	31.75	0.00	509.91	
				CATEGORY	31.75	0.00	509.91	

RUN DATE 08, SALES JRNL	/07/13 - SUP SUN # 0345 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - 3 ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253432 8, 253433 8,	/02/13 000008 /02/13 000008 /02/13 000008 /02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RUIZ, TERESA RUIZ, TERESA RUSSO, MONICA RUSSO, MONICA	11.50 4.00 49.00 20.00		184.69 I 64.24 I 786.94 I 321.20 I	
			CUSTOMER	84.50	0.00	1,357.07	
			CATEGORY	84.50	0.00	1,357.07	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 17	77
Brilles Grav	1 11 0313	100 001		SALES REGISTER			BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253435	7/26/13	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	6.00		96.36	I	
253436	8/02/13	800000	VISITING NURSE SERVICE	SAK, FIRDEVS	24.00		385.44	I	
253437	8/02/13	800000	VISITING NURSE SERVICE	SAK, FIRDEVS	12.00		192.72	I	
				CUSTOMER	42.00	0.00	674.52		
				CATEGORY	42.00	0.00	674.52		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	8
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253438	8/02/13	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	24.00		385.44 I	
253439	8/02/13	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	12.00		192.72 I	
				CUSTOMER	36.00	0.00	578.16	
				COSTOMER	30.00	0.00	378.10	
				CATEGORY	36.00	0.00	578.16	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		9
011111111111111111111111111111111111111	.2 0515	200 001		LES REGISTER			BILL WEEK END		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253440	8/02/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	55.00		883.30	I	
253441	8/02/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	22.00		353.32	I	
253442	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	15.00		240.90	I	
253443	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	10.00		160.60	I	
253444	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	28.00		449.68	I	
253445	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	14.00		224.84	I	
253446	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	35.00		562.10	I	
253447	8/02/13	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	14.00		224.84	I	
				CUSTOMER	193.00	0.00	3,099.58		
				CATEGORY	 193.00	0.00	3,099.58		

			YSIDE CITYWIDE				11102	- 18	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGA BILL WEEK EN		8/09/13
				SALES KEGISIEK			DILL WEEK EN	DING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252440	0 /00 /10	000000	VICINING NUDGE GEDVICE	CANCILED MADIA	21 00		227 26	-	
253448 253449	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		21.00 14.00		337.26 224.84	T T	
233117	0,02,13	00000	VIDITING NONDE BENVIOL						
				CUSTOMER	35.00	0.00	562.10		
				CATEGORY	35.00	0.00	562.10		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	181
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE				VCP CHOICE LHCS.	
				SALES REGISTER			BILL WEEK ENDIN	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253450	8/02/13	000008	VISITING NURSE SERVICE	SANTOS, LETY I	17.00		273.02 I	
253451	8/02/13	800000	VISITING NURSE SERVICE	SANTOS, LETY I	12.00		192.72 I	
				CUSTOMER	29.00	0.00	465.74	
				CATEGORY	29.00	0.00	465.74	

RUN DATE		PAGE 1 - 182							
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTEI	D		ADU ADULT BILL WEEK ENI	DINC	8/09/13
			SALES REGISTER				DITT MEEV EN	DING	0/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253452	8/02/13	800000	VISITING NURSE SERVICE	SARWAR, JAMIL	8.00		128.48	I	
253453	8/02/13	800000	VISITING NURSE SERVICE	SARWAR, JAMIL	3.00		48.18	I	
253454	8/02/13	000008	VISITING NURSE SERVICE	SAWINSKI, JOHN	5.00		80.30	I	
253455	8/02/13	000008	VISITING NURSE SERVICE	SAWINSKI, JOHN	3.00		48.18	I	
253456	8/02/13	800000	VISITING NURSE SERVICE	SCHERA, ANGELA	2.00		32.12	I	
					21.00	0.00	337.26		
				CUSTOMER	21.00	0.00	337.20		
				CATEGORY	21.00	0.00	337.26		

RUN DATE SALES JRN	08/07/13 -		PAGE 1 - 183 VCP CHOICE LHCSA						
SALES UKN	ш # 0345	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER	1		BILL WEEK END		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253457	8/02/13	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	30.00		481.80	Т	
253458	8/02/13	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	12.00		192.72	Ī	
253459	8/02/13	800000	VISITING NURSE SERVICE	SCRO, WILLIAM	20.00		321.20	I	
253460	8/02/13	800000	VISITING NURSE SERVICE	SCRO, WILLIAM	8.00		128.48	I	
253461	8/02/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	30.00		481.80	I	
253462	8/02/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	12.00		192.72	I	
				CUSTOMER	112.00	0.00	1,798.72		
				CATEGORY	112.00	0.00	1,798.72		

	: 08/07/13 - SUP SUNNYSIDE CITYWIDE NL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER						PAGE 1 - HOA HOSPICE AI BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
253463 253464	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SELTZER, BERTHA SELTZER, BERTHA	9.00 6.00		144.54 96.36	I I
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

RUN DATE SALES JRN			PAGE 1 – 185 VCP CHOICE LHCSA					
SALES UKN	п # 0343	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			BILL WEEK END:	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
253465	8/02/13	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	49.00		786.94	I
253466	8/02/13	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	20.00		321.20	I
253467	8/02/13	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	28.00		449.68	I
253468	8/02/13	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	15.00		240.90	I
253469	8/02/13	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	4.00		64.24	I
253470	8/02/13	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	4.00		64.24	I
				CUSTOMER	120.00	0.00	1,927.20	
				CATEGORY	120.00	0.00	1,927.20	

RUN DATE 08/07/13 - SUP	SUNNYSIDE CITYWIDE				PAGE 1 -	186
SALES JRNL # 0345 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		SALES REGISTE	R		BILL WEEK ENDING	8/09/13
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
253471 8/02/13 0000	008 VISITING NURSE SERVICE	SIERRA, GLORIA	8.00		128.48 I	
253472 8/02/13 0000	008 VISITING NURSE SERVICE	SIERRA, GLORIA	8.00		128.48 I	
		CUSTOMER	16.00	0.00	256.96	
		 CATEGORY	16.00	0.00		

RUN DA	ATE 08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 187	7
SALES	JRNL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253473	8/02/13	800000	VISITING NURSE SERVICE	SILLS, JAMES	30.75		493.85 I	
				CATEGORY	30.75	0.00	493.85	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	PAGE 1 - 188 VCP CHOICE LHCSA BILL WEEK ENDING 8/09/13				
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253474 253475 253476 253477	8/02/13 8/02/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, JAMOONIE	30.00 11.75 9.00 3.00		481.80 I 188.71 I 144.54 I 48.18 I	
				CUSTOMER	53.75	0.00	863.23	
				CATEGORY	53.75	0.00	863.23	

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE				REG NY NY SALES REGISTE	R		PAGE 1 - 189 LTC NURSING HOMEW/O WALLS BILL WEEK ENDING 8/09/1	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
253478 253479	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	10.00 5.00		160.60 I 80.30 I	
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE							11102 1	- 19	
SALES JRN	L # U345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 8/09/13		
							DILL WELK EN	DING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
252400	8/02/13	000008	VISITING NURSE SERVICE	CODCUER CAMIEL	4.00		64.24	-	
253480 253481	8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		4.00		64.24	I	
	0, 00, 00								
				CUSTOMER	8.00	0.00	128.48		
				CATEGORY	8.00	0.00	128.48		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE	PAGE 1 - 191					
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDI	NG 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
253482	8/02/13	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	18.00		289.08	I	
253483	8/02/13	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	6.00		96.36	I	
				CUSTOMER	24.00	0.00	385.44		
				CATEGORY	24.00	0.00	385.44		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY N	REG NY NY				PAGE 1 - 192 ADU ADULT		
	- "			-	GISTE	R		BILL WEEK EN	DING	8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
253484 253485	7/26/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	ANGELA ANGELA	8.00 4.00		128.48 64.24	I		
233103	0,02,13	000000	VIBILING NORDE BERVICE	,	CUSTOMER	12.00	0.00	192.72			
					COBTOMER	12.00	3.00	172.72			
					CATEGORY	12.00	0.00	192.72			

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	93 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253486 253487	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	24.00 16.00		385.44 I 256.96 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

RUN DATE 08/07/1 SALES JRNL # 034		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 194 ADU ADULT	
SALES URNL # US	45 LOC 001		SALES REGISTER			BILL WEEK ENDING 8/09/13	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
253488 8/02/3 253489 8/02/3		VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	8.00 4.00		128.48 I 64.24 I	
			CUSTOMER	12.00	0.00	192.72	
			CATEGORY	12.00	0.00	192.72	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 195	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253490	8/02/13	800000	VISITING NURSE SERVICE	SPYROPOULOS, AS	1.00		16.06 I	
				CATEGORY	1.00	0.00	16.06	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	196
SALES JRN	IL # 0345	LOC 001		REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDIN	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253491	7/19/13	000008	VISITING NURSE SERVICE	STAFILIAS, EVAN	12.00		192.72 I	
253492	8/02/13	800000	VISITING NURSE SERVICE	STAFILIAS, EVAN	60.00		963.60 I	
253493	8/02/13	800000	VISITING NURSE SERVICE	STAFILIAS, EVAN	24.00		385.44 I	
				CUSTOMER	96.00	0.00	1,541.76	
				CATEGORY	96.00	0.00	1,541.76	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	197
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
253494	8/02/13	000008	VISITING NURSE SERVICE	STAMBOULIDIS, V	40.00		642.40 I	
253495	8/02/13	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	16.00		256.96 I	
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUI BILL WEEK ENDING	LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
253496 253497	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STEIN, STEPHANI STEIN, STEPHANI	15.00 6.00		240.90 I 96.36 I	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

			YSIDE CITYWIDE				-	L99
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
							DILL WEEK ENDING	0/05/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253498 253499	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		18.00 12.00		289.08 I 192.72 I	
				CUSTOMER	30.00	0.00	481.80	
				CATEGORY	30.00	0.00	481.80	

-	, - , -		YSIDE CITYWIDE	DEC MY MY			-	- 20)0
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253500	8/02/13	000008	VISITING NURSE SERVICE	STICKELL, BLANC	20.00		321.20	Ι	
253501	8/02/13	000008	VISITING NURSE SERVICE	STROBL, ALFRED	26.00		417.56	Ī	
253502	8/02/13	800000	VISITING NURSE SERVICE	STROBL, ALFRED	13.00		208.78	I	
253503	8/02/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	18.00		289.08	I	
253504	8/02/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	12.00		192.72	I	
				CUSTOMER	89.00	0.00	1,429.34		
				CATEGORY	89.00	0.00	1,429.34		

			YSIDE CITYWIDE				PAGE 1 - 201
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253505	6/21/13	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	6.00		96.36 I
253506	6/28/13	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	6.00		96.36 I
253507	7/05/13	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	6.00		96.36 I
253508	7/19/13	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	6.00		96.36 I
253509	8/02/13	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	23.00		369.38 I
253510	8/02/13	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	11.75		188.71 I
				CUSTOMER	58.75	0.00	943.53
				CATEGORY	 58.75	0.00	943.53

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	02
Brillio oras	12 0313	100 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253511 253512	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TALUY, JOSEPH TALUY, JOSEPH	29.75 12.00		477.79 I 192.72 I	
				CUSTOMER	41.75	0.00	670.51	
				CATEGORY	41.75	0.00	 670.51	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 20 LTC NURSING HOMEW	
Brilles orde	11 0313	100 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253513	7/12/13	000008	VISITING NURSE SERVICE	TAVERAS ARIAS,	12.00		192.72 I	
253514	7/26/13	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	18.00		289.08 I	
253515	8/02/13	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	18.50		297.11 I	
253516	8/02/13	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	12.00		192.72 I	
				CUSTOMER	60.50	0.00	971.63	
				CATEGORY	60.50	0.00	971.63	

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY								- 20 CSA	4
	_ 0313	200 001		SALES REGISTER			BILL WEEK END		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253517 253518	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TAVERAS, BERNAR TAVERAS, BERNAR	12.00 10.00		192.72 160.60	I	
233310	0/02/13	000008	VISITING NORSE SERVICE	TAVERAS, BERNAR	10.00		100.00		
				CUSTOMER	22.00	0.00	353.32		
				CATEGORY	22.00	0.00	353.32		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	205
Briefs ord	12 0313	100 001		SALES REGISTER			BILL WEEK ENDING	G 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253519 253520	7/12/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TAWADROUS, ANWA TEJADA, BALDOME	1.00		16.06 I 192.72 I	
				CUSTOMER	13.00	0.00	208.78	
				CATEGORY	13.00	0.00	208.78	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253521 253522 253523 253524	8/02/13 8/02/13 8/02/13 8/02/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TEJADA, BALDOME TERZIAN, ASDGHI	4.00 12.00 25.00 10.00		64.24 1 192.72 1 401.50 1 160.60 1	[[[
				CUSTOMER	51.00	0.00	819.06	
				CATEGORY	51.00	0.00	819.06	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 207 ADU ADULT	
SALES UKNI	ц # 0343	LOC UUI		SALES REGISTER			BILL WEEK ENDING 8/09/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
253525	8/02/13	800000	VISITING NURSE SERVICE	THUCH, SYVONN	28.50		457.71 I	
				CATEGORY	28.50	0.00	 457.71	-

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 20	18
SALES URN	ш # 0343	TOC 001		ALES REGISTER	1		BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253526	8/02/13	000008	VISITING NURSE SERVICE	TINOCO, INES	35.00		562.10	I	
253527	8/02/13	800000	VISITING NURSE SERVICE	TINOCO, INES	7.00		112.42	I	
253528	8/02/13	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	15.00		240.90	I	
253529	8/02/13	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	10.00		160.60	I	
253530	8/02/13	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	12.00		192.72	I	
253531	8/02/13	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	8.00		128.48	I	
253532	8/02/13	000008	VISITING NURSE SERVICE	TORRES, EMELINA	24.00		385.44	I	
253533	8/02/13	000008	VISITING NURSE SERVICE	TORRES, EMELINA	16.00		256.96	I	
253534	8/02/13	800000	VISITING NURSE SERVICE	TORRES, LUZ M	60.00		963.60	I	
253535	8/02/13	800000	VISITING NURSE SERVICE	TORRES, LUZ M	24.00		385.44	I	
				CUSTOMER	211.00	0.00	3,388.66		
				CATEGORY	211.00	0.00	3,388.66		

			YSIDE CITYWIDE	DDG 1911			PAGE 1 - 209
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253536 253537	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	26.50 12.00		425.59 I 192.72 I
				CUSTOMER	38.50	0.00	618.31
				CATEGORY	38.50	0.00	618.31

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 21	.0
SALES OWN	ш # 0343	100 001		ALES REGISTER	1		BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253538	8/02/13	000008	VISITING NURSE SERVICE	TOUMA, MATTA	24.00		385.44	I	
253539	8/02/13	800000	VISITING NURSE SERVICE	TOUMA, MATTA	16.00		256.96	I	
253540	8/02/13	000008	VISITING NURSE SERVICE	TOVAR DE BOCAN,	28.00		449.68	I	
253541	8/02/13	000008	VISITING NURSE SERVICE	TOVAR DE BOCAN,	8.00		128.48	I	
253542	8/02/13	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	8.00		128.48	I	
253543	8/02/13	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	4.00		64.24	I	
253544	6/14/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	8.00		128.48	I	
253545	7/19/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	8.00		128.48	Ī	
253546	8/02/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN			638.39	Ī	
253547	8/02/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	16.00		256.96	Ī	
				CUSTOMER	159.75	0.00	2,565.59		
				CATEGORY	159.75	0.00	2,565.59		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 211 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
253548 253549	8/02/13 8/02/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	12.00 8.00		192.72 I 128.48 I
				CUSTOMER	20.00	0.00	321.20
				CATEGORY	20.00	0.00	321.20

	07/13 - SUP SUNN		DEC MY MY			PAGE 1 -	212
SALES JRNL #	0345 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 8/09/13
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	02/13 000008 02/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		60.00 23.75		963.60 381.43	I I
			CUSTOMER	83.75	0.00	1,345.03	
			CATEGORY	83.75	0.00	1,345.03	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS: BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
253552 253553 253554	8/02/13 8/02/13 8/02/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	URBINA, ANA URBINA, ANA URENA, ARGELIA	25.00 10.00 17.75		401.50 I 160.60 I 285.07 I	
				CUSTOMER	52.75	0.00	847.17	
				CATEGORY	 52.75	0.00	847.17	

			YSIDE CITYWIDE				PAGE 1 - 214	4
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253555 253556	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		35.00 7.00		562.10 I 112.42 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 215 CCL CONGREGATE CARE BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253557 253558	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		15.00 10.00		240.90 I 160.60 I	
				CUSTOMER	25.00	0.00	401.50	
				CATEGORY	25.00	0.00	401.50	

RUN DATE SALES JRN		- SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
253559 253560	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENCIA, EMMA VALENCIA, EMMA	9.00 6.00		144.54 96.36	I I
				CUSTOMER	15.00	0.00	240.90	
				 CATEGORY		0.00	240.90	

			YSIDE CITYWIDE				PAGE 1 - 217	
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
				SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253561	8/02/13	000008	VISITING NURSE SERVICE	VALENTI, HELEN	25.00		401.50 I	
253562	8/02/13	800000	VISITING NURSE SERVICE	VALENTI, HELEN	10.00		160.60 I	
				CUSTOMER	35.00	0.00	562.10	
				COSTOMER	35.00	0.00	302.10	
				CATEGORY	35.00	0.00	562.10	

			YSIDE CITYWIDE				PAGE 1 - 218	3
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253563	8/02/13	000008	VISITING NURSE SERVICE	VALENTIN, CARME	9.00		144.54 I	
253564	8/02/13	800000	VISITING NURSE SERVICE	VALENTIN, CARME	6.00		96.36 I	
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253565 253566	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	23.75 16.00		381.43 I 256.96 I	
				CUSTOMER	39.75	0.00	638.39	
				CATEGORY	39.75	0.00	638.39	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	DMEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
253567 253568 253569 253570 253571	6/21/13 8/02/13 8/02/13 8/02/13 8/02/13	000008 000008 000008 000008	VISITING NURSE SERVICE	VAROL, ELMAS VAROL, ELMAS VAZQUEZ, ESTHER	4.00 8.00 4.00 28.00 12.00		64.24 128.48 64.24 449.68 192.72	I I I I
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253572 253573	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VAZQUEZ, FELIPE VAZQUEZ, FELIPE	18.00 12.00		289.08 I 192.72 I	
				CUSTOMER	30.00	0.00	481.80	
				CATEGORY	30.00	0.00		

RUN DATE SALES JRN	08/07/13	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 22	22
BALLED OIGN	т 0313	100 001		ALES REGISTER			BILL WEEK END		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253574	8/02/13	000008	VISITING NURSE SERVICE	VELASQUEZ, GUIL	4.00		64.24	I	
253575	8/02/13	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	4.00		64.24	I	
253576	8/02/13	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	1.00		16.06	I	
253577	8/02/13	800000	VISITING NURSE SERVICE	VELECELA, LUIS	9.00		144.54	I	
253578	8/02/13	800000	VISITING NURSE SERVICE	VELECELA, LUIS	6.00		96.36	I	
253579	8/02/13	800000	VISITING NURSE SERVICE	VELECELA, MARIA	12.00		192.72	I	
253580	8/02/13	800000	VISITING NURSE SERVICE	VELECELA, MARIA	8.00		128.48	I	
				CUSTOMER	44.00	0.00	706.64		
				CATEGORY	44.00	0.00	706.64		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : ADU ADULT	223
BILLED GIAV	1 1 0313	100 001		SALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253581 253582	8/02/13 8/02/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VENTURA, ROSA VENTURA, ROSA	28.00 14.00		449.68 I 224.84 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

			YSIDE CITYWIDE	222 222			PAGE 1 - 2	
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
253583	8/02/13	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	08/07/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 22	25
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
				SALES REGISTE	R		BILL WEEK ENI	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253584	8/02/13	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	24.00		385.44	I	
253585	8/02/13	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	6.00		96.36	I	
253586	8/02/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	50.00		803.00	I	
253587	8/02/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	20.00		321.20	I	
				CUSTOMER	100.00	0.00	1,606.00		
				CATEGORY	100.00	0.00	1,606.00		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 226	
SALES JRN	rL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
253588	8/02/13	000008	VISITING NURSE SERVICE	VLAHOS, MARIE	12.00		192.72 I	
253589	8/02/13	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	8.00		128.48 I	
				CUSTOMER	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

			YSIDE CITYWIDE	DDG 199			PAGE 1	- 22	27
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		0 /00 /13
			S	ALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253590	7/26/13	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	6.00		96.36	I	
253591	8/02/13	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	6.00		96.36	I	
253592	8/02/13	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	12.00		192.72	I	
253593	8/02/13	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	8.00		128.48	I	
253594	8/02/13	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	4.00		64.24	I	
				CUSTOMER	36.00	0.00	578.16		
				CATEGORY	36.00	0.00	578.16		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		RE PROGRAM
			·	SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253595 253596	8/02/13 8/02/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	12.00 4.00		192.72 64.24	I	
				CUSTOMER	16.00	0.00	256.96		
				CATEGORY	16.00	0.00	256.96		

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 229 SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 8/09/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 8/02/13 803.76 I 1,000.00 I 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 7/12/13 8/02/13 8/02/13 8/02/13 7/26/13 8/02/13 8/02/13 8/02/13 8/02/13 7/12/13 8/02/13 7/26/13 8/02/13 7/26/13 8/02/13 8/02/13 8/02/13 8/02/13 000010 GUILDNET

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 230SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 8/09/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 253646 8/02/13 596.00 I 000010 GUILDNET 8/02/13 1,103.20 I 253647 000010 GUILDNET 253648 8/02/13 000010 GUILDNET I 253649 8/02/13 000010 GUILDNET 253650 GUILDNET 8/02/13 000010 253651 GUILDNET 8/02/13 000010 253652 8/02/13 000010 GUILDNET 253653 8/02/13 000010 GUILDNET 253654 8/02/13 000010 GUILDNET 253655 8/02/13 000010 GUILDNET GUILDNET 253656 8/02/13 000010 253657 8/02/13 000010 GUILDNET 253658 8/02/13 000010 GUILDNET 253659 8/02/13 000010 GUILDNET 253660 8/02/13 000010 GUILDNET 253661 7/19/13 000010 GUILDNET 253662 8/02/13 000010 GUILDNET 253663 8/02/13 000010 GUILDNET 253664 8/02/13 000010 GUILDNET 253665 8/02/13 000010 GUILDNET 253666 GUILDNET 8/02/13 000010 253667 GUILDNET 8/02/13 000010 253668 7/26/13 000010 GUILDNET 253669 8/02/13 000010 GUILDNET 253670 8/02/13 000010 GUILDNET 253671 8/02/13 000010 GUILDNET 253672 8/02/13 000010 GUILDNET 253673 8/02/13 000010 GUILDNET 253674 8/02/13 000010 GUILDNET 253675 7/26/13 000010 GUILDNET 253676 8/02/13 000010 GUILDNET 253677 8/02/13 000010 GUILDNET 253678 8/02/13 000010 GUILDNET 253679 GUILDNET 8/02/13 000010 253680 8/02/13 000010 GUILDNET 253681 8/02/13 000010 GUILDNET 253682 8/02/13 000010 GUILDNET 253683 8/02/13 000010 GUILDNET 253684 GUILDNET 8/02/13 000010 253685 8/02/13 000010 GUILDNET 253686 8/02/13 000010 GUILDNET 253687 8/02/13 000010 GUILDNET 253688 8/02/13 000010 GUILDNET 253689 8/02/13 GUILDNET 000010 253690 8/02/13 GUILDNET 000010 253691 8/02/13 000010 GUILDNET 253692 8/02/13 000010 GUILDNET 253693 8/02/13 GUILDNET 000010 8/02/13 000010 GUILDNET 253694

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 231 SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 8/09/13 REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 253695 8/02/13 236.40 I 000010 GUILDNET 253696 8/02/13 157.60 I 000010 GUILDNET 253697 7/26/13 000010 GUILDNET 253698 8/02/13 000010 GUILDNET 253699 GUILDNET 8/02/13 000010 253700 GUILDNET 8/02/13 000010 253701 GUILDNET 8/02/13 000010 253702 8/02/13 GUILDNET 000010 253703 8/02/13 000010 GUILDNET 253704 8/02/13 000010 GUILDNET 253705 8/02/13 000010 GUILDNET GUILDNET 253706 8/02/13 000010 253707 8/02/13 000010 GUILDNET 253708 8/02/13 000010 GUILDNET 253709 8/02/13 000010 GUILDNET 253710 8/02/13 000010 GUILDNET 253711 8/02/13 000010 GUILDNET 253712 8/02/13 000010 GUILDNET 253713 8/02/13 000010 GUILDNET 253714 8/02/13 000010 GUILDNET 253715 000010 GUILDNET 8/02/13 253716 000010 GUILDNET 8/02/13 253717 8/02/13 000010 GUILDNET 253718 8/02/13 000010 GUILDNET 253719 8/02/13 000010 GUILDNET 253720 8/02/13 000010 GUILDNET 253721 8/02/13 000010 GUILDNET 253722 8/02/13 000010 GUILDNET 253723 7/19/13 000010 GUILDNET 253724 8/02/13 000010 GUILDNET 253725 8/02/13 000010 GUILDNET 253726 8/02/13 000010 GUILDNET 253727 8/02/13 000010 GUILDNET 253728 8/02/13 000010 GUILDNET 253729 8/02/13 000010 GUILDNET 253730 8/02/13 000010 GUILDNET 253731 8/02/13 000010 GUILDNET 253732 8/02/13 000010 GUILDNET 253733 000010 GUILDNET 8/02/13 253734 000010 GUILDNET 8/02/13 253735 8/02/13 000010 GUILDNET 253736 000010 GUILDNET 8/02/13 253737 000010 GUILDNET 8/02/13 253738 8/02/13 000010 GUILDNET 253739 8/02/13 000010 GUILDNET I 253740 8/02/13 000010 GUILDNET 253741 8/02/13 000010 GUILDNET 253742 8/02/13 000010 GUILDNET 253743 8/02/13 000010 GUILDNET

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 4 - 232 SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 8/09/13 INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 253744 8/02/13 000010 253745 8/02/13 000010 253746 8/02/13 000010 253747 7/26/13 000010 253748 8/02/13 000010 253749 8/02/13 000010 253750 8/02/13 000010 253751 8/02/13 000010 253752 7/05/13 000010 253753 8/02/13 000010 253754 8/02/13 000010 253755 8/02/13 000010 253756 7/05/13 000010 253757 8/02/13 000010 253758 8/02/13 000010 253759 8/02/13 000010 253760 7/26/13 000010 253761 8/02/13 000010 253762 8/02/13 000010 253763 8/02/13 000010 253764 8/02/13 000010 253765 8/02/13 000010 253766 8/02/13 000010 253767 8/02/13 000010 253768 8/02/13 000010 253769 8/02/13 000010 253770 8/02/13 000010 253771 8/02/13 000010 253772 8/02/13 000010 253773 8/02/13 000010 253774 8/02/13 000010 253775 8/02/13 000010 253776 8/02/13 000010 253777 8/02/13 000010 253778 8/02/13 000010 253779 8/02/13 000010 253780 8/02/13 000010 253781 8/02/13 000010 253782 000010 GUILDNET 8/02/13 253783 000010 GUILDNET 8/02/13 253784 8/02/13 000010 GUILDNET 253785 000010 GUILDNET 8/02/13 253786 000010 GUILDNET 8/02/13 253787 8/02/13 000010 253788 8/02/13 000010 253789 8/02/13 000010 253790 8/02/13 000010 253791 8/02/13 000010 GUILDNET 8/02/13 000010 GUILDNET 253792

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 5 GUI GUILDNET	- 233
	_			SALES REGISTE	R		BILL WEEK END	DING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
253793	8/02/13	000010	GUILDNET	WARD, ALTHEA	4.00		58.40	I
253794	8/02/13	000010	GUILDNET	WEISZ, KLARA	8.00		126.08	I
253795	8/02/13	000010	GUILDNET	WEST, BALDWIN	16.00		252.16	I
253796	8/02/13	000010	GUILDNET	WHITLEY, MYRNA	16.00		252.16	I
253797	8/02/13	000010	GUILDNET	YI, CARLOS	24.00		378.24	I
253798	8/02/13	000010	GUILDNET	ZARAGOZA, ISABE	40.00		630.40	I
253799	8/02/13	000010	GUILDNET	ZARE, GLORIA	55.75		878.62	I
253800	8/02/13	000010	GUILDNET	ZUMAETA, FANNY	57.00		898.32	I
				CUSTOMER	6,031.03	0.00	104,356.97	
				- CATEGORY	6,031.03	0.00	104,356.97	

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY
S A L E S R E G I S T E R RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 234 HFS HEALTH FIRST BILL WEEK ENDING 8/09/13 REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 7/26/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 7/19/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 7/19/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13

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253849 8/02/13 000122 HEALTH FIRST

000122 HEALTH FIRST

	08/07/13 - IL # 0345		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGI	STEF	₹		PAGE 2 HFS HEALTH F BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	1	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253850	8/02/13	000122	HEALTH FIRST	WELLS, WYN	IORIA	16.00		270.08	I	
				CUST	COMER	2,216.50	0.00	37,414.52		
				CATE	 GORY	2,216.50	0.00	37,414.52		

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	6
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHOL	IC/FI	DELIS
				SALES REGISTER			BILL WEEK END	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253851	8/02/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
253852	8/02/13	000126	NYS CATHOLIC/FIDELIS	GARCIA, CLEMENT	24.00		404.88	I	
253853	8/02/13	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45	I	
253854	8/02/13	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	23.00		388.01	I	
253855	8/02/13	000126	NYS CATHOLIC/FIDELIS	ORTIZ, EDUARDO	35.00		590.45	I	
253856	8/02/13	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81	I	
253857	8/02/13	000126	NYS CATHOLIC/FIDELIS	SALABERRY, ANA	84.00		1,417.08	I	
253858	8/02/13	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	30.00		506.10	I	
253859	8/02/13	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	41.00		691.67	I	
					204.00				
				CUSTOMER	384.00	0.00	6,478.08		
				CATEGORY	384.00	0.00	6,478.08		

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWID				REG NY NY			PAGE 1 - UHC UNITED HEAI	237 LTH
				SALES REGISTER			BILL WEEK ENDIN	NG 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
253860	8/02/13	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	[
253861	8/02/13	000128	UNITED HEALTH CARE	FARFAN, MARIA	56.00		960.96	[
253862	8/02/13	000128	UNITED HEALTH CARE	KHAN, FAZAL	84.00		1,441.44	[
253863	8/02/13	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	53.00		909.48	[
253864	8/02/13	000128	UNITED HEALTH CARE	REYES, RODOLFO	21.00		360.36	[
253865	8/02/13	000128	UNITED HEALTH CARE	SAFOS, PATRA	48.00		823.68	[
253866	8/02/13	000128	UNITED HEALTH CARE	SAFOS, PATRA	8.00		137.28	[
253867	7/05/13	000128	UNITED HEALTH CARE	TSOURATAKIS, EL	204.00		3,500.64	[
				CUSTOMER	544.00	0.00	9,335.04	
				CATEGORY	544.00	0.00	9,335.04	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 23	88
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			EHP EMBLEM H	EALTH	
				SALES	REGISTEF	₹.		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253868	8/02/13	000114	EMBLEM HEALTH	CC	PE, WILLIE	84.00		1,417.92	I	
253869	8/02/13	000114	EMBLEM HEALTH	CC	PELAND, ELISE	84.00		1,197.00	I	
253870	8/02/13	000114	EMBLEM HEALTH	DE	JESUS, TIBUR	84.00		1,417.92	I	
253871	8/02/13	000114	EMBLEM HEALTH	GA	AFFNEY, FREDER	20.00		337.60	I	
253872	8/02/13	000114	EMBLEM HEALTH	IA	ANNAZZO, ANGEL	54.00		911.52	I	
253873	8/02/13	000114	EMBLEM HEALTH	JA	ACKSON, FRANCE	49.00		827.12	I	
253874	8/02/13	000114	EMBLEM HEALTH	KE	EATON, CATHERI	60.00		1,012.80	I	
253875	8/02/13	000114	EMBLEM HEALTH	KE	EATON, CATHERI	46.00		776.48	I	
253876	8/02/13	000114	EMBLEM HEALTH	LA	ANGELOH, HOWAR	36.00		607.68	I	
253877	8/02/13	000114	EMBLEM HEALTH	RE	YNOLDS, HARRI	12.00		202.56	I	
253878	6/28/13	000114	EMBLEM HEALTH	WE	ESTFIELD, BREN	56.00		945.28	I	
					CUSTOMER	585.00	0.00	9,653.88		
					CATEGORY	585.00	0.00	9,653.88		

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER							PAGE 1 HIP HEALTH II BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253879 253880 253881 253882 253883 253884	5/10/13 8/02/13 8/02/13 8/02/13 8/02/13 8/02/13	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA SHAH, HANSIKABE WILLIAMS, DIANE	4.00 33.00 20.00 40.00 5.00 20.00		67.52 557.04 337.60 675.20 84.40 337.60	I I I I I	
				CUSTOMER	122.00	0.00	2,059.36		
				 CATEGORY	122.00	0.00	2,059.36		

									PAGE 1 - 240		
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLUS				
				SALES REGISTER	{		BILL WEEK EN	DING	8/09/13		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
253885	8/02/13	000130	METROPLUS HEALTH	ARIAS, NORA	67.00		1,149.05	I			
253886	8/02/13	000130	METROPLUS HEALTH	CORDERO, ROSEND	30.00		514.50	I			
253887	8/02/13	000130	METROPLUS HEALTH	DOBBINS, SANDRA	168.00		2,881.20	I			
253888	8/02/13	000130	METROPLUS HEALTH	GOMEZ, LUZ	56.00		960.40	I			
253889	8/02/13	000130	METROPLUS HEALTH	MURDOCK, GERTRU	48.00		823.20	I			
253890	8/02/13	000130	METROPLUS HEALTH	PERSAD, USHA	70.00		1,200.50	I			
253891	8/02/13	000130	METROPLUS HEALTH	RYALS, CHARLES	8.00		137.20	I			
253892	8/02/13	000130	METROPLUS HEALTH	SANTORO, MATTHE	25.00		428.75	I			
253893	8/02/13	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20	I			
253894	7/26/13	000130	METROPLUS HEALTH	TILAK, VEERAMA	30.00		514.50	I			
				CUSTOMER	530.00	0.00	9,089.50				
				CATEGORY	530.00	0.00	9,089.50				

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 241 LOC 001 SUNNYSIDE CITYWIDE REG NY NY TTYWIDE REG NY NY SALES REGISTER SALES JRNL # 0345 WEL WELCARE OF NY BILL WEEK ENDING 8/09/13 ## DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT '

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	08/07/13 - IL # 0345		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTI	E R		PAGE 2 WEL WELCARE (BILL WEEK EN		8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	1	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253944	8/02/13	000124	WELCARE OF NEW YORK,	INC. Y	OUNG, MARY	55.00		946.00	I	
					CUSTOMER	1,500.00	0.00	25,800.00		
					CATEGORY	1,500.00	0.00	25,800.00		

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 243 RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY
SALES REGISTER SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 8/09/13 REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 56.96 I 56.96 I

RUN DATE 08/07/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTI	7 P		PAGE 2 SHP SENIOR H BILL WEEK EN			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253994 253995	8/02/13 8/02/13	000082 000082	SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS	WOO, LUZ ZAPATA, SIMON	4.00 8.00		56.96 113.92	I I	
				CUSTOMER	1,592.00	0.00	27,314.12		
				CATEGORY	1,592.00	0.00	27,314.12		

			YSIDE CITYWIDE				PAGE 1		.5
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMG AMERIGROU	P	
				SALES REGISTER			BILL WEEK END	ING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
253996	8/02/13	000132	AMERIGROUP	CARRILLO, MARIA	25.00		422.00	I	
253997	8/02/13	000132	AMERIGROUP	GUERRA, LORRAIN	49.00		827.12	I	
253998	8/02/13	000132	AMERIGROUP	PRUITT, JOHNNY	8.00		135.04	I	
253999	8/02/13	000132	AMERIGROUP	WALTERS, BYRON	30.00		506.40	I	
254000	8/02/13	000132	AMERIGROUP	YOUNG, KALEILE	23.00		388.24	I	
				CUSTOMER	135.00	0.00	2,278.80		
				CATEGORY	135.00	0.00	2,278.80		

			YSIDE CITYWIDE	5-2			-	- 246
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AM2 AMERIGROU	
				SALES REGISTER	<		BILL WEEK END	ING 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
254001	8/02/13	000204	AMERIGROUP 2	COLCHAMIRO, EST	32.00		480.00	I
254002	8/02/13	000204	AMERIGROUP 2	FERNANDEZ, NORK	25.00		375.00	I
254003	8/02/13	000204	AMERIGROUP 2	FERNANDEZ, NORK	17.00		255.00	I
254004	8/02/13	000204	AMERIGROUP 2	HARDING, EDNA	20.00		300.00	I
254005	8/02/13	000204	AMERIGROUP 2	MARTINEZ, TOMAS	20.00		300.00	I
254006	8/02/13	000204	AMERIGROUP 2	RIVERA, CARMEN	25.00		375.00	I
				CUSTOMER	139.00	0.00	2,085.00	
				CATEGORY	139.00	0.00	2,085.00	

			YSIDE CITYWIDE						- 24		
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HCP HEALTHCA			
				SALES RE	GISTER			BILL WEEK EN	DING	8/09/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
254007	8/02/13	000148	HEALTH CARE PARTNERS	ZAMBRAN	IO, ZOILA	8.00		135.04	I		
				C	CATEGORY	8.00	0.00	135.04			

RUN DATE SALES JRN				REG NY NY LES REGISTEI	R		11102	ENCE	48 CARE SYSTEMS 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
254008 254009	8/02/13 8/02/13	000172 000172	INDEPENDENCE CARE SYSTEMS INDEPENDENCE CARE SYSTEMS	AGOSTINI, MONSE BERRY, ANGELINA	24.00 28.00		393.60 459.20	I	
254010 254011	8/02/13 8/02/13	000172 000172	INDEPENDENCE CARE SYSTEMS INDEPENDENCE CARE SYSTEMS	CHANCELLOR, IRA MUSHAYEV, BORIS	16.00 30.00		262.40 492.00	I T	
254012 254013	8/02/13 8/02/13	000172 000172 000172	INDEPENDENCE CARE SYSTEMS INDEPENDENCE CARE SYSTEMS	PEREZ, RAFAELA RIVERS, DEBRA	165.25 80.50		2,710.10 1,320.20	I	
254013 254014 254015	8/02/13 8/02/13	000172 000172 000172	INDEPENDENCE CARE SYSTEMS INDEPENDENCE CARE SYSTEMS INDEPENDENCE CARE SYSTEMS	RODRIGUEZ, SILV TORRES, YNES	55.50 16.00		910.20 262.40	I	
234013	0/02/13	000172	INDEPENDENCE CARE SISIEMS	CUSTOMER		0.00	6,810.10		
				COSTOMER	415.25	0.00	0,010.10		
				CATEGORY	415.25	0.00	6,810.10		

RUN DATE 08/07/13			556 351					- 249
SALES JRNL # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTER			VCS VNSNY CH BILL WEEK EN	OICE SELECTHEALTH DING 8/09/13
			5 11 2 2 5				5111 N211 111	211.0 0, 0, 1, 10
INVOICE# DATE	CUST NO	CUSTOMER NAME	1	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
254016 8/02/13	000170	VNSNY CHOICE SELECT	HEALTH K	ARASSAVIDES, A	28.00		480.48	I
254017 8/02/13	000170	VNSNY CHOICE SELECT	HEALTH R	EYES, LORGIO	32.00		549.12	I
				CUSTOMER	60.00	0.00	1,029.60	
							_,,,	
				CATECORY	60 00	0.00	1 029 60	
				CATEGORY	60.00	0.00	1,029.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VIL VILLAGE CARE BILL WEEK ENDING	250 MAX 8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
254018 254019 254020	8/02/13 8/02/13 8/02/13	000218 000218 000218	VILLAGE CARE MAX VILLAGE CARE MAX VILLAGE CARE MAX	BERNARDI, SOLMA KLEIN, SHIRLEY MULLINGS, LUCIL	8.00 19.00 7.75		126.08 I 299.44 I 122.14 I	
				CUSTOMER	34.75	0.00	547.66	
				CATEGORY	34.75	0.00	547.66	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVER BILL WEEK ENDIN	HEALTH
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
254021 254022	8/02/13 8/02/13	000210 000210	ELDERSERVE HEALTH ELDERSERVE HEALTH	BEAN, ELMIRA MEYSTER, LYUBOV	25.00 25.00		363.00 I	<u>.</u> [
				CUSTOMER	50.00	0.00	726.00	
				CATEGORY	50.00	0.00	726.00	

			YSIDE CITYWIDE				PAGE 1	- 25	52
SALES JRN	1L # 0345	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			PAR PRIVATE		
			SUNNYSIDE CITYWIDE REG S A L E	S REGISTER			BILL WEEK END	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
254023	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	AGUIRRE, ADELA AGUIRRE, ADELA ANGEL, LUCY BENZ, ROBERT CARDENAS, GUSTA CARDENAS, GUSTA JONES-MORGAN, V NAPPI, ANGELINA REYES, CARMEN REYES, EDUARDO VILLEGAS, CELSA VILLEGAS, ISMAE VILLEGAS, ISMAE	8.00		128.80	I	
254024	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	AGUIRRE, ADELA	4.00		64.40	I	
254025	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	ANGEL, LUCY	4.00		64.40	I	
254026	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	BENZ, ROBERT	8.00		128.80	I	
254027	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	CARDENAS, GUSTA	4.00		64.40	I	
254028	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	CARDENAS, GUSTA	4.00		64.40	I	
254029	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	JONES-MORGAN, V	4.00		64.40	I	
254030	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	NAPPI, ANGELINA	8.00		128.80	I	
254031	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	REYES, CARMEN	3.00		48.30	I	
254032	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	REYES, EDUARDO	3.00		48.30	I	
254033	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	VILLEGAS, CELSA	3.00		48.30	I	
254034	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	VILLEGAS, CELSA	3.00		48.30	I	
254035	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	VILLEGAS, ISMAE	3.00		48.30	I	
254036	8/02/13	000002	SUNNYSIDE COMMUNITY SERVICES	VILLEGAS, ISMAE	3.00		48.30	I	
				CUSTOMER	62.00	0.00	998.20		
254037	8/02/13	000040	DIITSIN CURTSTINE	DIITGIN YENIA	12 00		192 00	т	
254038	8/02/13	000040	DUISIN, CHRISTINE	DUIDIN, KENIA	8 00		124.00	T	
234030	0/02/13	000040	DUISIN, CHRISTINE DUISIN, CHRISTINE						
				CUSTOMER					
254039	8/02/13	000049	DOMINICAN SISTERS FAM HLTH DOMINICAN SISTERS FAM HLTH	CASTRO, LINDSEY	3.00		43.50	I	
254040	8/02/13	000049	DOMINICAN SISTERS FAM HLTH	CASTRO, MEKAYLA	2.00		29.00	I	
				CUSTOMER		0.00			
254041	8/02/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	I	
254042	8/02/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	Ī	
	, . , .	-	MCDERMOTT, LOUISE MCDERMOTT, LOUISE						
				CUSTOMER	8.00	0.00	124.00		
						0.00	1,510.70		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 CAS CHILDREN'S AI	
SALES UKN	T # 0343	TOC 001		ALES REGISTER			BILL WEEK ENDING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
254043	8/02/13	000088	CHILDREN'S AID SOCIETY	DAVIS, LENEESIA	17.00		263.50 I	
254044	8/02/13	000088	CHILDREN'S AID SOCIETY	DAVIS, LENEESIA	8.00		124.00 I	
254045	8/02/13	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	15.00		232.50 I	
254046	8/02/13	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	10.00		155.00 I	
254047	8/02/13	000088	CHILDREN'S AID SOCIETY	OGBEWELE, FRANK	11.50		178.25 I	
				CUSTOMER	61.50	0.00	953.25	
				CATEGORY	 61.50	0.00	953.25	

RUN DATE	08/07/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 25	54
SALES JRN	L # 0345	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			CCM COMPREHE	NSIVE	CARE MGMT
			S	ALE	S REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
054040	0 (00 (13	000150	GOVERNMENT GIRL WILL	~=====		10.00		160.00	-	
254048	8/02/13	000150	COMPREHENSIVE CARE MANAG		APONTE, ANA	12.00		169.20	Τ	
254049	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	APONTE, ANA	6.00		84.60	I	
254050	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	CARO, CLARA	50.00		705.00	I	
254051	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	CARO, CLARA	20.00		282.00	I	
254052	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	POOLE, JENNIFER	2.50		35.25	I	
254053	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	POOLE, JENNIFER	3.00		42.30	I	
254054	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	ROSARIO, CELEST	26.00		366.60	I	
254055	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	ROSARIO, CELEST	14.00		197.40	I	
254056	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	RUDA, EDWIN	12.25		172.73	I	
254057	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	RUSSELL, BERNIC	12.00		169.20	I	
254058	8/02/13	000150	COMPREHENSIVE CARE MANAG	GEMENT	RUSSELL, BERNIC	6.00		84.60	I	
					CLICTOMED	 163.75	0.00	2,308.88		
					CUSTOMER	103.75	0.00	2,308.88		
					CATEGORY	163.75	0.00	2,308.88		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 PAR PRIVATE	- 25	55
Brilles orde	1 0313	100 001	BOINTEDE CITTWIDE	SALES REGISTE	R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
254059 254060	8/02/13 8/02/13	000155 000155	ROSEMARY JIBAJA ROSEMARY JIBAJA	JIBAJA, ROSEMAR JIBAJA, ROSEMAR	119.25 48.00		1,919.63 744.00	I I	
				CUSTOMER	167.25	0.00	2,663.63		
254061 254062	8/02/13 8/02/13	000179 000179	DOROTHY TABICKMAN DOROTHY TABICKMAN	TABICKMAN, DORT TABICKMAN, DORT	8.00 4.00		124.00 62.00	I I	
				CUSTOMER	12.00	0.00	186.00		
				CATEGORY	179.25	0.00	2,849.63		

RUN DATE 08 SALES JRNL	3/07/13 - SUP SUN # 0345 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 256 HHH HHH HOME CARE INC. BILL WEEK ENDING 8/09/13
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
	3/02/13 000192 3/02/13 000192	HHH LONG TERM HOME HLTH	- · · · · · · · · · · · · · · · · · · ·	27.00 8.00	405.00 I 120.00 I
			CUSTOMER	35.00 0.00	525.00
			CATEGORY	35.00 0.00	525.00

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 PAR PRIVATE	- 25	57
				SALES REGISTER			BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
254065	7/19/13	000205	BILL NANIS		12.00		186.00	I	
254066	7/26/13	000205	BILL NANIS	•	24.00		390.00	I	
254067 254068	8/02/13 8/02/13	000205 000205	BILL NANIS BILL NANIS	NANIS, KOSTAS NANIS, KOSTAS	48.00 12.00		789.00 195.00	I I	
				CUSTOMER		0.00	1,560.00		
254069	8/02/13	000211	CATHERINE BARLIS/	BARLIS, CATHERI	10.00		170.00	I	
254070	8/02/13	000215	KATHRYN CIRAOLO	SMITH, ROSALEEN	7.75		120.13	I	
254071	8/02/13	000215	KATHRYN CIRAOLO	SMITH, ROSALEEN	3.75		58.13	I	
				CUSTOMER	11.50	0.00	178.26		
254072	8/02/13	000219	SUSANNE K. HAYES	JENSEN, HELGA	40.00		635.00	I	
254073 254074	8/02/13 8/02/13	002215 002215	KEITH SALMON KEITH SALMON	LAWRANCE, LILLA LAWRANCE, LILLA	12.00 8.00		198.00 124.00	I I	
				CUSTOMER	20.00	0.00	322.00		
254075	8/02/13	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	8.00		124.00	I	
254076	8/02/13	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	8.00		124.00	I	
				CUSTOMER		0.00	248.00		
254077 254078	8/02/13 8/02/13	004784 004784	CAMILLERI, JOSEPH CAMILLERI, JOSEPH	CAMILLERI, JOSE CAMILLERI, JOSE	15.00 10.00		202.50 135.00	I I	
					25.00	0.00	337.50		
254079	8/02/13	009498	LOUIS LE NOACH	LENOACH, LOUIS			136.00	I	
254080	8/02/13	009498	LOUIS LE NOACH	LENOACH, LOUIS	4.00		62.00	I 	
					12.00	0.00	198.00		
254081 254082	8/02/13 8/02/13	010269 010269	ANGELINA MARASA ANGELINA MARASA		3.00		93.00 46.50	I	
				CUSTOMER		0.00	139.50		
254083	8/02/13	010529	STEPHEN WEISS	WEISS, STELLA	6.00		102.00	I	
254084 254085	8/02/13 8/02/13	010530 010530	DANA SITILDES DANA SITILDES	ANSELMI, PETER ANSELMI, PETER	16.00 8.00		254.00 124.00	I I	
				CUSTOMER	24.00	0.00	378.00		
254086	8/02/13	011016	MICHAEL SIANO	SIANO, ANDREW	18.00		243.00	I	

	08/07/13 - NL # 0345		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 2 PAR PRIVATE	- 25	- 58
			S	REG NY NY ALES REGISTE	R		BILL WEEK EN	DING	8/09/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
254087	8/02/13	011016	MICHAEL SIANO	DILLIO, ILLEILEN	12.00		162.00	I	
				CUSTOMER	30.00	0.00			
254088 254089	8/02/13 8/02/13	011060 011060	ROBIN WARREN CHARLES ROBIN WARREN CHARLES		88.00 38.00		1,410.50 589.00	I I	
						0.00			
254090	8/02/13	012326	LORRAINE BIANCO-HOPKINS	•			124.00	I	
254091 254092	8/02/13 8/02/13	012565 012565	AMY L. WELTMAN AMY L. WELTMAN	LUSKIND, FRANCE LUSKIND, FRANCE	5.00 2.00		966.00 372.00	I I	
				CUSTOMER	7.00	0.00	1,338.00		
254093 254094	8/02/13 8/02/13	012929 012929	JENNA SPERO JENNA SPERO	SPERO, NICHOLAS SPERO, NICHOLAS	23.00		367.00 186.00	I I	
				CUSTOMER		0.00			
254095 254096	8/02/13 8/02/13	013244 013244	FRANK JARAMILLO FRANK JARAMILLO	FLOREZ, CAROLIN FLOREZ, CAROLIN	3.00		46.50 46.50	I I	
						0.00			
254097	7/19/13	013561	EDWARD M. BARROW	BARROW, EDWARD			68.00	I	
254098 254099 254100	7/26/13 8/02/13 8/02/13	013648 013648 013648	MARGAREITA RAMOS MARGAREITA RAMOS MARGAREITA RAMOS	RAMOS, MARGARIT RAMOS, MARGARIT RAMOS, MARGARIT	1.50 3.00 3.00		23.25 46.50 46.50	I I I	
						0.00			
254101 254102	8/02/13 8/02/13	013712 013712	GEORGE MELVIN GEORGE MELVIN	MELVIN, MIRIAM MELVIN, MIRIAM	3.50 13.50		54.25 209.25	I I	
				CUSTOMER					
254103 254104	8/02/13 8/02/13	013729 013729	ROBERT WEHLE ROBERT WEHLE	WEHLE, BEATRICE WEHLE, BEATRICE	18.00 12.00		279.00 186.00	I I	
						0.00			
254105 254106	8/02/13 8/02/13		BILL NANIS BILL NANIS	NANIS, EVMENIA NANIS, EVMENIA	12.00 12.00		186.00 186.00	I I	
				CUSTOMER	24.00	0.00	372.00		
				CATEGORY	564.00		10,065.51		
							464,735.43		
					27,975.03		464,735.43		

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SALES JRNL # 0345 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 8/09/13

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

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