RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0330 LOC 001 SUNNYSID

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SENIOR HEALTH PARTNERS

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NYSIDE CITYWIDE				PAGE I	_	1
SUNNYSIDE CITYWIDE	REG NY NY			SHP SENIOR H	EALTH	PARTNERS
S A	LES REGISTER	{		BILL WEEK EN	DING	4/26/13
SUNNYSIDE CITYWIDE S A						, .,
CUCTOMED NAME	DEFEDENCE	U∩IID C	ጥላል ላለተ	∧ M ∩ I INTT	TVD	SURPLUS
CUSTOMER NAME	KEFEKENCE	CAUUN	IAA AMI	AMOUNT	IIP	SURPLUS
		4 00			_	
SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		56.96	Τ	
SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		56.96	I	
SENIOR HEALTH PARTNERS	ANDERSON, BETH	48.00		683.52	I	
SENIOR HEALTH PARTNERS	APOSTOLOVA, LJU	120.00		1,708.80	I	
SENIOR HEALTH PARTNERS	BROOKS, NATALIE	22.00		313.28	I	
SENTOR HEALTH PARTNERS	COLON. RAYMUNDA	35.00		498.40	T	
SENTOR HEALTH DARTNERS	CIEVA RAFAFI.A	84 00		1 196 16	T	
CENTOR HEALTH DARWERS	DETECTIO VONDET	0 00		120.16	± +	
SENIOR HEALIN PARTNERS	DEUESUS, ISABEL	16.00		120.10	± +	
SENIOR HEALTH PARTNERS	ESCANIO, ANTONI	16.00		227.84	1	
SENIOR HEALTH PARTNERS	ESTRADA, MIRIAM	36.00		512.64	Τ	
SENIOR HEALTH PARTNERS	FULLER, WILLIAM	70.00		996.80	I	
SENIOR HEALTH PARTNERS	GARCIA, VICTORI	25.00		356.00	I	
SENIOR HEALTH PARTNERS	GHILIOTTY, FLOR	24.00		341.76	I	
SENIOR HEALTH PARTNERS	GOODWIN, CLYDE	80.00		1.139.20	I	
SENTOR HEALTH PARTNERS	GRAFSTEIN LILL	4 00		800 00	T	
CENTOR HEALTH DARTNERS	HYDIDIM KHYWYL	33 00		469 92	T	
CENTOR HEALTH PARTNERS	IIARIDIN, RIMIAI	125.00		1 022 40	<u>+</u>	
SENIOR MEALIN PARINERS	HARIDIN, RAMDIA	133.00		1,922.40		
SENIOR HEALTH PARTNERS	HARLEY, ETHEL	12.00		1/0.88	1	
SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	59.50		847.28	I	
SENIOR HEALTH PARTNERS	MALDONADO, MARI	7.00		1,400.00	I	
SENIOR HEALTH PARTNERS	MALDONADO, VICE	4.00		800.00	I	
SENIOR HEALTH PARTNERS	MARTINEZ 2, EMM	4.00		56.96	I	
SENIOR HEALTH PARTNERS	MARTINEZ 2. EMM	4.00		56.96	I	
SENTOR HEALTH DARTNERS	MARTINEZ POSAR	8 00		113 92	T	
CENTOR HEALTH DARTNERS	MATOS AUDEA	12 00		170 88	T	
CENTOR HEALTH PARTNERS	MAYMADD IIIIIA	20.00		416 60	<u>+</u>	
SENIOR HEALIH PARINERS	MAINARD, LILLIA	29.25		410.52		
SENIOR HEALTH PARTNERS	MERCADO, ELVA	35.00		498.40	1	
SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	74.00		1,053.76	I	
SENIOR HEALTH PARTNERS	ORTIZ, SANTIAGO	50.00		712.00	I	
SENIOR HEALTH PARTNERS	OSBORNE, DOROTH	20.00		284.80	I	
SENIOR HEALTH PARTNERS	PERALTA, ANTONI	40.00		569.60	I	
SENIOR HEALTH PARTNERS	POLANCO, ANTONI	16.00		227.84	I	
SENTOR HEALTH PARTNERS	POLANCO RAMON	10 00		142 40	T	
SENTOR HEALTH DARTNERS	RAMOS TSARET.	37 00		526 88	Ť	
CENTOR HEALTH PARTNERS	DAMOS, ISABEL	1.00		520.00	<u>+</u>	
SENIOR HEALIN PARTNERS	RAMOS, ISABEL	4.00		712.00	±	
SENIOR HEALTH PARTNERS	RIVERA, BRIGIDA	50.00		/12.00		
SENIOR HEALTH PARTNERS	RODRIGUEZ, PAUL	7.00		1,400.00	I	
SENIOR HEALTH PARTNERS	ROSA, CARMEN	25.00		356.00	I	
SENIOR HEALTH PARTNERS	ROSADO, CARMEN	60.00		854.40	I	
SENIOR HEALTH PARTNERS	RUIZ, MIRTA	27.00		384.48	I	
SENIOR HEALTH PARTNERS	SALICRUP, CARME	12.00		170.88	I	
SENTOR HEALTH PARTNERS	STERRA DOMINGA	40 00		569 60	T	
CENTOD DEALTH DADTHEDS	CIEDDA MIDIAM	47 00		660 75	т Т	
CENTOR HEATER DARWERS	CIMON TIDE	9 00		112 02		
SENIOR HEALIH PARINERS	SIMON, LUPE	8.00		113.92	Τ Τ	
SENIOR HEALTH PARTNERS	SOTO, AGRIPINA	20.00		284.80	Ţ	
SUNNYSIDE CITYWIDE SUNNYSIDE CITYWIDE SUNNYSIDE CITYWIDE SENIOR HEALTH PARTNERS	TORRES, ANTONIA	7.00		1,400.00	I	

20.00

40.00

8.00

TORRES, JOSE

TORRESCAMPOS, J

VASQUEZ, CORNEL

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RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTI	I R		PAGE 2 SHP SENIOR H BILL WEEK EN		2 PARTNERS 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238533 238534 238535	4/19/13 4/19/13 4/19/13	000082 000082 000082	SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS	WOO, LUZ WOO, LUZ ZAPATA, SIMON	4.00 4.00 12.00		56.96 56.96 170.88	I I I	
				CUSTOMER	1,565.75	0.00	27,683.83		
				CATEGORY	1,565.75	0.00	27,683.83		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITY	WIDE	REG NY NY			PAGE 1 VCP CHOICE L	_ 	3
DALLS OIL	ш # 0550	100 001	SOUNTSIDE CIT		ALES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238536	4/19/13	000008	VISITING NURSE	SERVICE	ABINANTI, IRENE	54.50		875.29	I	
238537	4/19/13	000008	VISITING NURSE	SERVICE	ACOSTA, ALBERTO	35.00		562.10	I	
238538	4/19/13	000008	VISITING NURSE	SERVICE	ADAMES, OLGA	25.00		401.50	I	
238539	4/19/13	000008	VISITING NURSE	SERVICE	ADAMES, RICARDO	34.75		558.09	I	
238540	4/19/13	000008	VISITING NURSE	SERVICE	ADAMS, MYRIAM	68.25		1,096.10	I	
238541	4/19/13	000008	VISITING NURSE	SERVICE	ADUN, JEANETTE	7.00		1,349.04	I	
238542	4/19/13	800000	VISITING NURSE	SERVICE	AFZAL, AMIR	4.00		64.24	I	
					CUSTOMER	228.50	0.00	4,906.36		
					CATEGORY	228.50	0.00	4,906.36		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 4	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
238543	4/19/13	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		722.70 I	
				CATEGORY	45.00	0.00	722.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	
BALLED GIGV	ш н оззо	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238544 238545 238546	4/19/13 4/19/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	AGUILAR-PROCE, AHMED, BALAL AKBAR, NASEEM	41.75 16.25 19.75		670.51 260.98 317.19	С С Г
				CUSTOMER	77.75	0.00	1,248.68	
				CATEGORY	77.75	0.00	1,248.68	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	6 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238547	4/19/13	800000	VISITING NURSE SERVICE	ALBER, ARLENE	6.00		96.36 I	
				CATEGORY	6.00	0.00	96.36	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	7
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238548	4/19/13	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	8	
	- "			SALES REGISTER			BILL WEEK ENDING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
238549	4/19/13	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	32.50		521.96 I		
				CATEGORY	32.50	0.00	521.96		

RUN DATE SALES JRN	- , , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYW	WIDE REG NY	NY			PAGE 1 VCP CHOICE L	- HCSA	9
BALLED OIGN	ш т 0550	100 001	BONNIBIDE CITIW	SALES	REGISTER	2		BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	1	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238550	4/19/13	000008	VISITING NURSE S	SERVICE A	LMANZAR, REMIG	1.00		16.06	I	
238551	4/19/13	800000	VISITING NURSE S	SERVICE A	LVAREZ, DALILA	20.00		321.20	I	
238552	4/19/13	800000	VISITING NURSE S	SERVICE A	NANIA, GLYGERI	40.00		642.40	I	
238553	4/19/13	000008	VISITING NURSE S	SERVICE A	NDINO, ESTEBAN	19.75		317.19	I	
238554	4/19/13	000008	VISITING NURSE S	SERVICE A	NDRADE, LOLA	56.00		899.36	I	
238555	4/19/13	000008	VISITING NURSE S	SERVICE A	NDREWS, JOHNNI	61.25		983.68	I	
238556	4/19/13	800000	VISITING NURSE S	SERVICE A	NGRISANO, RUTH	56.00		899.36	I	
					CUSTOMER	254.00	0.00	4,079.25		
					CATEGORY	254.00	0.00	4,079.25		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			\$	SALES REGISTER			BILL WEEK END	ING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
238557	4/19/13	000008	VISITING NURSE SERVICE	ANGULO, ELCY	34.75		558.09	I
238558	4/19/13	800000	VISITING NURSE SERVICE	ANUT, ALICE	61.00		979.66	I
				CUSTOMER	95.75	0.00	1,537.75	
				CATEGORY	95.75	0.00	1,537.75	

RUN DATE (04/24/13 -	SUP SUNN	YSIDE CITYWIDE					PAGE	1 -	11	
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE	LHCSA		
			S	SALES R	EGISTE	R		BILL WEEK E	NDING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
238559	4/19/13	800000	VISITING NURSE SERVICE	AOUN,	ODETTE	30.00		481.80	I		
					CATEGORY	30.00	0.00	481.80	-		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 1	2
BALLED GIGV	ш н оззо	100 001		SALES REGISTER			BILL WEEK END	ING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	ГҮР	SURPLUS
238560 238561	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ARANCIBIA, SYLV ARIAS, MAGDALEN	20.50 56.00		329.23 899.36	I	
230301	4/15/15	000000	VISITING NORSE SERVICE	·					
				CUSTOMER	76.50	0.00	1,228.59		
				CATEGORY	76.50	0.00	1,228.59		

RUN DATE 04/24/1 SALES JRNL # 033		SUNNYSIDE CITYWIDE	-	NY EGISTE	R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238562 3/15/1 238563 4/19/1		VISITING NURSE SERVICE VISITING NURSE SERVICE		ABUL ABUL	12.00 8.00		192.72 128.48	I I	
				CUSTOMER	20.00	0.00	321.20		
				 CATEGORY	20.00	0.00	321.20		

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L4
SALES JRN	L # 0330	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238564	4/19/13	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238565	4/19/13	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	16
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238566	4/19/13	800000	VISITING NURSE SERVICE	BANEGAS, SANTOS	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

			YSIDE CITYWIDE	DDG 1997			PAGE 1 -	17
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	IG 4/26/13
			, and a second	ALES KEGISTEK			DIDD WEEK ENDII	NG 4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238567	4/19/13	000008	VICINIA NUDGE GEDVIGE		49.00		786.94	-
238568	4/19/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BATTLE, JEANETT BATTLE, MARY	3.00		48.18	<u>-</u> T
238569	4/19/13	000008	VISITING NURSE SERVICE	BEIRNE, MARGARE	6.00		96.36	-
238570	4/19/13	000008	VISITING NURSE SERVICE	BENNETT, ROBIN	6.00		96.36	[
				CUSTOMER	64.00	0.00	1,027.84	
				CATEGORY	64.00	0.00	1,027.84	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	MEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
238571	4/19/13	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	33.00		529.98	Ι
				CATEGORY	33.00	0.00	 529.98	

			YSIDE CITYWIDE				PAGE 1 -	19
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	-
				SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238572	3/08/13	000008	VISITING NURSE SERVICE	BHATT, JYOTI	6.00		96.36	I
238573	4/19/13	800000	VISITING NURSE SERVICE	BHATT, JYOTI	42.00		674.52	I
				CUSTOMER	48.00	0.00	770.88	
				CATEGORY	48.00	0.00	770.88	

F	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	20
5	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
				5	SALES REGISTER			BILL WEEK ENDING	4/26/13
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
12	238574	4/19/13	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	20.00		321.20 I	
					CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	21
	,,			SALES REGISTER			BILL WEEK ENDIN	IG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238575	4/19/13	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	46.00		738.76 I	
				CATEGORY	46.00	0.00	738.76	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
238576	4/19/13	000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 ADU ADULT	
DALLS OW	ш # 0550	100 001		SALES REGISTER				1/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
238577 238578	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BOJORQUEZDECHA, BONFANTE, RAFAE	36.00 4.00		578.16 I 64.24 I	
				CUSTOMER	40.00	0.00	642.40	
				CATEGORY	40.00	0.00	642.40	

RUN I	DATE 04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	24	
SALES	3 JRNL # 0330	LOC 001		REG NY NY			VCP CHOICE LHCS		
			i	SALES REGISTER			BILL WEEK ENDIN	NG 4/26/13	
INVO	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
2385	79 4/19/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		321.20 I		
				CATEGORY	20.00	0.00	321.20		

	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	25
	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	238580	4/19/13	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	20.00		321.20 I	
ı									
ı					CATEGORY	20.00	0.00	321.20	

			JYSIDE CITYWIDE	DEC MY MY			PAGE 1	20
SALES JRN	ь # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			VCP CHOICE LHO	
			. ت	ALES KEGISIEK			DILL WEEK END	ING 4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
238581	4/19/13	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		192.72	I
238582	4/19/13	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		562.10	I
238583	4/19/13	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	70.00		1,124.20	I
238584	4/19/13	000008	VISITING NURSE SERVICE	BRACERO, HELEN	84.00		1,349.04	I
238585	4/19/13	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		144.54	I
238586	4/19/13	800000	VISITING NURSE SERVICE	BURITICA, INES	26.25		421.58	I
				CUSTOMER	236.25	0.00	3,794.18	
				CATEGORY	236.25	0.00	3,794.18	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	27
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238587	4/19/13	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE 0 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	28 A
			S	SALES REGISTER			BILL WEEK ENDIN	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	4/19/13 4/19/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CABA, PURA CABRERA, HERMIN	10.00 22.00		160.60 I 353.32 I	
	4/19/13	000008	VISITING NURSE SERVICE	CAIPO, MATILDE	35.00		562.10 I	
				CUSTOMER	67.00	0.00	1,076.02	
				CATEGORY	 67.00	0.00	1,076.02	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	29
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238591	4/19/13	800000	VISITING NURSE SERVICE	CAJJEJAS, MERCE	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	30
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238592	4/19/13	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	70.00		1,124.20 I	
				CATEGORY	70.00	0.00	1,124.20	

RUN DATE 04/24/ SALES JRNL # 03			REG NY NY			PAGE 1 - VCM VNS	31
BALLS OINE # 05	150 100 001		SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238593 4/12/ 238594 4/19/		VISITING NURSE SERVICE VISITING NURSE SERVICE	CALDERON, FRANC CALDERON, FRANC	16.00 56.00		256.96 899.36	I I
			CUSTOMER	72.00	0.00	1,156.32	
			CATEGORY	72.00	0.00	1,156.32	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238595	4/19/13	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DAT	E 04/24/13 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 33	
SALES J	RNL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238596	4/19/13	800000	VISITING NURSE SERVICE	CANO, ADELINA	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238597	4/19/13	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,349.04 I	
				CATEGORY	84.00	0.00	1,349.04	

			YSIDE CITYWIDE				PAGE 1 -	35
SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238598	4/19/13	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.75		574.15 I	
				CATEGORY	35.75	0.00	574.15	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	5 0
511225 614.	2 11 0000	200 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
238599	4/19/13	000008	VISITING NURSE SERVICE	CARDONA, MARIA	25.00		401.50	I
238600	4/19/13	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	83.00		1,332.98	I
238601	4/19/13	000008	VISITING NURSE SERVICE	CARELA-REYES, M	25.00		401.50	I
238602	4/19/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	20.00		321.20	I
				CUSTOMER	153.00	0.00	2,457.18	
				CATEGORY	153.00	0.00	2,457.18	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	37
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238603	4/19/13	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	38
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238604	4/19/13	800000	VISITING NURSE SERVICE	CASTANEDA, JOSE	42.00		674.52 I	
				CATEGORY	42.00	0.00		
				CALEGORI	±2.00	0.00	0/4.52	

			YSIDE CITYWIDE				PAGE 1 -	39
SALES JRN	L # 0330	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	7 4/26/12
				ALES REGISIER			BILL WEEK ENDIN	3 4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238605	4/19/13	000008	VISITING NURSE SERVICE	CAVATAIO, MILDR	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	

RUN DATE SALES JRN	- , , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		40
0111111	_ 0550	200 001		LES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238606	4/19/13	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		321.20	I	
238607	4/19/13	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	28.00		449.68	I	
238608	4/19/13	800000	VISITING NURSE SERVICE	CERRA, ADA	12.00		192.72	I	
238609	4/12/13	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	5.00		80.30	I	
238610	4/19/13	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	15.00		240.90	I	
238611	4/19/13	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	20.00		321.20	I	
238612	4/19/13	800000	VISITING NURSE SERVICE	CHARITAR, RAMKA	36.00		578.16	I	
238613	4/19/13	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		481.80	I	
				CUSTOMER	166.00	0.00	2,665.96		
				CATEGORY	 166.00	0.00	2,665.96		

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238614	4/19/13	800000	VISITING NURSE SERVICE	CHARLES, JOSE	9.75		156.59 I	
				CATEGORY	9.75	0.00	156.59	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	42
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238615	4/19/13	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	70.00		1,124.20 I	
				CATEGORY	70.00	0.00	1,124.20	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	43
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238616	4/19/13	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
				SALES REGISTER			BILL WEEK ENDIN	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238617	4/19/13	800000	VISITING NURSE SERVICE	CHINGA, CELESTE	30.00		481.80	Ī.
				CATEGORY	30.00	0.00	481.80	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	45
DALLO OIGV	ш т 0550	100 001		ALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238618	4/19/13	800000	VISITING NURSE SERVICE	CHOPRA, DARSHAN	34.75		558.09	I
				CATEGORY	34.75	0.00	558.09	

RUN DATE 04	4/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRNL	# 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	!SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238619	4/19/13	000008	VISITING NURSE SERVICE	CHUCK, ENA	35.25		566.12	I
238620 4	4/19/13	800000	VISITING NURSE SERVICE	CIMI, SAVA	30.00		481.80	I
				CUSTOMER	65.25	0.00	1,047.92	
				CATEGORY	65.25	0.00	1,047.92	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238621	4/19/13	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		96.36 I	
				CATEGORY	6.00	0.00	96.36	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 4	18
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW,	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238622	4/19/13	800000	VISITING NURSE SERVICE	COLLER, FELISA	20.00		321.20	I	
238623	4/19/13	800000	VISITING NURSE SERVICE	COLLER, JOSE	20.00		321.20	I	
238624	4/19/13	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		674.52	I	
				CUSTOMER	82.00	0.00	1,316.92		
				CATEGORY	82.00	0.00	1,316.92		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 49	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 4	1/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
238625	4/19/13	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,698.08 I	
				CATEGORY	168.00	0.00	2,698.08	

			YSIDE CITYWIDE				PAGE 1 -	50
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			i	SALES REGISTER			BILL WEEK ENDING	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238626	4/19/13	000008	VISITING NURSE SERVICE	CORREA, MARGARI	24.25		389.46 I	
238627	4/19/13	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		321.20 I	
				CUSTOMER	44.25	0.00	710.66	
				CATEGODY	44 25	0.00	710.66	
				CATEGORY	44.25	0.00	710.66	

			YSIDE CITYWIDE					51
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING HOMEV	
			•	SALES REGISIER			BILL MEEK ENDING	4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238628	4/19/13	000008	VISITING NURSE SERVICE	COSTA, ARSENE	44.75		718.69 I	
				CATEGORY	44.75	0.00	718.69	

			YSIDE CITYWIDE				PAGE 1 -	52
SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	4/26/12
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238629	4/19/13	000008	VISITING NURSE SERVICE	COVALIU, SIMION	20.00		321.20 I	
230029	4/19/13	000008	VISITING NORSE SERVICE	COVALIO, SIMION	20.00		321.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 5 HOA HOSPICE ADULT	53
			Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238630	4/19/13	800000	VISITING NURSE SERVICE	COX, PETRA	20.00		321.20 I	
1				CATEGORY	20.00	0.00	321.20	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	L
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238631	4/19/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	69.75		1,120.19 I	
				CATEGORY	69.75	0.00	1,120.19	

ı	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	55
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı					SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238632	4/19/13	000008	VISITING NURSE SERVICE	CRUZ, HECTOR	38.50		618.31 I	
ı									
ı									
ı					CATEGORY	38.50	0.00	618.31	

RUN DATE 04/24/13 SALES JRNL # 0330			REG NY	NY			PAGE 1 VCP CHOICE L		56
BINDED GIAVE II 0330	100 001		-	EGISTE	R		BILL WEEK EN		4/26/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238633 4/19/13 238634 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		JUANA LIDIA	19.50 35.00		313.17 562.10	I I	
				CUSTOMER	54.50	0.00	875.27		
				- CATEGORY	54.50	0.00	875.27		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	57
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
000605	4 / 1 0 / 1 0				1 00		1.5 0.5 -	
238635	4/19/13	000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	1.00		16.06 I	
				CATEGORY	1.00	0.00	16.06	
				CAILGORI	1.00	0.00	10.00	

RUN DATE SALES JRN		LOC 001		REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238636	4/19/13	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	42.00		674.52 I	
				CATEGORY	42.00	0.00	674.52	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	1L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			9	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238637	4/19/13	800000	VISITING NURSE SERVICE	DE LA HOZ, RUTH	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

			YSIDE CITYWIDE				PAGE 1 -	60
SALES JRN	L # 0330	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238638	4/19/13	800000	VISITING NURSE SERVICE	DEALFONSO, MARI	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		61
			S	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238639	4/19/13	000008	VISITING NURSE SERVICE	DEBARRENECHE, E	35.00		562.10	I	
238640	4/19/13	800000	VISITING NURSE SERVICE	DEBAZALAR, ANTO	18.00		289.08	I	
238641	4/19/13	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	38.00		610.28	I	
				CUSTOMER	91.00	0.00	1,461.46		
				CATEGORY	91.00	0.00	1,461.46		

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	238642	4/19/13	800000	VISITING NURSE SERVICE	DELOSSANTOS, MA	36.00		578.16 I		
					CATEGORY	36.00	0.00			
- 1					CATEGORI	30.00	0.00	370.10		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	63
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238643	4/19/13	000008	VISITING NURSE SERVICE	DELPOZO, MIGUEL	28.00		449.68 I	
238644	4/19/13	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	28.00		449.68 I	
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 -	64
SALES JRN	ш # U33U	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238645	4/19/13	800000	VISITING NURSE SERVICE	DERAMIREZ, MERC	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CIT	YWIDE REG NY	NY			PAGE 1 VCP CHOICE LE		
"		SALES	REGISTER			BILL WEEK ENI	OING 4/26/13	
INVOICE# DATE C	CUST NO CUSTOMER NAME	REF	FERENCE	HOURS I	'AX AMT	AMOUNT	TYP SURPLUS	
, , ,	000008 VISITING NURSE		KRISHNA KRISHNA	3.00 9.00		48.18 144.54	I T	
	000008 VISITING NURSE		JMARAN, REBE	55.50		891.34	I	
			CUSTOMER	67.50	0.00	1,084.06		
			CATEGORY	67.50	0.00	1,084.06		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 6 ADU ADULT	66
BILLED GIAV	L 0330	100 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238649	4/05/13	000008	VISITING NURSE SERVICE	DIAZ, ELEODORA	15.00		240.90 I	
238650 238651	4/12/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	DIAZ, ELEODORA DIAZ, ELEODORA	18.00 29.75		289.08 I 477.79 I	
230031	4/19/13	000000	VISITING NORSE SERVICE	DIAZ, ELEODORA				
				CUSTOMER	62.75	0.00	1,007.77	
				CATEGORY	62.75	0.00	1,007.77	

ı	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	67
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238652	4/19/13	000008	VISITING NURSE SERVICE	DIAZ, HILDA	45.00		722.70 I	
ı									
ı					CA EECODY	45 00	0.00	722 70	
ı					CATEGORY	45.00	0.00	722.70	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	68
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA	
				S A L E S R	EGIST	E R		BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238653	4/19/13	000008	VISITING NURSE SERVIC	E DIAZ,	OLGA	44.00		706.64	I	
238654	4/19/13	800000	VISITING NURSE SERVIC	E DIAZ,	ROSA	42.00		674.52	I	
238655	4/19/13	800000	VISITING NURSE SERVIC	E DIAZ,	WILLIAM	48.50		778.91	I	
					CUSTOMER	134.50	0.00	2,160.07		
					CATEGORY	134.50	0.00	2,160.07		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	69
Brilles orde	1 0330	100 001		SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
238656 238657	3/29/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	DIBENEDETTO, IL DILLUVIO, MATTI	9.00 74.00		144.54 1,188.44	I I
				CUSTOMER	83.00	0.00	1,332.98	
				CATEGORY	83.00	0.00	1,332.98	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	70
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			\$	SALES REGISTER			BILL WEEK END	ING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238658	4/05/13	000008	VISITING NURSE SERVICE	DOMINGUEZ, MARI	6.00		96.36	I	
238659	4/19/13	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	39.75		638.41	I	
238660	4/19/13	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		321.20	I	
				CUSTOMER	65.75	0.00	1,055.97		
				CATEGORY	65.75	0.00	1,055.97		

١	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - '	71
١	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW,	/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	4/26/13
١									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١									
ı	238661	4/19/13	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	33.00		529.98 I	
١									
ı									
ı					CATEGORY	33.00	0.00	529.98	

RUN DATE (SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 72 CCL CONGREGATE CARE	PROGRAM
				SALES REGISTER				4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
238662	4/19/13	000008	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB O	
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238663	4/19/13	800000	VISITING NURSE SERVICE	ECHAVARRIA, ANA	9.00		144.54 I	
				CATEGORY	9.00	0.00	 144.54	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	74
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238664	4/19/13	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	43.00		690.59 I	
				CATEGORY	43.00	0.00	690.59	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 75	j
ı	SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	238665	4/19/13	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		240.90 I	
					CATEGORY	15.00	0.00	240.90	

F	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76	
5	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	L	
				S	SALES REGISTER			BILL WEEK ENDING	4/26/13	
١.	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
-	INVOICE#	DAIE	COSI NO	COSTOMER NAME	REFERENCE	CAUUN	IAA AMI	AMOONI III	SURPLUS	
2	238666	4/19/13	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		64.24 I		
					CATEGORY	4.00	0.00	64.24		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 77	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING 4	/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
238667	4/19/13	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 78 ADU ADULT	
SALES OIL	ш # 0550	HOC 001		SALES REGISTER				/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
238668 238669	4/12/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	4.00 12.00		64.24 I 192.72 I	
				CUSTOMER	16.00	0.00	256.96	
				CATEGORY	16.00	0.00	256.96	

RUN I	DATE 04/24/	13 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	79
SALE	S JRNL # 03:	30 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			:	SALES REGISTER			BILL WEEK ENDING	G 4/26/13
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
2386	70 4/19/2	13 000008	VISITING NURSE SERVICE	ESPEJO, FLORENC	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE 0		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	-	80
				ALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	4/19/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	55.75		895.35	I	
	4/19/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	24.75		397.49	I	
238673	4/19/13	800000	VISITING NURSE SERVICE	ESTADES, MARIA	42.00		674.52	I	
				CUSTOMER	122.50	0.00	1,967.36		
				CATEGORY	122.50	0.00	1,967.36		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	81	
SALES JRN	L # 0330	LOC 001		REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
238674	4/19/13	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	21.00		337.26 I		
				CATEGORY	21.00	0.00	337.26		

			YSIDE CITYWIDE					- 8	82
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TNG	4/06/12
			S	ALES REGISTER	_		BILL WEEK ENI	JING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238675	4/19/13	000008	VISITING NURSE SERVICE	FADEN, ROBIN	57.00		915.42	I	
238676	4/12/13	800000	VISITING NURSE SERVICE	FALCO, MARGARET	7.00		112.42	I	
238677	4/19/13	800000	VISITING NURSE SERVICE	FALCO, MARGARET	28.00		449.68	I	
238678	4/19/13	800000	VISITING NURSE SERVICE	FAROUGIAS, ANGE	9.00		144.54	I	
238679	4/19/13	800000	VISITING NURSE SERVICE	FAY, JULIA	30.00		481.80	I	
				CUSTOMER	131.00	0.00	2,103.86		
				CATEGORY	131.00	0.00	2,103.86		

ı	RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	83	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
ı				5	SALES REGISTER			BILL WEEK ENDING	4/26/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	238680	4/19/13	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	55.50		891.33 I		
					CAMEGODY			891.33		
1					CATEGORY	55.50	0.00	091.33		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	84
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238681	4/19/13	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	19.75		317.19 I	
				CATEGORY	19.75	0.00	317.19	

			YSIDE CITYWIDE	DEC MY MY			11101		85
SALES JRN	ш # 0330	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			VCP CHOICE LHO		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	ΓΥΡ	SURPLUS
238682	4/19/13	800000	VISITING NURSE SERVICE	FERNANDEZ, ROSA	9.00		144.54	I	
238683	4/19/13	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	27.00		433.62		
				CUSTOMER	36.00	0.00	578.16		
				CATEGORY	36.00	0.00	578.16		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 86	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING 4	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
238684	4/19/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

			YSIDE CITYWIDE					87
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
				SALES KEGISIEK			BILL WEEK ENDING	4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238685	4/19/13	800000	VISITING NURSE SERVICE	FERRERAS, SIMON	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	88
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	ALES REGISTER			BILL WEEK ENDING	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238686	4/19/13	800000	VISITING NURSE SERVICE	FIGUEROA, EDNA	24.00		385.44 I	
				CATEGORY	24.00	0.00	385.44	

			YSIDE CITYWIDE					89	
SALES JRN	L # 0330	LOC 001		REG NY NY			LTC NURSING HOMEW		
			•	SALES REGISTER			BILL WEEK ENDING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
238687	4/19/13	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	55.00		883.30 I		
				CATEGORY	55.00	0.00	883.30		

١	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	90
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	238688	4/19/13	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	12.00		192.72 I	
					CATEGORY	12.00	0.00	192.72	

			YSIDE CITYWIDE				PAGE 1 -	91
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238689	4/19/13	000008	VISITING NURSE SERVICE	FONG, ALEFINA	10.00		160.60 I	
238690	4/19/13	000008	VISITING NURSE SERVICE	FONTEBOA, GUILL	36.00		578.16 I	
				CUSTOMER	46.00	0.00	738.76	
				CATEGORY	46.00	0.00	738.76	

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RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	93	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A	
			5	SALES REGISTER			BILL WEEK ENDIN	G 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
238693	4/19/13	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		144.54 I		
				CATEGORY	9.00	0.00	144.54		

RUN DATE 04/24 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING	– 9	
SALES URNL # C	330 LOC 001		SALES REGISTER	2		BILL WEEK EN		4/26/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238694 3/15 238695 4/19		VISITING NURSE SERVICE VISITING NURSE SERVICE	·	4.00 17.00		64.24 273.02	I	
230095 4/19	/13 000006	VISITING NURSE SERVICE	GARAY, ANGELES	17.00		2/3.02		
			CUSTOMER	21.00	0.00	337.26		
			CATEGORY	21.00	0.00	337.26		

				YSIDE CITYWIDE				PAGE 1 -	95
Si	ALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
II	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
2:	38696	4/19/13	800000	VISITING NURSE SERVICE	GARCIA, CARMEN	7.00		112.42 I	
					CATEGORY	7.00	0.00	112.42	

RUN DATE	04/24/13 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238697	4/19/13	800000	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

			YSIDE CITYWIDE				PAGE 1 - 97	7
SALES JRN	L # 0330	TOG 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238698	4/19/13	800000	VISITING NURSE SERVICE	GAROFALO, ANGEL	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

DDG 1991				98
				4/26/13
			DIED WEEK ENDING	1/20/15
REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
TE GEBHARDT, DOROT	37.00		594.22 I	
• • • • • • • • • • • • • • • • • • • •	42.00		674.52 I	
CUSTOMER	79.00	0.00	1.268.74	
CODIONER	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00	1,200.71	
CATEGORY	 79 NN	0.00	1 268 74	
	CE GEBHARDT, DOROT	REFERENCE HOURS CE GEBHARDT, DOROT 37.00 CE GEORGE, MERCEDE 42.00 CUSTOMER 79.00	REFERENCE HOURS TAX AMT CE GEBHARDT, DOROT 37.00 CE GEORGE, MERCEDE 42.00 CUSTOMER 79.00 0.00	REG NY NY SALES REGISTER VCP CHOICE LHCSA BILL WEEK ENDING REFERENCE HOURS TAX AMT AMOUNT TYP CE GEBHARDT, DOROT 37.00 594.22 I CE GEORGE, MERCEDE 42.00 674.52 I CUSTOMER 79.00 0.00 1,268.74

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	99
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238701	4/19/13	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	56.00		899.37 I	
				CATEGORY	56.00	0.00	899.37	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 10 VCP CHOICE LHCSA	0
SALES UKN	ц # 0330	LOC 001		SALES REGISTER				4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238702	4/19/13	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		401.50 I	
				GAMPIGODY.			401 50	
1				CATEGORY	25.00	0.00	401.50	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10)1
SALES JRN	L # 0330	LOC 001		REG NY NY			LTC NURSING		,
			\$	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238703	4/19/13	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		562.10	I	
238704	4/19/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	29.00		465.74	I	
				CUSTOMER	64.00	0.00	1,027.84		
				CODICIENT	01.00	0.00	2,027.01		
				CATEGORY	64.00	0.00	1,027.84		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	102
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238705	4/19/13	800000	VISITING NURSE SERVICE	GONZALEZ, ADELI	8.00		128.48	I
				GAMEGODY.			120.40	
				CATEGORY	8.00	0.00	128.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO		3
	_			SALES REGISTER			BILL WEEK END		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP	SURPLUS
238706 238707	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		25.25 35.00		405.52 562.10	I	
230707	4/15/15	000000	VISITING NORSE SERVICE	,					
				CUSTOMER	60.25	0.00	967.62		
				CATEGORY	60.25	0.00	967.62		

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	04
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238708	4/19/13	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	14.25		228.86 I	
ı									
ı									
ı					CATEGORY	14.25	0.00	228.86	

			TYSIDE CITYWIDE				-	05
SALES	S JRNL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
23870	09 4/19/13	800000	VISITING NURSE SERVICE	GONZALEZ, JOSEF	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 106 VCP CHOICE LHCSA BILL WEEK ENDING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
238710	4/19/13	800000	VISITING NURSE SERVICE	GORRA, ELISA	24.00		385.44 I
				CATEGORY	24.00	0.00	385.44

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - : LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238711	4/19/13	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	8
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			2	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238712	4/19/13	000008	VISITING NURSE SERVICE	GOYES, ELBA	27.00		433.62	I	
238713	4/19/13	800000	VISITING NURSE SERVICE	GRAVER, EDNA	40.00		642.40	I	
				CUSTOMER	67.00	0.00	1,076.02		
				CATEGORY	67.00	0.00	1,076.02		

RUN DATE (04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	09
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238714	4/12/13	800000	VISITING NURSE SERVICE	GRECO, ANN	6.00		96.36 I	
				CATEGORY	6.00	0.00	 96.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			S	ALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238715 238716	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GRESSINE, ARNOL GUEVARA, ELENA	48.75 69.75		782.93 1,120.19	I I	
				CUSTOMER	118.50	0.00	1,903.12		
				CATEGORY	118.50	0.00	1,903.12		

			YSIDE CITYWIDE				PAGE 1 - 1:	11
SALES	JRNL # 0330	LOC 001		REG NY NY			ADU ADULT	4.06.410
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238717	7 4/19/13	800000	VISITING NURSE SERVICE	GUILLEN, SALVAD	27.00		433.62 I	
				CATEGORY	27.00	0.00	433.62	

RUN DATE	04/24/13 -	- SUP SUNN	IYSIDE CITYWIDE				PAGE 1 -	112
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	L
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238718	4/19/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	84.00		1,349.04 I	
				CATEGORY	84.00	0.00	1,349.04	

			YSIDE CITYWIDE				PAGE 1 - 113	
SALES JRN	L # 0330	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
TMTOTORI	DAME	CIICE NO	OLIGHOMED NAME	DEFEDENCE	HOHDG	may amm	AMOTINE END	GIIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238719	4/19/13	800000	VISITING NURSE SERVICE	HADJIARGYROU, G	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI	- 11 HCSA	L 4
			S	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238720	4/12/13	000008	VISITING NURSE SERVICE	HARRISON, GLORI	8.00		128.48	I	
238721	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HARRISON, GLORI HENAO, VICTORIA	56.00 23.50		899.36 377.41	I	
230722	4/19/13	000008	VISITING NORSE SERVICE	HENAO, VICTORIA			377.41		
				CUSTOMER	87.50	0.00	1,405.25		
				CATEGORY	87.50	0.00	1,405.25		

				REG NY NY			PAGE 1 - 115	
011111	2 11 0000	200 001						/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
238723	4/19/13	800000	VISITING NURSE SERVICE	HENDERSON, FAYE	9.75		156.59 I	
				CATEGORY	 9 75	0.00	 156 50	
	SALES JRN:	SALES JRNL # 0330 INVOICE# DATE	SALES JRNL # 0330 LOC 001 INVOICE# DATE CUST NO	INVOICE# DATE CUST NO CUSTOMER NAME	SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE	SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS 238723 4/19/13 000008 VISITING NURSE SERVICE HENDERSON, FAYE 9.75	SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT 238723 4/19/13 000008 VISITING NURSE SERVICE HENDERSON, FAYE 9.75	SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY ADU ADULT S A L E S R E G I S T E R BILL WEEK ENDING 4 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP S 238723 4/19/13 000008 VISITING NURSE SERVICE HENDERSON, FAYE 9.75 156.59 I

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 116	
SALES JRNI	<u> </u>	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238724	4/19/13	800000	VISITING NURSE SERVICE	HENDY, BERNICE	29.00		465.74 I	
				CATEGORY	29.00	0.00	465.74	

RUN DATE 04 SALES JRNL	1/24/13 - SUP SUNN # 0330 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	17 4/26/13
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238726 4	4/19/13 000008 4/19/13 000008 4/19/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HENRICKS, ALICE HENRIQUEZ, MARI HERNANDEZ, AUSE	1.00 55.50 16.00		16.06 I 891.33 I 256.96 I	
			CUSTOMER	72.50	0.00	1,164.35	
			CATEGORY	72.50	0.00	1,164.35	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 118	
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	;
238728	4/12/13	000008	VISITING NURSE SERVICE	HERNANDEZ, JUAN	6.00		96.36 I	
238729	4/19/13	800000	VISITING NURSE SERVICE	HERNANDEZ, JUAN	35.25		566.12 I	
				CUSTOMER	41.25	0.00	662.48	
				CATEGORY	41.25	0.00	662.48	

RUN DAT	E 04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 119	
SALES J	RNL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE	:# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
220720	4/19/13	00000	VICITATING NUIDGE GEDVICE	HEDDED'S ANGEL'S	27 50		441 65 3	
238730	4/19/13	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	27.50		441.65 I	
				CATEGORY	27.50	0.00	441.65	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	0
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W	/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238731	4/19/13	000008	VISITING NURSE SERVICE	HERRERA, CLARA	20.00		321.20 I	
ı									
ı									
ı					CATEGORY	20.00	0.00	321.20	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	121
			S	SALES REGISTER			BILL WEEK ENDIN	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238732	4/19/13	800000	VISITING NURSE SERVICE	HUGHES, PATRICI	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDING	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238733	4/19/13	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		642.40 I	
				GA EEDGODY				
				CATEGORY	40.00	0.00	642.40	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 123	
SALES JRI	NL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS ADULT POPUL	
			S	SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238734	4/19/13	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		722.70 I	
				CATEGORY	45.00	0.00	722.70	

			YSIDE CITYWIDE	DEC NV NV				- 124
SALES JRNI	ь # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGATE BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
238735	4/19/13	800000	VISITING NURSE SERVICE	JACKSON, REGINA	16.00		256.96	I
1				CATEGORY	16.00	0.00	256.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238736 238737	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	JAKLITSCH, ELIZ JAMES, DAVINA	38.50 35.25		618.31 I 566.12 I	
				CUSTOMER	73.75	0.00	1,184.43	
				CATEGORY	73.75	0.00	1,184.43	

RUN DATE (04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	126
SALES JRNI	L # 0330	LOC 001		REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238738	4/19/13	800000	VISITING NURSE SERVICE	JAMISON, BESSIE	8.00		128.48 I	
				CATEGORY	 8.00		128.48	
				CALEGORY	0.00	0.00	128.48	

RUN DATE 04 SALES JRNL	# 0330 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	A
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238740 4	1/19/13 000008 1/19/13 000008 1/19/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JARA DEURUCHIM, JEWAT, LUCILLE JHAVERI, RAMESH	2.75 73.50 12.00		44.17 I 1,180.42 I 192.72 I	
			CUSTOMER	88.25	0.00	1,417.31	
			CATEGORY	88.25	0.00	1,417.31	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238742	4/19/13	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,124.20 I	
				CATEGORY	70.00	0.00	1,124.20	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	129
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238743	4/19/13	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 130 ADU ADULT BILL WEEK ENDING 4	/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
238744 238745 238746	3/15/13 4/12/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JIMENEZ, LUIS	5.00 36.00 2.00		80.30 I 578.16 I 32.12 I	
				CUSTOMER	43.00	0.00	690.58	
				CATEGORY	43.00	0.00	690.58	

			YSIDE CITYWIDE				PAGE 1 - 1:	31
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	4 (06 (12
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238747	4/19/13	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	35.75		574.15 I	
				CATEGORY	35.75	0.00	574.15	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	132
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238748	4/19/13	800000	VISITING NURSE SERVICE	KAZOS, KAHTY	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238749	4/19/13	800000	VISITING NURSE SERVICE	KHAN, MARGARET	19.00		305.14 I	
				CATEGORY	19.00	0.00	305.14	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	134
			S	SALES REGISTER			BILL WEEK ENDIN	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238750	4/19/13	800000	VISITING NURSE SERVICE	KNOWLES, ANAMAR	81.75		1,312.92	[
238751 238752	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	KOESTNER, MARIE KOESTNER, MARIE	3.00 6.00		48.18 1 96.36 1	[r
230732	1/15/15	000000	VIBITING NORSE BERVICE	ROBDINDR, PARTE				
				CUSTOMER	90.75	0.00	1,457.46	
				CATEGORY	90.75	0.00	1,457.46	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 135	;
Bridde Grav	I 0550	100 001		SALES REGISTER			BILL WEEK END		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
238753	4/19/13	000008	VISITING NURSE SERVICE	,	25.00		401.50	I	
238754 238755	4/19/13 4/19/13	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		32.00 56.00		513.92 899.36	I I	
				CUSTOMER	113.00	0.00	1,814.78		
				CATEGORY	113.00	0.00	1,814.78		

			YSIDE CITYWIDE				-	36
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	4/06/12
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238756	4/19/13	000008	VISITING NURSE SERVICE	LASAK, MICHAEL	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

ı	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	37
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238757	4/19/13	800000	VISITING NURSE SERVICE	LEE, KATHLEEN	20.00		321.20 I	
ı									
ı									
ı					CATEGORY	20.00	0.00	321.20	

			YSIDE CITYWIDE				-	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TY TRUOMA	YP SURPLUS
238758	4/05/13	000008	VISITING NURSE SERVICE	LEGASPI, CECILI	8.00		128.48	I
238759	4/19/13	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	12.50		200.75	Ι
				CUSTOMER	20.50	0.00	329.23	
				CATEGORY	20 50	0.00	329 23	
	, , -			LEGASPI, CECILI	12.50	0.00	200.75	[[

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 139 ADU ADULT BILL WEEK ENDING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
238760	4/19/13	000008	VISITING NURSE SERVICE	LENDOIRO, JUAN	15.50		248.94 I
				CATEGORY	15.50	0.00	 248.94

RUN DATE 04/24 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK END		0 4/26/13
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	9/13 000008 9/13 000008 9/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LINARES, ELSA LITSAS, MARTHA	56.00 8.00 30.00		899.36 128.48 481.80	I I I	
			CUSTOMER	94.00	0.00	1,509.64		
			CATEGORY	94.00	0.00	1,509.64		

RUN DATE 04/24/13 SALES JRNL # 0330		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING H BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
238764 4/19/13 238765 4/19/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	69.00 42.00		1,108.14 674.52	I I
			CUSTOMER	111.00	0.00	1,782.66	
			 CATEGORY	111.00	0.00	1,782.66	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	142
Brilling Grav	1 0550	100 001		ALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238766 238767	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	LONDONO, AMIRA LONDONO, JOSE	69.50 5.00		1,116.17	I I
				CUSTOMER	74.50	0.00	1,196.47	
				CATEGORY	74.50	0.00	1,196.47	

RUN DATE SALES JRN				REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	CW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
238768	4/19/13	800000	VISITING NURSE SERVICE	LONDONO, MARIA	42.00		674.52 I	
				CATEGORY	42.00	0.00	674.52	

RUN DATE			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	.44
SALES UKN.	ц # 0330	TOC 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238769	4/19/13	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	36.75		590.21 I	
				CATEGORY	36.75	0.00	590.21	

RUN DATE (SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 145 ADU ADULT BILL WEEK ENDING 4/26	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
238770	4/19/13	000008	VISITING NURSE SERVICE	LOPEZ, MARIA	25.50		409.53 I	
				CATEGORY	25.50	0.00	409.53	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	16
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	E CAR	RE PROGRAM
			:	SALES REGISTER			BILL WEEK ENI	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238771	4/19/13	000008	VISITING NURSE SERVICE	LUCES, LETICIA	19.75		317.19	I	
238772	4/19/13	000008	VISITING NURSE SERVICE	LYMN, ANGIE	35.00		562.10	I	
				CUSTOMER	54.75	0.00	879.29		
				CATEGORY	54.75	0.00	879.29		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	147
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
238773	4/12/13	000008	VISITING NURSE SERVICE	LYNCH, JAMES	3.00		48.18 I	
238774 238775	4/19/13	000008	VISITING NURSE SERVICE	LYNCH, JAMES	12.00		192.72 I	
238775	4/19/13	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		658.46 I	
				CUSTOMER	56.00	0.00	899.36	
				CATEGORY	56.00	0.00	899.36	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TY	, ,, -
238776	4/19/13	800000	VISITING NURSE SERVICE	MADRID, ANA	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	149
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE (CARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
238777	4/19/13	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	36.00		578.16 I	
				CATEGORY	36.00	0.00		
				CALEGORI	30.00	0.00	5/0.10	

			YSIDE CITYWIDE				-	- 15	50
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LF		
				SALES REGISTER			BILL WEEK ENI	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238778	4/19/13	000008	VISITING NURSE SERVIO	E MAIO, CHINGTSAI	8.00		128.48	I	
238779	3/22/13	800000	VISITING NURSE SERVICE	E MALDONADO, DOMI	6.00		96.36	I	
238780	3/29/13	800000	VISITING NURSE SERVICE	E MALDONADO, DOMI	3.00		48.18	I	
238781	4/19/13	800000	VISITING NURSE SERVICE	E MALDONADO, MARI	25.00		401.50	I	
238782	4/19/13	800000	VISITING NURSE SERVICE	E MANGAN, JOHN	16.00		256.96	I	
				CUSTOMER	58.00	0.00	931.48		
				CATEGORY	58.00	0.00	931.48		

RUN	DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	51
SAL	ES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238	783	4/19/13	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	38.00		610.28 I	
					CATEGORY	38.00	0.00	610.28	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			\$	SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238784	4/19/13	000008	VISITING NURSE SERVICE	MARAVELAKIS, JO	56.00		899.36	I
238785	4/19/13	000008	VISITING NURSE SERVICE	MARINO, ANN	30.00		481.80	I
238786	4/19/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		401.50	I
				 CUSTOMER	111.00	0.00	1,782.66	
				CODIONEIC	111.00	0.00	1,702.00	
				CATEGORY	111.00	0.00	1,782.66	

		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - 153 LTC NURSING HOMEW/O WALLS (I BILL WEEK ENDING 4/26/13	ıΤ
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238787	4/19/13	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		690.58 I	
				CATEGORY	43.00	0.00	690.58	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 15	54	
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE		1X			VCP CHOICE LH			
			2	SALES RI	EGISTE	R		BILL WEEK END	ING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEI	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
238788	4/19/13	800000	VISITING NURSE SERVICE	MARTE	, JOSE	7.50		120.45	I		
					 CATEGORY	 7.50	0.00	120.45			

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 155	
١	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING 4	/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
	238789	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,124.20 I	
					CATEGORY	70.00	0.00	1,124.20	

			YSIDE CITYWIDE					156
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
238790	4/19/13	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	30.00		481.80 I	
238791	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		192.72 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

			YSIDE CITYWIDE				PAGE 1 - 15	57
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	4.06.410
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238792	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, RAMON	29.00		465.74 I	
				CATEGORY	29.00	0.00	465.74	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	158
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238793	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	40.00		1,349.04 I	
				CATEGORY	40.00	0.00	1,349.04	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 159	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
ı					SALES REGISTER			BILL WEEK ENDING 4/26/13	
ı	INVOICE#	DAME	CITCH NO	GIGHOMED NAME	REFERENCE	HOHDO	max amm	AMOINE EVE CIEDLIIC	
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	238794	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	35.25		566.13 I	
					CATEGORY	35.25	0.00	566.13	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238795	4/19/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	12.00		192.72 I	
				CATEGORY	12.00	0.00	 192.72	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 161	
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238796	4/19/13	800000	VISITING NURSE SERVICE	MATOS, ROSA	42.50		682.55 I	
1				CATEGORY	42.50	0.00	682.55	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 16	52
			S	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238797 238798	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MAZZONE, FRANCE	54.00		867.24	I	
238/98	4/19/13	000008	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,698.08		
				CUSTOMER	222.00	0.00	3,565.32		
				CATEGORY	222.00	0.00	3,565.32		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	53
SALES JRN	rL # 0330	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238799	4/19/13	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	84.00		1,349.04 I	
				CATEGORY	84.00	0.00	1,349.04	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 16 ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238800	4/19/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	16.00		256.96 I	
				CATEGORY	16.00	0.00	 256.96	

			YSIDE CITYWIDE					- 16	55
SALES JRN	T # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LI		4/26/12
			'	SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238801	4/19/13	000008	VISITING NURSE SERVICE	,	42.00		674.52	I	
238802	4/19/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	27.25		437.64	1	
				CUSTOMER	69.25	0.00	1,112.16		
				CODIONER	03.23	0.00	1,112.10		
				CATEGORY	69.25	0.00	1,112.16		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 166 ADU ADULT BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238803	4/19/13	000008	VISITING NURSE SERVICE	MEJIA, CLAUDIO	21.00		337.26 I	
				CATEGORY	21.00	0.00	337.26	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	67	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
ı				5	SALES REGISTER			BILL WEEK ENDING	4/26/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	238804	4/19/13	800000	VISITING NURSE SERVICE	MEJIA, DINORAH	35.00		562.10 I		
					CATEGORY	35.00	0.00	 562.10		

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 168	3
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238805	4/19/13	800000	VISITING NURSE SERVICE	MEJIA, ROSA	39.75		638.39 I	
ı									
ı									
ı					CATEGORY	39.75	0.00	638.39	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 169	
SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 4/26/	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	LUS
238806	4/19/13	000008	VISITING NURSE SERVICE	MENDEZ, ADA	14.00		224.84 I	
230000	1, 15, 15		VIBITING NONDE BENVIOL	112112227 11211			221.01	
				CATEGORY	14.00	0.00	224.84	

RUN DATE	N DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 170									
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING	HOME	W/O WALLS LT	
			S	SALES REGISTER			BILL WEEK EN	DING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
238807	2/01/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		72.90	I		
238808	2/08/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		72.90	I		
238809	2/15/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		72.90	I		
238810	3/01/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		80.30	I		
238811	3/08/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	10.00		160.60	I		
238812	3/22/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		80.30	I		
238813	3/29/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	10.00		160.60	I		
238814	4/12/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		80.30	Ī		
238815	4/19/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	15.00		240.90	Ī		
250015	1, 10, 10	00000	VIDITING NONDI DINVIGE							
				CUSTOMER	65.00	0.00	1,021.70			
				CODICIEN	03.00	0.00	1,021.70			
				CATEGORY	65.00	0.00	1,021.70			
1				CITTOOICI	00.00	0.00	-,021.70			

RUN DATE	04/24/13 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	71
SALES JR	NL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238816	4/19/13	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		626.34 I	
				CATEGORY	39.00	0.00	626.34	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	172
DALLS UKN	ш # 0330	10C 001		SALES REGISTER			BILL WEEK ENDIN	IG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238817	4/19/13	800000	VISITING NURSE SERVICE	MILLER, PETER J	4.00		64.24 I	
1				CATEGORY	4.00	0.00	64.24	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 17	3
SALES URN	ш # 0330	TOC 001		SALES REGISTER			BILL WEEK ENI		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238818	4/19/13	000008	VISITING NURSE SERVICE	MIRANDA, LUIS	30.00		481.80	I	
238819	4/19/13	800000	VISITING NURSE SERVICE	MONTOYA, ROSALB	20.00		321.20	I	
238820	4/19/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	30.00		481.80	I	
238821	4/19/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	30.00		481.80	I	
238822	4/19/13	800000	VISITING NURSE SERVICE	MORALES, CARMEN	25.00		401.50	I	
238823	4/19/13	800000	VISITING NURSE SERVICE	MOREL, NOHEMY P	12.25		196.74	I	
238824	4/19/13	800000	VISITING NURSE SERVICE	MORILLO, MARICE	25.00		401.50	I	
				CUSTOMER	172.25	0.00	2,766.34		
				CATEGORY	172.25	0.00	2,766.34		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 17 ADU ADULT	4
DALLO OIUVI	⊔ π 0330	HOC 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238825	4/19/13	000008	VISITING NURSE SERVICE	MUGNO, BLANCHE	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 17	75
511225 0141	.2 ,, 0550	200 001		SALES REGISTER			BILL WEEK ENI		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238826 238827	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, .	24.00 49.00		385.44 786.94	I	
230027	4/19/13	000008	VISITING NURSE SERVICE	NAGY, GEORGE	49.00		700.94		
				CUSTOMER	73.00	0.00	1,172.38		
				CATEGORY	73.00	0.00	1,172.38		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUI	
	_			SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
238828 238829	4/12/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 12.00		321.20 I 192.72 I	
230023	1/1/15	000000	VIBITING NORDE BERVICE					
				CUSTOMER	32.00	0.00	513.92	
				CATEGORY	32.00	0.00	513.92	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 177	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING 4	1/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
	238830	4/19/13	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		321.20 I	
					CATEGORY	20.00	0.00	321.20	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	178
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238831	4/19/13	000008	VISITING NURSE SERVICE	NIDO, MICHAEL	49.00		786.94 I	
				CATEGORY	49.00	0.00	786.94	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 17	9	
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGAT	E CAR	E PROGRAM	
			S	SALES	REGISTER			BILL WEEK END	ING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RI	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
	4 / 1 0 / 1 0								_		
238832	4/19/13	800000	VISITING NURSE SERVICE	NTF	ETO RAMOS, JO	63.00		1,011.78	Τ		
							0.00	1 011 70			
1					CATEGORY	63.00	0.00	1,011.78			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 18	30
511225 0141	.2 0550	200 001		SALES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238833 238834	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	NIEVES, NANCY NINO, CARMEN	51.00 20.00		819.06 321.20	I	
230034	4/19/13	000008	VISITING NORSE SERVICE	NINO, CARMEN			321.20		
				CUSTOMER	71.00	0.00	1,140.26		
				CATEGORY	71.00	0.00	1,140.26		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 181	_
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238835	4/19/13	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	25.00		401.50 I	
238836	4/05/13	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	6.00		96.36 I	
238837	4/19/13	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	26.00		417.56 I	
				CUSTOMER	57.00	0.00	915.42	
				CATEGORY	57.00	0.00	915.42	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	182
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238838	4/19/13	800000	VISITING NURSE SERVICE	NOGUE, FIDELINA	20.00		321.20	I
238839	4/19/13	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	55.75		895.35	I
238840	4/19/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	39.00		626.34	I
				CUSTOMER	114.75	0.00	1,842.89	
							· 	
				CATEGORY	114.75	0.00	1,842.89	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.83
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238841	4/19/13	000008	VISITING NURSE SERVICE	OLVERA, ROSALIA	14.00		224.84 I	
				CATEGORY	14.00	0.00	224.84	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 18	84
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				5	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	238842	4/19/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	29.25		469.76 I	
					CATEGORY	29.25	0.00	469.76	

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 185	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
				S	SALES REGISTER			BILL WEEK ENDING 4/26/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	238843	4/19/13	800000	VISITING NURSE SERVICE	PANDYA, HANSABE	12.00		192.72 I	
ı					CATEGORY	12.00	0.00	192.72	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	
SALES URN	ь # 0330	LOC UUI		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238844	4/19/13	800000	VISITING NURSE SERVICE	PANTALEONDEREN,	21.00		337.26 I	
1				CATEGORY	21.00	0.00	337.26	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	187 NG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238845 238846	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PAOLONI, MARY PAPAS, CONSTANT	9.00 4.00		144.54 64.24	I 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			PAGE 1 VCP CHOICE L	- 18	18
SALES URN	ш # 0330	TOC 001		LES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238847	4/19/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	41.25		662.48	I	
238848	4/19/13	800000	VISITING NURSE SERVICE	PAPOUTSIS, MARY	9.00		144.54	I	
238849	4/19/13	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		48.18	I	
238850	4/19/13	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		899.36	I	
238851	4/12/13	800000	VISITING NURSE SERVICE	PARKER, ALLISON	20.00		321.20	I	
238852	4/19/13	800000	VISITING NURSE SERVICE	PENA, VICTORIA	36.00		578.16	I	
238853	4/19/13	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	25.00		401.50	I	
238854	4/19/13	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	42.00		674.52	I	
238855	4/19/13	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	26.00		417.56	I	
238856	4/19/13	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		481.80	I	
				CUSTOMER	288.25	0.00	4,629.30		
				CATEGORY	288.25	0.00	4,629.30		

			YSIDE CITYWIDE	DEG NW NW			-	189
SALES URI	IL # 0330	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238857	4/19/13	800000	VISITING NURSE SERVICE	PEZAR, PAUL	5.00		80.30 I	
				CATEGORY	5.00	0.00	80.30	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 190	
SALES JRI	NL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 4,	/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
238858	4/19/13	000008	VISITING NURSE SERVICE	PHILIPPS, MARY	56.00		899.36 I	
				 CATEGORY	56.00	0.00	899.36	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 191 ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238859	4/19/13	000008	VISITING NURSE SERVICE	PINEDA, EMILIA	31.00		497.86 I	
				CATEGORY	31.00	0.00	497.86	

RUN DATE 04/24 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	92 4/26/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238860 4/19 238861 4/19 238862 4/19	/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PIZARRO, BARBAR PLACIDO, GENARO PLACIDO, MERCED	33.25 35.00 36.00		534.01 I 562.10 I 578.16 I	
			CUSTOMER	104.25	0.00	1,674.27	
			CATEGORY	104.25	0.00	1,674.27	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	193
	- "			SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238863	4/19/13	800000	VISITING NURSE SERVICE	PLASENZOTTI, NE	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

]	RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	94
- 13	SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL	
				:	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	238864	4/19/13	800000	VISITING NURSE SERVICE	PLENCA, GORDANA	12.00		192.72 I	
					 CATEGORY	12.00	0.00	 192.72	

			YSIDE CITYWIDE				PAGE 1 -	195
SALES JRN	1L # 0330	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238865	4/19/13	000008	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

	04/24/13 - IL # 0330			REG NY NY A L E S R E G I S T E R			PAGE 1 - 19 ADU ADULT BILL WEEK ENDING	96 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238866	4/19/13	000008	VISITING NURSE SERVICE	POLANCO, JUAN	29.00		465.74 I	
				CATEGORY	29.00	0.00	465.74	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 197	7
SALES JRN	ъ # 0330	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238867	4/19/13	800000	VISITING NURSE SERVICE	POLITIS, HELEN	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE	04/24/13 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	198
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDI	ING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	4 / 1 0 / 1 0				40.00		640.40	_
238868	4/19/13	800000	VISITING NURSE SERVICE	E PONCE, ALICIA	40.00		642.40	I
					40.00			
				CATEGORY	40.00	0.00	642.40	

			YSIDE CITYWIDE				PAGE 1 - 1	99
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238869	4/19/13	000008	VISITING NURSE SERVICE	POTZMAN, ANTONI	24.75		397.49 I	
238870	4/19/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	39.25		630.37 I	
238871	4/19/13	800000	VISITING NURSE SERVICE	QUINONES, MARIA	8.50		136.51 I	
238872	4/19/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	35.00		562.10 I	
				CUSTOMER	107.50	0.00	1,726.47	
				CATEGORY	107.50	0.00	1,726.47	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	200
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238873	4/19/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	47.50		762.85 I	
				CATEGORY	47.50	0.00	762.85	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 20)1
	2 11 0000	200 001		ALES REGISTER			BILL WEEK END		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238874	4/19/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	24.00		385.44	I	
238875	4/19/13	800000	VISITING NURSE SERVICE	RAJA, HANIFA	12.00		192.72	т	
				CUSTOMER	36.00	0.00	578.16		
				CATEGORY	36.00	0.00	 578.16		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 202	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PED	IATRIC
			:	SALES REGISTER			BILL WEEK ENDING 4/2	6/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
238876	4/19/13	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	203
SALES JRI	NL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	·
			i	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238877	4/19/13	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	43.00		690.58 I	
				CATEGORY	43.00	0.00	690.58	

			YSIDE CITYWIDE				PAGE 1 - 204	
SALES JRNI	ь # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			2	SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238878	4/19/13	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 CCL CONGREGAT BILL WEEK END	E CARE	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238879 238880 238881	3/01/13 4/12/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMOS, ISMAEL	3.00 3.00 6.00		43.74 48.18 96.36	I I I	
				CUSTOMER	12.00	0.00	188.28		
				CATEGORY	12.00	0.00	188.28		

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	206	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
				S A L E S R E G I S T E R			BILL WEEK ENDI	NG 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
238882	4/19/13	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	20.00		321.20	I	
238883	4/19/13	800000	VISITING NURSE SERVICE	REINA, JOSE	17.25		277.04	I	
238884	4/19/13	800000	VISITING NURSE SERVICE	RENDON, EDUARDO	16.00		256.96	I	
238885	4/19/13	800000	VISITING NURSE SERVICE	RICCA, MARIE	15.75		252.95	I	
				CUSTOMER	69.00	0.00	1,108.15		
				CATEGORY	69.00	0.00	1,108.15		

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 20	17
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGA	TE CAR	E PROGRAM
			S	SALES	REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238886	4/19/13	800000	VISITING NURSE SERVICE	RI	SCO, GUILLERM	46.75		750.81	I	
					CATEGORY	46.75	0.00	750.81		

R	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20	8
S	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
I	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
2	238887	4/19/13	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		321.20 I	
					CATEGORY	20.00	0.00	321.20	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 209	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING 4	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
238888	4/19/13	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 210	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238889	4/19/13	800000	VISITING NURSE SERVICE	RIVERA, CARMEN	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

	04/24/13 NL # 0330		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 21 ADU ADULT BILL WEEK ENDING	11 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238890	1/25/13	000008	VISITING NURSE SERVICE	RIVERA, CAROL	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 0 SALES JRNI		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	12 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238892	4/19/13 4/19/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, CAROL RIVERA, ERNESTO RIVERA, GRACIEL	23.00 16.00 16.00		369.38 I 256.96 I 256.96 I	
				CUSTOMER	55.00	0.00	883.30	
				CATEGORY	55.00	0.00	883.30	

١	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 213	
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	238894	4/19/13	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	42.00		674.52 I	
					CATEGORY	42.00	0.00	674.52	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 21	14
511225 5141	_	200 001		A L E S R E G I S T E R			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238895	4/19/13	000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		770.88	I	
238896	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, ANA	30.00		481.80	I	
238897	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	42.75		686.58	I	
238898	4/19/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,349.04	I	
238899	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARI	24.25		389.46	I	
				CUSTOMER	229.00	0.00	3,677.76		
				CATEGORY	229.00	0.00	3,677.76		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	15
SALES JRN	L # 0330	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238900	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MERC	6.00		96.36 I	
				CATEGORY	6.00	0.00	96.36	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	16
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238901	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	20.00		321.20 I	
				CATEROODY.	20.00	0.00	321.20	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	217
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238902	4/19/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		786.94 I	
				CATEGORY	49.00	0.00	786.94	

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER				- 218 HOMEW/O WALLS (LT DING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
238903 238904	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	· ~	41.75 31.00		670.51 497.86	I
				CUSTOMER	72.75	0.00	1,168.37	
				CATEGORY	72.75	0.00	1,168.37	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 21	9
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
			S	BALES REC	SISTER		BILL WEEK ENI	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE HO	OURS TAX AM	T AMOUNT	TYP	SURPLUS
238905	4/19/13	800000	VISITING NURSE SERVICE	ROMERO,	SANTHY 55	5.00	883.30	I	
				CA	ATEGORY 55	5.00 0.0	 0 883.30		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 22	0
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW/	O WALLS (LT
				SALES R	EGISTE	R		BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238906	4/19/13	000008	VISITING NURSE SERVICE	ROMO,	FLOR	56.00		899.36	I	
238907	4/19/13	800000	VISITING NURSE SERVICE	ROSA,	ANA	40.00		642.40	I	
					CUSTOMER	96.00	0.00	1,541.76		
					CATEGORY	96.00	0.00	1,541.76		

			YSIDE CITYWIDE					- 22	21
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTI	r P		VCP CHOICE L BILL WEEK EN		4/26/13
					L 10		DILL WELK EN	DING	1/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
020000	4 /10 /12	000000			0.00		100 40	_	
238908	4/12/13	800000	VISITING NURSE SERVICE	E ROSA, LUZ E	8.00		128.48	Τ	
238909	4/19/13	800000	VISITING NURSE SERVICE	E ROSA, LUZ E	55.50		891.33	I	
238910	4/19/13	800000	VISITING NURSE SERVICE	E ROSA, MANOLO	29.50		473.77	I	
238911	4/19/13	000008	VISITING NURSE SERVICE	E ROSARIO, ELSA	35.00		562.10	I	
238912	4/19/13	800000	VISITING NURSE SERVICE	E ROSARIO, MARIA	14.75		236.89	I	
					1.40 55				
				CUSTOMER	142.75	0.00	2,292.57		
				CATEGORY	142.75	0.00	2,292.57		

RUN DATE		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	222
			Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238913	4/19/13	800000	VISITING NURSE SERVICE	ROSTKOWSKI, WIE	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2: VCM VNS	23
				SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238914	4/19/13	800000	VISITING NURSE SERVICE	RUEDA, INES	52.00		835.12 I	
				CATEGORY	52.00	0.00	835.12	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 22 VCP CHOICE LHCSA	4
Brilling Grav	11 11 0550	100 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238915 238916	4/12/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• •	6.00 24.00		96.36 I 385.44 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 ADU ADULT	- 22	25
BALLS OR	ш н 0550	100 001		SALES REGISTER			BILL WEEK END	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238917 238918	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RUIZ, TERESA RUSSO, MONICA	9.00 69.75		144.54 1,120.19	I I	
				CUSTOMER	78.75	0.00	1,264.73		
				CATEGORY	 78.75	0.00	1,264.73		

			YSIDE CITYWIDE					- 22	26
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		4/26/12
				SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238919	4/19/13	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	36.00		578.16	т	
238920	4/19/13	000008	VISITING NURSE SERVICE	,	66.00		1,059.96	Ī	
				 CUSTOMER	102.00	0.00	1,638.12		
				COSTOMER	102.00	0.00	1,030.12		
				CATEGORY	102.00	0.00	1,638.12		

ı	RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	27
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	238921	4/19/13	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		578.16 I	
ı									
ı									
ı					CATEGORY	36.00	0.00	578.16	

			YSIDE CITYWIDE	556 377				- 22	28
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			VCP CHOICE L		4/26/13
			۵.	ALES REGISIER	1		BILL WEEK EN	DING	4/20/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238922	3/22/13	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	11.00		176.66	I	
238923	4/19/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	77.00		1,236.62	I	
238924	4/19/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	25.00		401.50	I	
238925	4/19/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	49.00		786.94	I	
238926	4/19/13	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		786.94	I	
				CUSTOMER	211.00	0.00	3,388.66		
				CATEGORY	211.00	0.00	3,388.66		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	9
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238927	4/19/13	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	35.00		562.10 I	
					25 00			
				CATEGORY	35.00	0.00	562.10	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 23	30
Brilling Grav	1 0550	100 001		SALES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238928	4/19/13	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	54.25		871.26	I	
238929	4/12/13	800000	VISITING NURSE SERVICE	SANDOVAL, FANNY	7.00		112.42	Τ	
				CUSTOMER	61.25	0.00	983.68		
				CATEGORY	61.25	0.00	983.68		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	231
DILLEO CIUV	L 0330	100 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238930	4/19/13	800000	VISITING NURSE SERVICE	SANDOVAL, FANNY	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	232
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238931	4/19/13	000008	VISITING NURSE SERVICE	SANTELLA, LAURA	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

			YSIDE CITYWIDE	DDG 1911			PAGE 1 -	233
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238932	4/19/13	800000	VISITING NURSE SERVICE	SANTORINIOS, GE	15.00		240.91 I	
				CATEGORY	15.00	0.00	240.91	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC: BILL WEEK ENDII	SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238933 238934	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 31.00		481.80 497.86	I I
				CUSTOMER	61.00	0.00	979.66	
				CATEGORY	61.00	0.00	 979.66	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 235	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PF	ROGRAM
			:	SALES REGISTER			BILL WEEK ENDING 4/2	26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
238935	4/19/13	000008	VISITING NURSE SERVICE	SCOTTI, CAROLIN	12.00		192.72 I	
							100 50	
				CATEGORY	12.00	0.00	192.72	

			YSIDE CITYWIDE					36
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238936	4/19/13	000008	VISITING NURSE SERVICE	SCRO, WILLIAM	28.00		449.68 I	
238937	4/19/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	42.75		686.57 I	
				CUSTOMER	70.75	0.00	1,136.25	
				CATEGORY	70.75	0.00	1,136.25	

			YSIDE CITYWIDE	DDG 1997			PAGE 1 - 2:	
SALES JRN	∟ # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238938	4/19/13	800000	VISITING NURSE SERVICE	SELTZER, BERTHA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	238
SALES JR	NL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238939	4/19/13	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	68.75		1,104.14 I	
				CATEGORY	68.75	0.00	1,104.14	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 239 ADU ADULT	
				SALES REGISTER				4/26/13
INVOICE#	DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
238940	4/19/13	800000	VISITING NURSE SERVICE	SERRA, JOSE	44.50		714.68 I	
				CATEGORY	44.50	0.00	714.68	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 24	10
Brilling Grav	11 0330	100 001		SALES REGISTER			BILL WEEK END		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238941	4/19/13	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	41.50		666.49	I	
238942	4/19/13	000008	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		160.60	Τ	
				CUSTOMER	51.50	0.00	827.09		
				CATEGORY	51.50	0.00	827.09		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	241
SALES JRN	L # 0330	LOC 001		REG NY NY			LTC NURSING HOME	•
				SALES REGISTER			BILL WEEK ENDING	4/26/13
		G11GE 110	anamanan mana		*******		31401DIE EUR	GIID DI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238943	4/19/13	000008	VISITING NURSE SERVICE	SILLS, JAMES	41.50		666.49 I	
230943	4/19/13	000008	VISITING NORSE SERVICE	SILLS, UAMES	41.50		000.49	
				CATEGORY	41.50	0.00	666.49	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 242 VCP CHOICE LHCSA	2
Brilles orde	11 11 0550	100 001		SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238944 238945	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	42.00 15.00		674.52 I 240.90 I	
				CUSTOMER	57.00	0.00	915.42	
				CATEGORY	57.00	0.00	915.42	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	143
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238946	4/19/13	000008	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	- 244	
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGATE	E CARE PRO	GRAM
			S	SALES	REGISTER			BILL WEEK END	ING 4/26,	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPI	LUS
									_	
238947	4/19/13	000008	VISITING NURSE SERVICE	SO	PCHEK, SAMUEL	12.00		192.72	I	
						10.00		100 50		
1					CATEGORY	12.00	0.00	192.72		

			YSIDE CITYWIDE	DDG 1911			PAGE 1		5
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		4/26/13
							2122 ((221 21)	-11.0	1, 20, 13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238948	4/19/13	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		481.80	I	
238949	4/19/13	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	40.00		642.40	I	
				CUSTOMER	70.00	0.00	1,124.20		
				CATEGORY	70.00	0.00	1,124.20		

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 - 246	5
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238950 238951	3/29/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 12.00		144.54 I 192.72 I	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	CSA	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP	SURPLUS
238952 238953 238954	4/19/13 4/19/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	STAFILIAS, EVAN	12.00 84.00 56.00		192.72 1,349.04 899.36	I I I	
				CUSTOMER	152.00	0.00	2,441.12		
				CATEGORY	152.00	0.00	2,441.12		

RUN DATE		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADU	248 II.T
DALLO OIGN.	ш т 0550	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238955	4/19/13	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	20.75		333.25	<u> </u>
1				CATEGORY	20.75	0.00	333.25	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTI	E R		PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
238956 238957 238958 238959	4/19/13 4/19/13 4/19/13 4/19/13	000008 000008 000008 000008	VISITING NURSE SERVIOUSITING NURSE SERVIOUSITI	CE STICKELL, BLANC CE STROBL, ALFRED	30.00 35.00 39.00 30.00		562.10 626.34	I I I
				CUSTOMER	134.00	0.00	2,152.04	
				CATEGORY	134.00	0.00	2,152.04	

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER						PAGE 1 - 250 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 4/26/13			
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
	/19/13 000008 /19/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SUAREZ, TULIA TAVERAS ARIAS,	31.00 30.00		497.86 481.81	I I		
			CUSTOMER	61.00	0.00	979.67			
			CATEGORY	61.00	0.00	979.67			

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI	- 25	51
	2 11 0000	200 001		SALES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238962 238963	4/19/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TAVERAS, BERNAR	20.00		321.20 16.06	I	
238963	4/19/13	000008	VISITING NURSE SERVICE	TEJADA, BALDOME	1.00		10.00		
				CUSTOMER	21.00	0.00	337.26		
				CATEGORY	21.00	0.00	337.26		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 252 ADU ADULT BILL WEEK ENDING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
238964	4/19/13	000008	VISITING NURSE SERVICE	TEODORU, MIRELL	14.75		236.89 I
				CATEGORY	14.75	0.00	236.89

RUN DATE SALES JRN	- , , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 25	53
SALES UKN	ш # 0330	100 001		SALES REGISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
238965	4/19/13	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	35.00		562.10	I	
238966	4/19/13	800000	VISITING NURSE SERVICE	TINOCO, INES	28.00		449.68	I	
238967	4/19/13	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	25.00		401.50	I	
238968	4/19/13	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	24.00		385.44	I	
238969	4/19/13	800000	VISITING NURSE SERVICE	TORRES, EMELINA	38.00		610.28	I	
238970	4/19/13	800000	VISITING NURSE SERVICE	TORRES, LUZ M	78.00		1,252.68	I	
				CUSTOMER	228.00	0.00	3,661.68		
				CATEGORY	228.00	0.00	3,661.68		

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 254	4
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
000000	4 / 1 0 / 1 0				20.00			
238971	4/19/13	000008	VISITING NURSE SERVICE	TORRES, MARGOT	38.00		610.28 I	
					20.00			
				CATEGORY	38.00	0.00	610.28	

SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY ADU ADULT	106 110
SALES REGISTER BILL WEEK ENDING	/26/13
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP	URPLUS
238972 4/19/13 000008 VISITING NURSE SERVICE TOUMA, MATTA 35.00 562.10 I	
238973 4/19/13 000008 VISITING NURSE SERVICE TOVAR DE BOCAN, 28.00 449.68 I	
CUSTOMER 63.00 0.00 1.011.78	
CATEGORY 63.00 0.00 1.011.78	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			٤	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238974	4/12/13	800000	VISITING NURSE SERVICE	TOVAR DE BOCAN,	7.00		112.42 I	
				CATEGORY	7.00	0.00	112.42	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 257 ADU ADULT BILL WEEK ENDING 4	./26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
238975	4/19/13	800000	VISITING NURSE SERVICE	TRAVLOS, GERASI	18.00		289.08 I	
				CATEGORY	18.00	0.00	289.08	

RUN DATE 0 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEI	R		PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238977 238978	4/12/13 4/19/13 4/19/13 4/19/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TSOLISOS, FOTIN	20.00 16.00 56.00 63.00		321.20 I 256.96 I 899.36 I 1,011.78 I	
				CUSTOMER	155.00	0.00	2,489.30	
				CATEGORY	155.00	0.00	2,489.30	

			YSIDE CITYWIDE				PAGE 1 - 25	19
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL H	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238980	4/19/13	800000	VISITING NURSE SERVICE	UGLIALORO, JOHN	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE		PAGE 1 - 260
SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY		VCP CHOICE LHCSA
SALES REGISTER		BILL WEEK ENDING 4/26/13
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOU	OURS TAX AMT	AMOUNT TYP SURPLUS
238981 4/19/13 000008 VISITING NURSE SERVICE URBINA, ANA 30	0.00	481.80 I
238982 4/19/13 000008 VISITING NURSE SERVICE URENA, ARGELIA 22	2.00	353.32 I
CUSTOMER 52	2.00 0.00	835.12
CATEGORY 52	2.00 0.00	835.12

			YSIDE CITYWIDE	DEG NV NV			-	61
SALES JRN	ш # 0330	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238983	4/19/13	800000	VISITING NURSE SERVICE	URUCHIMA, VICTO	49.00		786.94 I	
				CATEGORY	49.00	0.00	786.94	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	262
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238984	4/19/13	800000	VISITING NURSE SERVICE	VALENCIA, BERNA	25.00		401.50 I	
				CATEGORY	25.00	0.00	401.50	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADU	
SALES URIN	ь # 0330	LOC 001		REGNY NY SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238985	4/19/13	800000	VISITING NURSE SERVICE	VALENCIA, EMMA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	64
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238986	4/19/13	800000	VISITING NURSE SERVICE	VALENTI, HELEN	55.00		883.30 I	
				CATEGORY	55.00	0.00	883.30	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	265
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238987	4/19/13	800000	VISITING NURSE SERVICE	VALENZA, GIUSEP	39.75		638.39 I	
				CATEGORY	39.75	0.00	638.39	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	266
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238988	4/19/13	800000	VISITING NURSE SERVICE	VASQUEZ, DULCE	28.00		449.68 I	
				CATEGORY	28.00	0.00	449.68	

RUN D	ATE 04/24/13	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 2	267
SALES	JRNL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
23898	9 4/19/13	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		529.98 I	
				CATEGORY	33.00	0.00	529.98	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
			2	SALES REGISTER			BILL WEEK ENDIN	G 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238990	4/19/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	21.00		337.26 I	
				CATEGORY	21.00	0.00	337.26	

RUN DATE SALES JRN		LOC 001		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
238991	4/19/13	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	34.00		546.04 I	
				CATEGORY	34.00	0.00	546.04	

RUN DATE 04/24/13 - SUP SUSALES JRNL # 0330 LOC 00		NY NY			PAGE 1 - 270 ADU ADULT	
	S A L E	S REGISTER			BILL WEEK ENDING 4	/26/13
INVOICE# DATE CUST N	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
238992 4/19/13 000008	8 VISITING NURSE SERVICE	VAZQUEZ, FELIPE	30.00		481.80 I	
		CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238993 238994 238995	4/19/13 4/19/13 4/19/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VELASQUEZ, NELL VELECELA, LUIS VELECELA, MARIA	16.00 15.00 20.00		256.96 I 240.90 I 321.20 I	
				CUSTOMER	51.00	0.00	819.06	
				CATEGORY	51.00	0.00	819.06	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 272	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			i	SALES REGISTER			BILL WEEK ENDING 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
238996	4/19/13	800000	VISITING NURSE SERVICE	VELEZ, MIRYAM	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	73
			S	SALES REGISTER			BILL WEEK ENDING	, ,, ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
238997	4/19/13	000008	VISITING NURSE SERVICE	VELOZ REYES, AL	13.00		208.78 I	
				CATEGORY	13.00	0.00	208.78	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
238998	4/19/13	800000	VISITING NURSE SERVICE	VENTURA, ROSA	50.00		803.00 I]
				CATEGORY	50.00	0.00	803.00	

RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 275	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 4/26/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
238999	4/19/13	800000	VISITING NURSE SERVICE	VERAS, JUANA	60.00		963.60 I	
								_
				CATEGORY	60.00	0.00	963.60	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239000	4/19/13	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	= : :
SALES OWN	ш # 0550	ПОС 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239001 239002	4/05/13 4/19/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 30.00		96.36 I 481.80 I	
				CUSTOMER	36.00	0.00	578.16	
				CATEGORY	36.00	0.00	 578.16	

ı	RUN DATE	04/24/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 278	3
ı	SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	4/26/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	239003	4/19/13	000008	VISITING NURSE SERVICE	VITO, CARMEN	30.00		481.80 I	
ı									
ı									
ı					CATEGORY	30.00	0.00	481.80	

			TYSIDE CITYWIDE	222 222			PAGE 1 - 2	279
SALES JRN	IL # 0330	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239004	4/19/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	70.00		1,124.20 I	
				 CATEGORY	70.00	0.00	1,124.20	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 280)
SALES JRNI	և # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239005	4/19/13	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	16.00		256.96 I	
				CATEGORY	16.00	0.00	 256.96	

RUN DATE	04/24/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	81
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	4 / 1 0 / 1 0						0.5 0.5 -	
239006	4/19/13	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	6.00		96.36 I	
							26.26	
				CATEGORY	6.00	0.00	96.36	

RUN DATE (SALES JRN)		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 28 ADU ADULT BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239007 239008	4/19/13 4/19/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	WATKINS, ELOISE WEIHS, MARGARET	9.00 6.00		144.54 I 96.36 I	
				CUSTOMER	15.00	0.00	240.90	
				CATEGORY	15.00	0.00	240.90	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	283
			S	SALES REGISTER			BILL WEEK ENDING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239009	4/19/13	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	36.00		578.16 I	
239010	4/19/13	000008	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00 		256.96 I	
				CUSTOMER	52.00	0.00	835.12	
				CATEGORY	 52.00	0.00	835.12	

RUN DATE (04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 28	4
SALES JRNI	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGAT	re car	E PROGRAM
			S	SALES	REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239011	4/19/13	800000	VISITING NURSE SERVICE	YE	LLAPAH, DOLLI	12.00		192.72	I	
					CATEGORY	12.00	0.00	192.72		

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES JRNL # 0330 GUI GUILDNET SALES REGISTER BILL WEEK ENDING 4/26/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS ALI, AMRUNISSA 51.00 ALIX, PEDRO 7.00 ALSTON, ZULINE 60.00 239012 791.52 I 4/19/13 000010 GUILDNET 1,400.00 I 1,229.12 I 239013 4/19/13 000010 GUILDNET 239014 4/19/13 000010 GUILDNET 239015 4/19/13 000010 GUILDNET 760.48 1,303.68 239016 GUILDNET 4/19/13 000010 239017 4/19/13 000010 GUILDNET 112.52 1,117.44 239018 4/19/13 000010 GUILDNET 186.24 239019 4/19/13 000010 GUILDNET 550.96 239020 4/19/13 000010 GUILDNET 239021 4/19/13 000010 GUILDNET 496.64 1,257.12 GUILDNET 239022 4/12/13 000010 239023 4/19/13 000010 GUILDNET 457.84 239024 4/19/13 000010 GUILDNET 931.20 239025 4/19/13 000010 GUILDNET 465.60 239026 4/19/13 000010 GUILDNET 310.40 239027 4/19/13 000010 GUILDNET 151.32 239028 4/19/13 000010 GUILDNET 346.92 239029 4/19/13 000010 GUILDNET 869.12 239030 4/19/13 000010 GUILDNET 558.72 239031 4/19/13 000010 GUILDNET 931.20 239032 4/19/13 GUILDNET 465.60 000010 239033 4/19/13 000010 GUILDNET 333.68 239034 4/19/13 000010 GUILDNET 853.60 I 239035 4/19/13 000010 GUILDNET 93.12 I 239036 4/19/13 000010 GUILDNET 543.20 Ι 239037 4/19/13 000010 GUILDNET 465.60 Ι 239038 372.48 4/19/13 000010 GUILDNET 239039 504.40 4/19/13 000010 GUILDNET 239040 4/19/13 000010 GUILDNET 1,400.00 543.20 239041 4/19/13 000010 GUILDNET 239042 4/19/13 000010 GUILDNET 264.32 239043 4/19/13 000010 GUILDNET 247.80 239044 4/19/13 465.60 000010 GUILDNET I 239045 211.68 2/01/13 000010 GUILDNET 239046 4/19/13 675.12 000010 GUILDNET 239047 4/19/13 000010 GUILDNET 403.52 Ι 239048 465.60 4/05/13 000010 GUILDNET 239049 4/19/13 000010 GUILDNET 434.56 239050 4/19/13 000010 GUILDNET 310.40 239051 4/19/13 GUILDNET 248.32 000010 807.04 1,086.40 651.84 239052 4/19/13 000010 GUILDNET 239053 4/19/13 000010 GUILDNET 239054 4/19/13 000010 GUILDNET 651.84 239055 4/12/13 GUILDNET 100.00 000010 760.48 239056 4/19/13 GUILDNET 000010 239057 201.76 4/19/13 000010 GUILDNET 239058 4/19/13 000010 GUILDNET 434.56 239059 462.48 4/05/13 000010 GUILDNET

248.32

4/05/13

000010 GUILDNET

239060

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 286SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 4/26/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS GREENBAUM, MASA 42.00 651.84
GREENSPAN, ALIC 35.00 543.20
GUERRA, MAYRA 1.00 15.52
GUERRA, MAYRA 36.00 558.72
GUEMAN, ALICIA 12.00 186.24
GUEMAN, EDELMIR 5.50 85.36
HENLEY, LUVENIA 26.00 403.52
HENLEY, LUVENIA 12.00 186.24
HENLEY, LUVENIA 12.00 186.24
HENLEY, LUVENIA 2.00 620.80
HERNIQUEZ, TERE 40.00 620.80
HERNIQUEZ, TERE 40.00 620.80
HERNIADIC, LUZ 29.75 461.72
HICKS, SYLVIA 43.50 675.12
HUSTIU, SILVIA 4.00 62.08
IGLESIAS, JUANA 168.00 2,660.36
IRIMIA, SIMONA 47.50 737.20
IRIZARRY, ESTRE 30.00 388.00
JALME ROSALBA 54.00 388.00
JALME ROSALBA 54.00 838.00
JALME ROSALBA 54.00 838.08
JIMENEZ, EUGENI 77.50 1,202.80
JOHNSON, DOROTH 83.25 1,292.04
JOHNSON, DOROTH 83.25 1,292.04
LOSES, LUCILLE 12.00 186.24
LANZILOTTA, ROS 46.00 713.92
LEMOIME, RICARD 24.00 372.48
LOPEZ, CARMEN 52.50 81.4.80
LORA, FERNANDO 76.00 1,779.52
LORUSSO, ANNA 45.00 698.40
LOZADA, RAMON 36.00 558.72
LUGO, DOLORES 12.00 186.24
LUIS, MAXIMINA 17.75 275.8
LUGO, DOLORES 12.00 186.24
LUIS, MAXIMINA 17.75 275.8
LUNA, ELDA 36.00 558.72
MALLINAS, EUGEN 1.00 90.00
MARTINEZ, GUORI 25.00 388.00
MASPERO, PHILLI 7.00 1,400.00
MARTINEZ, GUORI 25.00 388.00
MARTEN, RUTH 7.00 1,400.00
MARTINEZ, GLORI 25.00 388.00
MASSOL, PEDRO A 28.00 434.56
MATEO, RAFAEL 48.00 744.96
MORALBS, MARIMA 45.00 662.80
MORALBS, MARGAR 16.00 744.96
MORALBS, ISIDRO 42.00 388.00
MORALES, ADOLFO 48.00 744.96
MORALBS, ISIDRO 42.00 651.84
MORALBS, ISIDRO 42.00 651.84
MOSCICKA, JADWI 24.00 372.48
MOSCICKA, JADWI 24.00 372.48
MOSCICKA, JADWI 24.00 372.48
MOSCICKA, JADWI 24.00 620.80
NETTLES, DONNA 25.00 388.00
NETTLES, DONNA 25.00 388.00 GREENBAUM, MASA 42.00 239061 4/19/13 000010 GUILDNET 651.84 I GREENSPAN, ALIC 35.00 239062 543.20 4/19/13 000010 GUILDNET I 239063 3/29/13 000010 GUILDNET I 239064 4/12/13 000010 GUILDNET 239065 GUILDNET 4/19/13 000010 239066 GUILDNET 4/19/13 000010 239067 4/12/13 000010 GUILDNET 239068 4/19/13 000010 GUILDNET 239069 3/15/13 000010 GUILDNET 239070 4/19/13 000010 GUILDNET 239071 4/19/13 000010 GUILDNET 239072 4/19/13 000010 GUILDNET 239073 4/19/13 000010 GUILDNET 239074 4/19/13 000010 GUILDNET 239075 4/19/13 000010 GUILDNET 239076 4/19/13 000010 GUILDNET 239077 4/19/13 000010 GUILDNET 239078 4/19/13 000010 GUILDNET 239079 3/29/13 000010 GUILDNET 239080 4/19/13 000010 GUILDNET 239081 4/19/13 GUILDNET 000010 239082 4/19/13 GUILDNET 000010 239083 4/19/13 000010 GUILDNET 239084 4/12/13 000010 GUILDNET 239085 4/12/13 000010 GUILDNET 239086 4/19/13 000010 GUILDNET 239087 4/19/13 000010 GUILDNET 239088 4/19/13 000010 GUILDNET 239089 4/19/13 000010 GUILDNET 239090 4/19/13 000010 GUILDNET 239091 3/22/13 000010 GUILDNET 239092 4/19/13 000010 GUILDNET 239093 4/19/13 000010 GUILDNET 239094 4/19/13 000010 GUILDNET 239095 4/19/13 000010 GUILDNET 239096 4/19/13 000010 GUILDNET 239097 4/19/13 000010 GUILDNET 239098 4/19/13 000010 GUILDNET 239099 4/19/13 000010 GUILDNET 239100 GUILDNET 4/12/13 000010 239101 4/19/13 000010 GUILDNET 239102 GUILDNET 4/19/13 000010 239103 4/19/13 000010 GUILDNET 239104 4/19/13 000010 GUILDNET 239105 3/29/13 000010 GUILDNET 239106 4/19/13 000010 GUILDNET 239107 3/01/13 000010 GUILDNET 239108 4/19/13 000010 GUILDNET

4/19/13 000010 GUILDNET

239109

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 287 SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET WIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 4/26/13 CUST NO CUSTOMER NAME

REFERENCE

NUNEZ, ANGELINA

19.25

298.76

000010

GUILLONET

000010

GUILLONET

COASIO, FELIX

OUTON

GUILLONET

COASIO, FELIX

OUTON

GUILLONET

COASIO, FELIX

OUTON

GUILLONET

COASIO, FELIX

OUTON

GUILLONET

COEDA, SARA

COUNCY

GUILLONET

COETA, SARTHONY

COETA, SARA

COUNCY

GUILLONET

COETIZ, MERCEDES

COUNCY

GUILLONET

COETIZ, MERCEDES

COUNCY

GUILLONET

COETIZ, MERCEDES

COUNCY

COUN REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 239110 298.76 I 4/19/13 239111 744.96 I 4/05/13 4/19/13 239112 239113 4/19/13 239114 4/19/13 239115 4/19/13 239116 4/19/13 239117 4/19/13 239118 4/19/13 239119 4/19/13 239120 4/19/13 239121 4/19/13 239122 4/19/13 239123 4/19/13 239124 4/19/13 239125 4/19/13 239126 4/19/13 239127 4/19/13 239128 4/19/13 239129 4/19/13 239130 4/19/13 239131 4/19/13 239132 4/19/13 239133 4/19/13 239134 4/12/13 239135 4/19/13 239136 4/19/13 239137 4/19/13 239138 4/19/13 239139 4/19/13 239140 4/19/13 239141 4/19/13 239142 4/19/13 239143 4/19/13 239144 4/19/13 239145 4/19/13 239146 4/19/13 239147 4/19/13 239148 4/19/13 239149 4/19/13 239150 4/19/13 239151 4/19/13 239152 4/19/13 239153 4/19/13 239154 4/19/13 239155 4/19/13 239156 4/19/13 239157 4/19/13 4/19/13 000010 GUILDNET 239158

RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE			IYSIDE CITYWIDE	DEC MY MY			PAGE 4 GUI GUILDNET	- 28	38
SALES URN	іп # 0330	TOC 001	SOUNTSIDE CITIMIDE	SALES REGISTER	3		BILL WEEK END	ING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239159	3/22/13	000010	GUILDNET	SANTIAGO, IVETH	48.75		756.60	I	
239160	4/19/13	000010	GUILDNET	SANTIAGO, VICTO	20.00		330.40	I	
239161	4/19/13	000010	GUILDNET	SCHENK, ENI	17.00		348.32	I	
239162	4/19/13	000010	GUILDNET	SHELTON, AGUEDA	41.00		636.32	I	
239163	4/12/13	000010	GUILDNET	SOLIS, JUDITH	60.00		931.20	I	
239164	4/19/13	000010	GUILDNET	THEN, MARIA	33.00		512.16	I	
239165	4/19/13	000010	GUILDNET	THERMOSY, MARIE	45.00		698.40	I	
239166	4/05/13	000010	GUILDNET	TORO, ROSARIO	68.00		1,055.36	I	
239167	4/19/13	000010	GUILDNET	TORRES, JUANITA	46.00		713.92	I	
239168	4/19/13	000010	GUILDNET	TOUSSAINT, MIGU	32.75		508.28	I	
239169	4/19/13	000010	GUILDNET	TROISI, DELIA	48.00		744.96	I	
239170	4/19/13	000010	GUILDNET	VARGAS, ALCIBIA	35.00		543.20	I	
239171	4/19/13	000010	GUILDNET	VARGAS, AUREA	35.00		578.20	I	
239172	3/22/13	000010	GUILDNET	VAZQUEZ 2, ROSA	23.75		368.60	I	
239173	4/19/13	000010	GUILDNET	VEGA, ADELAIDA	6.00		1,200.00	I	
239174	4/19/13	000010	GUILDNET	VELEZ, CARMEN	38.00		589.76	I	
239175	4/19/13	000010	GUILDNET	VELEZ, WILLIAM	20.00		310.40	I	
239176	4/19/13	000010	GUILDNET	VICTORIO, ROQUE	65.00		1,008.80	I	
239177	4/12/13	000010	GUILDNET	VLAHOS, MARIE	72.00		1,117.44	I	
239178	4/19/13	000010	GUILDNET	WARD, ALTHEA	8.00		124.16	I	
239179	4/19/13	000010	GUILDNET	WARD, ALTHEA	4.00		56.00	I	
239180	4/19/13	000010	GUILDNET	WEISZ, KLARA	8.00		124.16	I	
239181	4/19/13	000010	GUILDNET	WEST, BALDWIN	20.00		310.40	I	
239182	4/19/13	000010	GUILDNET	WHITLEY, MYRNA	18.50		287.12	I	
239183	4/19/13	000010	GUILDNET	YI, CARLOS	24.00		372.48	I	
239184	4/19/13	000010	GUILDNET	ZARAGOZA, ISABE	40.00		620.80	I	
239185	4/19/13	000010	GUILDNET	ZARE, GLORIA	54.75		849.72	I	
239186	4/19/13	000010	GUILDNET	ZUMAETA, FANNY	64.00		993.28	I	
				REFERENCE SANTIAGO, IVETH SANTIAGO, VICTO SCHENK, ENI SHELTON, AGUEDA SOLIS, JUDITH THEN, MARIA THERMOSY, MARIE TORO, ROSARIO TORRES, JUANITA TOUSSAINT, MIGU TROISI, DELIA VARGAS, ALCIBIA VARGAS, ALCIBIA VARGAS, AUREA VAZQUEZ 2, ROSA VEGA, ADELAIDA VELEZ, CARMEN VELEZ, CARMEN VELEZ, WILLIAM VICTORIO, ROQUE VLAHOS, MARIE WARD, ALTHEA WARD, ALTHEA WEISZ, KLARA WEST, BALDWIN WHITLEY, MYRNA YI, CARLOS ZARAGOZA, ISABE ZARE, GLORIA ZUMAETA, FANNY	5,980.00	0.00	101,403.80		
							101,403.80		

RUN DATE	04/24/13 -	- SUP SUNN	TYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 28	89
DALLO OIG	VL # 0550	100 001	DONNIDIDE CITIWIDE	SALES REGISTER			BILL WEEK END	ING	4/26/13
		CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239187	4/19/13	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
239188	4/19/13	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
239189	4/19/13	000122	HEALTH FIRST	BLANCO, CARMELI	20.00		337.60	I	
239190	4/19/13	000122	HEALTH FIRST	BOCHENEC, JOLAN	35.00		590.80	I	
239191	4/19/13	000122	HEALTH FIRST	BOWERS *, DIANE	50.00		844.00	I	
239192	4/19/13	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
239193	4/19/13	000122	HEALTH FIRST	CARRILLO, MARIA	25.00		422.00	I	
239194	4/19/13	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
239195	4/19/13	000122	HEALTH FIRST	CEBALLOS, ANA	48.00		810.24	I	
239196	4/19/13	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
239197	4/19/13	000122	HEALTH FIRST	ESPAILLAT, AMPA	38.00		641.44	I	
239198	4/05/13	000122	HEALTH FIRST	ESTEVES, JOSE	54.00		911.52	I	
239199	4/19/13	000122	HEALTH FIRST	FERRERA, FRANCI	70.00		1,181.60	I	
239200	3/29/13	000122	HEALTH FIRST	FONTANES, PEDRO	53.00		894.64	I	
239201	4/19/13	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
239202	4/19/13	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
239203	4/19/13	000122	HEALTH FIRST	ISKANDER, JACOU	56.00		945.28	I	
239204	4/19/13	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	Ī	
239205	4/19/13	000122	HEALTH FIRST	LARA, TOMASA	40.00		675.20	I	
239206	4/19/13	000122	HEALTH FIRST	LAZALA, GLADYS	84.00		1.417.92	I	
239207	4/19/13	000122	HEALTH FIRST	MACARENA, SAHAR	84.00		1.417.92	Ī	
239208	4/19/13	000122	HEALTH FIRST	ORTIZ, TULA	36.00		607.68	Ī	
239209	4/19/13	000122	HEALTH FIRST	PALAZZOLO, FLOR	48.00		810.24	Ī	
239210	4/19/13	000122	HEALTH FIRST	REINOSO, EMELIA	70.00		1.181.60	T	
239211	4/19/13	000122	HEALTH FIRST	RIVERA CHRISTO	21.00		354.48	T	
239212	4/19/13	000122	HEALTH FIRST	RIVERA EDDIE	12 00		202 56	Ť	
239213	4/19/13	000122	HEALTH FIRST	RODRIGUEZ. MARG	20.00		337.60	Ť	
239214	4/19/13	000122	HEALTH FIRST	SALAZAR LUZ MA	56 00		945 28	Ť	
239215	4/19/13	000122	HEALTH FIRST	SALHIJANA VOLAN	40 00		675 20	Ť	
239216	4/19/13	000122	HEALTH FIRST	SCHOONMAKER .TE	61 00		1 029 68	T	
239217	4/19/13	000122	HEALTH FIRST	SCHOOMMAKER, OF	29 00		489 52	T	
239217	4/19/13	000122	HEALTH EIRST	ST ROMATHE CLA	68 00		1 147 84	T	
239218	4/19/13	000122	HEALTH EIRST	SI KOMAINE, CHA	13 00		219 44	T	
239219	4/19/13	000122	HEALTH EIDOT	THODNTON CHIDI	47 00		703 26	± T	
239220	4/12/13	000122	HEVILH EIDGL	THORNTON, SHIKE	47.00		23.30 210 24	<u>+</u>	
239221	4/12/13	000122	HEVILH EIDGL	VALENCIA, ESITE	20.00		337 60	<u>+</u>	
239223	4/19/13	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	Ī	
				BEGUM, MANWARA BHAIRO, KOWSILI BLANCO, CARMELI BOCHENEC, JOLAN BOWERS *, DIANE CARMONA, LUZ CARRILLO, MARIA CARRION, MARIA CEBALLOS, ANA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA ISKANDER, JACOU KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS MACARENA, SAHAR ORTIZ, TULA PALAZZOLO, FLOR REINOSO, EMELIA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SCHOONMAKER, JE SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD THORNTON, SHIRL VALENCIA, ESTHE VASQUEZ, OLGA VEGA, GLORIA	1,605.00	0.00	27,092.40		

CATEGORY 1,605.00

0.00 27,092.40

			YSIDE CITYWIDE		NY NY S REGISTER			PAGE 1	- 29	
SALES JRN	IL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			NHP NEIGHBOR	HOOD I	
				SALE	S REGISTER			BILL WEEK EN	DING	4/26/13
		~~								
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239224	4/19/13	000120	NEIGHBORHOOD HEALTH NEIGHBORHOOD HEALTH NEIGHBORHOOD HEALTH	PROVIDERS	AHMED, UMARA	56.00		945.28	I	
239225	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	AKHTER, SELINA	45.00		759.60	I	
239226	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
239227	4/05/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	DEKMAK, GRISEL	95.00		1,603.60	I	
239228	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	DIAZ 1, CARMEN	28.00		472.64	I	
239229	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	DEKMAK, GRISEL DIAZ 1, CARMEN FERNANDEZ, MARI FLORES, MARITZA JONES, CYNTHIA KHAN, FARUQUE KROLL, KATHERIN	11.00		185.68	I	
239230	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
239231	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	JONES, CYNTHIA	25.00		422.00	I	
239232	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	KHAN, FARUQUE	76.00		1,282.88	I	
239233	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	KROLL, KATHERIN	39.00		658.32	I	
239234	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	MORALES HERNAD	42.00		708.96	I	
239235	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	MOSKOWITZ, RONA	30.00		506.40	I	
239236	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	OCASIO, VIRGINI	30.00		506.40	I	
239237	3/22/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	RODRIGUEZ -2, M	36.00		607.68	I	
239238	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	RODRIGUEZ, JESS	25.00		422.00	I	
239239	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
239240	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
239241	4/19/13	000120	NEIGHBORHOOD HEALTH	PROVIDERS	KHAN, FARUQUE KROLL, KATHERIN MORALES HERNAD MOSKOWITZ, RONA OCASIO, VIRGINI RODRIGUEZ -2, M RODRIGUEZ, JESS SHEPPARD, ERMA WELLS, WYNORIA WILSON, SHERYL	38.00		641.44	I	
					CUSTOMER	782.00	0.00	13,200.16		
					CATEGORY	792 00	0.00	13,200.16		
					CAIEGORI	102.00	0.00	13,∠00.16		

			YSIDE CITYWIDE				PAGE 1	- 29	1
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHOL	IC/FI	DELIS
				SALES REGISTER			BILL WEEK END	ING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239242	2/22/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	1.00		80.00	I	
239243	4/19/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
239244	4/12/13	000126	NYS CATHOLIC/FIDELIS	BROWN, CARMEN	8.00		208.09	I	
239245	3/01/13	000126	NYS CATHOLIC/FIDELIS	GARCIA, CLEMENT	8.00		208.09	I	
239246	4/19/13	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45	I	
239247	4/19/13	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	28.00		472.36	I	
239248	4/12/13	000126	NYS CATHOLIC/FIDELIS	ORTIZ, EDUARDO	36.00		680.45	I	
239249	3/08/13	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	28.00		535.49	I	
239250	4/12/13	000126	NYS CATHOLIC/FIDELIS	SALABERRY, ANA	82.00		1,456.47	I	
239251	4/19/13	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	30.00		506.10	I	
239252	4/19/13	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	41.00		691.67	I	
				CUSTOMER	346.00	0.00	6,255.80		
				CATEGORY	346.00	0.00	6,255.80		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			UHC UNITED H		
				SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239253	4/19/13	000128	UNITED HEALTH CARE	CALDERON, MIGDA	10.00		171.60	I	
239254	4/19/13	000128	UNITED HEALTH CARE	CALDERON, MIGDA	60.00		1,029.60	I	
239255	4/19/13	000128	UNITED HEALTH CARE	KHAN, FAZAL	84.00		1,441.44	I	
239256	4/19/13	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	53.00		909.48	I	
239257	4/19/13	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I	
				CUSTOMER	263.00	0.00	4,513.08		
				CATEGORY	263.00	0.00	4,513.08		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 293
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM HE	EALTH
				SALES REGISTER			BILL WEEK END	OING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
239258	4/19/13	000114	EMBLEM HEALTH	BERNARD, SOPHIE	30.00		506.40	I
239259	4/19/13	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,417.92	I
239260	4/19/13	000114	EMBLEM HEALTH	COPELAND, ELISE	56.00		798.00	I
239261	4/19/13	000114	EMBLEM HEALTH	DE JESUS, TIBUR	60.00		855.00	I
239262	4/19/13	000114	EMBLEM HEALTH	GAFFNEY, FREDER	16.00		270.08	I
239263	4/19/13	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	63.00		1,063.44	T
239264	4/19/13	000114	EMBLEM HEALTH	JACKSON, FRANCE	7.00		118.16	_ T
239265	4/19/13	000111	EMBLEM HEALTH	JACKSON, FRANCE	42.00		708.96	Ť
239266	4/19/13	000111	EMBLEM HEALTH	KEATON, CATHERI	36.00		607.68	± T
239267	4/19/13			•				± -
		000114	EMBLEM HEALTH	KEATON, CATHERI	36.00		607.68	<u></u>
239268	4/19/13	000114	EMBLEM HEALTH	LANGELOH, HOWAR	42.00		708.96	<u>+</u>
239269	4/19/13	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		202.56	I
239270	4/19/13	000114	EMBLEM HEALTH	WESTFIELD, BREN	54.00		911.52	I
239271	4/19/13	000114	EMBLEM HEALTH	YIANNITSIS, LEO	23.00		388.24	I
				CUSTOMER	561.00	0.00	9,164.60	
				CATEGORY	561.00	0.00	9,164.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L 1	GNY NY ES REGISTEI	?		PAGE 1 HIP HEALTH IN BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239272 239273 239274 239275 239276 239277	4/19/13 4/19/13 4/19/13 4/19/13 4/19/13	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA LOYOLA, MARIA SHAH, HANSIKABE WILLIAMS, DIANE	28.00 20.00 10.00 20.00 5.00 20.00		472.64 337.60 168.80 337.60 84.40 337.60	I I I I I	
				CUSTOMER	103.00	0.00	1,738.64		
				CATEGORY	103.00	0.00	1,738.64		

		- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	95
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLU	S HEAI	JTH
				SALES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239278	4/19/13	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I	
239279	4/19/13	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
239280	4/19/13	000130	METROPLUS HEALTH	DOBBINS, SANDRA	168.00		2,881.20	I	
239281	4/19/13	000130	METROPLUS HEALTH	GALAS, TERESA	10.00		171.50	I	
239282	4/19/13	000130	METROPLUS HEALTH	MURDOCK, GERTRU	48.00		823.20	I	
239283	4/19/13	000130	METROPLUS HEALTH	OSORIO, ELVIA	21.00		360.15	I	
239284	4/19/13	000130	METROPLUS HEALTH	PERSAD, USHA	70.00		1,200.50	I	
239285	4/05/13	000130	METROPLUS HEALTH	RAMPERSAID, ALI	27.00		463.05	I	
239286	4/19/13	000130	METROPLUS HEALTH	RYALS, CHARLES	24.00		411.60	I	
239287	4/19/13	000130	METROPLUS HEALTH	RYALS, CHARLES	8.00		137.20	I	
239288	4/19/13	000130	METROPLUS HEALTH	SANTORO, MATTHE	35.00		600.25	I	
239289	4/19/13	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20	I	
239290	4/19/13	000130	METROPLUS HEALTH	VALLE, BLASINA	37.00		634.55	I	
				CUSTOMER	614.00	0.00	10,530.10		
				CATEGORY	614.00	0.00	10,530.10		

1 - 296 RUN DATE 04/24/13 - SUP SUNNYSIDE CITYWIDE PAGE LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES JRNL # 0330 WEL WELCARE OF NY SALES REGISTER BILL WEEK ENDING 4/26/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP WELCARE OF NEW YORK, INC. ALONSO, ANA 35.00 602.00 WELCARE OF NEW YORK, INC. BATILO, MARTA 49.00 842.80 WELCARE OF NEW YORK, INC. BISRAM, ROOPKAL 20.00 344.00 1.204.00 WELCARE OF NEW YORK, INC. CEBALLOS, FRANC 70.00 1.204.00 2.064.00 WELCARE OF NEW YORK, INC. CHOUDHURY, MEHE 120.00 2.064.00 4.30.00 WELCARE OF NEW YORK, INC. CHOUDHURY, MEHE 120.00 2.064.00 4.30.00 WELCARE OF NEW YORK, INC. CHOUDHURY, MEHE 120.00 4.30.00 4.30.00 WELCARE OF NEW YORK, INC. CHOUDHURY, MEHE 120.00 4.30.00 4.30.00 WELCARE OF NEW YORK, INC. GOILOUT, CARMEN 30.00 516.00 4.30.00 516.00 WELCARE OF NEW YORK, INC. GOOLOUT, CARMEN 30.00 516.00 WELCARE OF NEW YORK, INC. GOOLOUT, CARMEN 30.00 516.00 533.20 WELCARE OF NEW YORK, INC. HUDGINS, LOUZET 40.00 688.00 WELCARE OF NEW YORK, INC. LOPEZ, ISABEL 35.00 602.00 WELCARE OF NEW YORK, INC. LOPEZ, MANUEL 84.00 1.444.80 WELCARE OF NEW YORK, INC. LOPEZ, MANUEL 84.00 1.651.20 WELCARE OF NEW YORK, INC. LOPEZ, WANUEL 84.00 1.651.20 WELCARE OF NEW YORK, INC. MARTINEZ, MARIA 48.00 8.25.60 WELCARE OF NEW YORK, INC. MARTINEZ, MARIA 48.00 8.25.60 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 540.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 1.37.60 602.00 WELCARE OF NEW YORK, INC. MORALES, FRANCI 5.00 540.00 SURPLUS WELCARE OF NEW YORK, INC. ALONSO, ANA 35.00 WELCARE OF NEW YORK, INC. BATILO, MARTA 49.00 239291 4/19/13 000124 602.00 I 239292 4/19/13 000124 I 239293 4/19/13 000124 239294 4/19/13 000124 239295 4/05/13 000124 239296 12/14/12 000124 239297 4/19/13 000124 239298 4/19/13 000124 239299 4/12/13 000124 239300 4/19/13 000124 239301 4/05/13 000124 239302 4/19/13 000124 239303 4/19/13 000124 239304 4/12/13 000124 239305 4/12/13 000124 239306 4/19/13 000124 239307 4/19/13 000124 239308 1/04/13 000124 239309 4/19/13 000124 239310 3/08/13 000124 239311 4/19/13 000124 239312 4/12/13 000124 239313 4/19/13 000124 239314 4/05/13 000124 239315 4/12/13 000124 239316 4/19/13 000124 239317 4/19/13 000124 239318 4/19/13 000124 239319 4/19/13 000124 239320 4/19/13 000124 239321 4/19/13 000124 239322 4/19/13 000124 239323 4/19/13 000124 239324 4/19/13 000124 239325 4/19/13 000124 239326 4/19/13 000124 239327 1/04/13 000124 239328 3/15/13 000124 239329 4/19/13 000124 239330 4/19/13 000124 WELCARE OF NEW YORK, INC. 239331 4/19/13 000124 WELCARE OF NEW YORK, INC. CUSTOMER 1,608.00 0.00 29,113.60 CATEGORY 1,608.00 0.00 29,113.60

RUN DATE 04/24/ SALES JRNL # 03		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - AMG AMERIGROUE BILL WEEK ENDI)
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
239332 4/19/ 239333 3/01/ 239334 4/19/ 239335 4/19/	13 000132 13 000132	AMERIGROUP AMERIGROUP AMERIGROUP AMERIGROUP	FRASIEUR, GARY PRUITT, JOHNNY WALTERS, BYRON YOUNG, KALEILE	6.00 12.00 30.00 23.00		101.28 202.56 506.40 388.24	I I I
			CUSTOMER	71.00	0.00	1,198.48	
			CATEGORY	71.00	0.00	1,198.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				PAGE 1 AM2 AMERIGRO	- 29	8
	.2 0550	200 001		-	GISTER			BILL WEEK EN		4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239336	4/19/13	000204	AMERIGROUP 2	AKHTAR,	CATHRIN	35.00		525.00	I	
239337	4/19/13	000204	AMERIGROUP 2	COLCHAM	IRO, EST	32.00		480.00	I	
239338	4/19/13	000204	AMERIGROUP 2	CRUZ, S	ALVADOR	20.00		300.00	I	
239339	4/19/13	000204	AMERIGROUP 2	ESPINAL	, MARIA	36.00		540.00	I	
239340	4/19/13	000204	AMERIGROUP 2	FERNAND	EZ, NORK	42.00		630.00	I	
239341	4/19/13	000204	AMERIGROUP 2	HARDING	, EDNA	17.00		255.00	I	
239342	4/19/13	000204	AMERIGROUP 2	MARTINE	Z, TOMAS	20.00		300.00	I	
239343	4/19/13	000204	AMERIGROUP 2	RIVERA,	CARMEN	25.00		375.00	I	
				C	USTOMER	227.00	0.00	3,405.00		
				C	ATEGORY	227.00	0.00	3,405.00		

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HCP HEALTHCARE BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
239345 239346	4/19/13 4/19/13 4/19/13 4/19/13	000148 000148 000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA SCOTT, AKHNATON TOWLES, ADA ZAMBRANO, ZOILA	63.00 20.00 20.00 16.00		1,063.44 337.60 337.60 270.08	I I I
				CUSTOMER	119.00	0.00	2,008.72	
				CATEGORY	119.00	0.00	2,008.72	

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 30	00
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			ICS INDEPEND	ENCE (CARE SYSTEMS
				SALES	REGISTE	R		BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239348	4/19/13	000172	INDEPENDENCE CARE SYS	STEMS AGO	STINI, MONSE	24.00		393.60	I	
239349	4/19/13	000172	INDEPENDENCE CARE SYS	STEMS BER	RY, ANGELINA	28.00		459.20	I	
239350	4/19/13	000172	INDEPENDENCE CARE SYS	STEMS JON	ES, VALERIE	20.00		328.00	I	
239351	4/19/13	000172	INDEPENDENCE CARE SYS	STEMS MUS	HAYEV, BORIS	20.00		328.00	I	
239352	4/05/13	000172	INDEPENDENCE CARE SYS	STEMS ROD	RIGUEZ, SILV	72.00		1,180.80	I	
					CUSTOMER	164.00	0.00	2,689.60		
					CATEGORY	164.00	0.00	2,689.60		

RUN DATE 04	4/24/13 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 301
SALES JRNL	# 0330	LOC 001	SUNNYSIDE CITYWIDE	REG N	IY NY			VCS VNSNY CHO	DICE SELECTHEALTH
				SALES	S REGISTER			BILL WEEK EN	DING 4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
239353	4/19/13	000170	VNSNY CHOICE SELECT	HEALTH	KARASSAVIDES, A	24.00		411.84	I
239354	4/19/13	000170	VNSNY CHOICE SELECT	HEALTH	REYES, LORGIO	32.00		549.12	I
					CUSTOMER	56.00	0.00	960.96	
					CATEGORY	 56.00	0.00	960.96	

-	- , , -		YSIDE CITYWIDE				PAGE 1 - 302			
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE REG				PAR PRIVATE		4 (05 (10	
			S A L E	S REGISTER			BILL WEEK END	ING	4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
239355	4/19/13	000002	SUNNYSIDE COMMUNITY SERVICES	BENZ, ROBERT	9.75		141.38	I		
239356	4/19/13	000002	SUNNYSIDE COMMUNITY SERVICES	CAIALA, SALLY	4.00		58.00	I		
239357	4/19/13	000002	SUNNYSIDE COMMUNITY SERVICES	ESCOBAR, MARIA	4.00		58.00	I		
				CUSTOMER	17.75	0.00	257.38			
020250	4 /10 /12	000040	DILL GIVE GUID I GITTUID	D G	04.00		250 00	_		
239358	4/19/13	000040	DUISIN, CHRISTINE	DUISIN, XENIA	24.00		378.00	Τ		
239359	4/19/13	000049	DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE	30.00		435.00	т		
237337	1/1/15	000015	DOMINICAN DIDIBRO PAR HEHI	DIGI, BERTONE	30.00		155.00	_		
239360	4/19/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I		
				CATEGORY	79.75	0.00	1,194.38			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 303 CAS CHILDREN'S AID BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239361 239362	4/19/13 4/19/13	000088 000088	CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY	DUNNE, MYEISHA SALAS, HELENA	20.00 28.00		310.00 I 434.00 I	
				CUSTOMER	48.00	0.00	744.00	
				 CATEGORY	48.00	0.00	744.00	

RUN DATE (SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTER			PAGE 1 - PAR PRIVATE BILL WEEK ENDING	304 4/26/13
INVOICE#	DATE 4/19/13	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
239363	4/19/13	000098	MILDRED PANSE	P1	ANSE, MILDRED CATEGORY	20.00	0.00	310.00 1	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ELD ELDERSERV BILL WEEK END		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239364 239365	4/19/13 4/19/13	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA MEYSTER, LYUBOV	25.00 25.00		356.25 356.25	I	
				CUSTOMER	50.00	0.00	712.50		
				CATEGORY	50.00	0.00	712.50		

RUN DATE	04/24/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30)6
SALES JRN	rL # 0330	LOC 001	SUNNYSIDE CITYWIDE REC	3 NY NY			CCM COMPREHE	NSIVE	CARE MGMT
			SALI	ES REGISTER			BILL WEEK EN	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239366	4/12/13	000150	COMPREHENSIVE CARE MANAGEMENT	r APONTE, ANA	15.00		211.50	I	
239367	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	r Bones, ana	20.00		282.00	I	
239368	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	CARO, CLARA	70.00		987.00	I	
239369	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	r MELAMED, ESTER	20.00		282.00	I	
239370	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	POOLE, JENNIFER	9.00		126.90	I	
239371	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	r PULLIAM, WILLIE	24.00		338.40	I	
239372	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	rosario, celest	30.00		423.00	I	
239373	3/22/13	000150	COMPREHENSIVE CARE MANAGEMENT	ruda, EDWIN	6.50		91.65	I	
239374	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	•	13.00		183.30	I	
239375	4/19/13	000150	COMPREHENSIVE CARE MANAGEMENT	•	18.00		253.80	I	
	-,,								
				CUSTOMER	225.50	0.00	3,179,55		
							-,		
				CATEGORY	225.50	0.00	3,179.55		
237373	1,19,13	000130	COM REMEMOLVE CARE PANAGEREN.	CUSTOMER	225.50 	0.00	3,179.55		

	04/24/13 - JL # 0330	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE:	R		PAGE 1 PAR PRIVATE BILL WEEK END		7 4/26/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
239376	4/19/13	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I		
239377	4/19/13	000179	DOROTHY TABICKMAN	TABICKMAN, DORT	20.00		310.00	I		
				 CATEGORY	 188.00	0.00	2,986.00			

			YSIDE CITYWIDE						- 308	
SALES JRN	L # 0330	LOC 001	SUNNYSIDE CITYWIDE	REG N	Y NY REGISTER			HHH HHH HOME BILL WEEK END		5/12
				зацьз	KEGISIEK			BILL WEEK END	ING 4/20)/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURE	PLUS
239378	4/19/13	000192	HHH LONG TERM HOME H	HLTH CARE	TOVAR, ELENA	37.00		555.00	I	
					CATEGORY	37.00	0.00	555.00		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 PAR PRIVATE	- 30)9
	"			ES REGISTE	R		BILL WEEK ENI	DING	4/26/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
239379	4/19/13	000205	BILL NANIS	NANIS, KOSTAS	72.00		1,152.00	I	
239380	4/19/13	002215	KEITH SALMON	LAWRANCE, LILLA	16.00		254.00	I	
239381	4/19/13	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
239382	4/19/13	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00		337.50	I	
239383	4/19/13	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
239384	4/19/13	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
239385	4/19/13	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I	
239386	4/19/13	010529	STEPHEN WEISS	WEISS, STELLA	6.00		102.00	I	
239387	4/19/13	010530	DANA SITILDES	ANSELMI, PETER	23.75		374.13	I	
239388	4/19/13	011016	MICHAEL SIANO	SIANO, ANDREW	30.00		405.00	I	
239389	4/19/13	011060	ROBIN WARREN CHARLES	WARREN, CYNTHIA	133.00		2,118.50	I	
239390 239391	4/12/13 4/19/13	011394 011394	HELGA JENSEN HELGA JENSEN	JENSEN, HELGA JENSEN, HELGA	30.00 30.00		480.00 480.00	I I	
				CUSTOMER	60.00	0.00	960.00		
239392	4/19/13	011630	JAMES BENZ	CAGAN, RUMANDO	8.00		124.00	I	
239393	4/19/13	011642	ROSA FLORES	FLORES, ROSA	30.00		465.00	I	
239394	4/19/13	012326	LORRAINE BIANCO-HOPKINS	BIANCO HOPKINS,	16.00		248.00	I	
239395	4/19/13	012565	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
239396	4/19/13	012725	CATHERINE BARLIS	BARLIS, CATHERI	10.00		170.00	I	
239397	4/19/13	012929	JENNA SPERO	SPERO, NICHOLAS	41.00		656.50	I	
				CATEGORY	539.75	0.00	9,710.63		
				LOCATION	29,111.50	0.00	484,833.53		
				COMPANY	29,111.50	0.00	484,833.53		

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SALES JRNL # 0330 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 4/26/13

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

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