RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 6/01/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS BROOKS, NATALIE
CARRILLO, MARIA
COLON, RAYMUNDA
DABU, JUANITA
FENTON, JESSIE
FENTON, JESSIE
GHILIOTTY, FLOR
GRAFSTEIN, LILL
GUTIERREZ, LUCI
HARIDIN, KHAMAT
HARIDIN, KHAMAT
HARIDIN, RAMDIA
HERNANDEZ, FRAN
LEPORE, CLAIRE
MOROCHO, MANUEL
RODRIGUEZ, MARI
SIERRA, MIRIAM
SIMON, LUPE
TORRESCAMPOS, J
VASQUEZ, CORNEL
VIDOT-LINARES,
WOO, LUZ BROOKS, NATALIE 28.00 196083 5/18/12 000082 SENIOR HEALTH PARTNERS 399.00 I 196084 5/25/12 000082 SENIOR HEALTH PARTNERS 35.00 498.75 I SENIOR HEALTH PARTNERS 498.75 I 196085 5/25/12 000082 35.00 1.00 7.75 3.75 196086 5/25/12 000082 SENIOR HEALTH PARTNERS 14.25 196087 5/25/12 000082 SENIOR HEALTH PARTNERS 110.44 196088 5/25/12 000082 SENIOR HEALTH PARTNERS 53.44 196089 5/25/12 000082 SENIOR HEALTH PARTNERS 32.00 456.00 196090 5/25/12 000082 SENIOR HEALTH PARTNERS 7.00 1,400.00 20.00 196091 5/25/12 000082 SENIOR HEALTH PARTNERS 285.00 196092 5/25/12 000082 SENIOR HEALTH PARTNERS 33.00 470.25 1,923.76 196093 5/25/12 000082 SENIOR HEALTH PARTNERS 135.00 196094 5/25/12 000082 SENIOR HEALTH PARTNERS 30.00 427.50 196095 5/25/12 000082 SENIOR HEALTH PARTNERS 6.00 85.50 196096 5/25/12 000082 SENIOR HEALTH PARTNERS 76.00 1,083.00 196097 5/25/12 000082 SENIOR HEALTH PARTNERS 20.00 285.00 196098 5/18/12 SENIOR HEALTH PARTNERS 30.00 427.50 000082 196099 5/25/12 SENIOR HEALTH PARTNERS 8.00 114.00 000082 196100 5/25/12 000082 SENIOR HEALTH PARTNERS 40.00 570.00 5/25/12 SENIOR HEALTH PARTNERS 196101 000082 8.00 114.00 196102 5/25/12 000082 SENIOR HEALTH PARTNERS 25.00 356.25 196103 5/25/12 000082 SENIOR HEALTH PARTNERS 12.00 171.00 196104 5/25/12 000082 SENIOR HEALTH PARTNERS 4.00 57.00 I \_\_\_\_\_ \_\_\_\_\_ 596.50 0.00 9,800.39 CUSTOMER

CATEGORY

596.50 0.00

9,800.39

			YSIDE CITYWIDE				PAGE 1	-	2
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE L		6 (01 /12
				SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196105	5/25/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	56.00		816.48	_	
196105	5/25/12	000008	VISITING NURSE SERVICE	·	12.00		174.96	I	
				·					
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	3 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196107	5/25/12	000008	VISITING NURSE SERVICE	ACOSTA, ALBERTO	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	4
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196108	5/25/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
196109	5/25/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
196110	5/25/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	69.50		1,013.31	I	
				CUSTOMER	129.50	0.00	1,888.11		
				CATEGORY	129.50	0.00	1,888.11		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	5	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			AUR ADULT REHA	B ONLY	
			S	SALES R	EGISTE	R		BILL WEEK ENDI	NG 6/01	L/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT I	YP SURI	PLUS
196111	5/25/12	800000	VISITING NURSE SERVICE	ADUN,	JEANETTE	56.00		816.48	I	
					 CATEGORY	56.00	0.00	816.48		

	05/30/12 - L # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	6
511225 6141	_	200 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196112	5/25/12	800000	VISITING NURSE SERVICE	AFZAL, AMIR	3.50		51.03 I	
				CATEGORY	3.50	0.00	51.03	

			YSIDE CITYWIDE	DDG 199			PAGE 1 -	7
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196113 196114	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	AGUILAR, RAFAEL AGUILAR, RAFAEL	0.75 3.00		10.94 I 43.74 I	
				CUSTOMER	3.75	0.00	54.68	
				CATEGORY	3.75	0.00	54.68	

RUN DATE SALES JRN				REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOMEV BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196115	5/25/12	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		656.10 I	
				CATEGORY	45.00	0.00	 656.10	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	9
SALES UKK	11 # 0203	HOC 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196116 196117	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	AGUILAR-PROCE, AKBAR, NASEEM	18.00 20.00		262.44 I 291.60 I	
				CUSTOMER	38.00	0.00	554.04	
				CATEGORY	38.00	0.00	554.04	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	LO
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	,
			5	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196118	5/18/12	000008	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
196119	5/25/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	35.00		510.30	I	
				CUSTOMER	40.00	0.00	583.20		
				CATEGORY	40.00	0.00	583.20		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	1
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196120	5/25/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	30.00		437.40 I	
196121	5/25/12	800000	VISITING NURSE SERVICE	ALMANZAR, REMIG	4.00		58.32 I	
				CUSTOMER	34.00	0.00	495.72	
				CATEGORY	34.00	0.00	495.72	

			YSIDE CITYWIDE				PAGE 1 -	12
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196122	5/25/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDING	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196123	5/25/12	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 05/30/12 SALES JRNL # 0283	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 14	
BILLES SIGNE II SESS	100 001		SALES REGISTER			BILL WEEK END	ING 6/01/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
196124 5/25/12 196125 5/25/12 196126 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ANDRADE, LOLA ANDREWS, JOHNNI ANGRISANO, RUTH	12.00 56.00 19.75		174.96 816.48 287.96	I I I	
			CUSTOMER	87.75	0.00	1,279.40		
			CATEGORY	87.75	0.00	1,279.40		

			YSIDE CITYWIDE					15
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196127	5/25/12	800000	VISITING NURSE SERVICE	ANGULO, ELCY	19.75		287.96 I	
				CATEGORY	19.75	0.00	287.96	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	16 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196128	5/25/12	800000	VISITING NURSE SERVICE	ANSELMI, PETER	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	17
SALES JRN	L # 0283	LOC 001		REG NY NY			LTC NURSING HOM	•
			\$	SALES REGISTER			BILL WEEK ENDIN	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196129	5/25/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	60.75		885.74	-
				CATEGORY	60.75	0.00	885.74	

RUN DATI	E 05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	18
SALES J	RNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			S	SALES REGISTE	R		BILL WEEK ENDIN	IG 6/01/12
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196130	5/25/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	29.50		430.11	
				- CATEGORY	 29.50	0.00	430.11	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	19
SALES U.	XIII # U203	LOC 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196131	5/25/12	800000	VISITING NURSE SERVICE	APPELL, LAWRENC	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE 05/30	/12 - SUP SUN	YSIDE CITYWIDE				PAGE 1 -	20
SALES JRNL # 0	283 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	!SA
		S	ALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE# DATE	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196132 5/25	/12 000008	VISITING NURSE SERVICE	ARIAS, LEOPOLDI	12.00		174.96	I
196133 5/25	/12 000008	VISITING NURSE SERVICE	ARIAS, MAGDALEN	46.00		670.68	I
			CUSTOMER	58.00	0.00	845.64	
			CATEGORY	58.00	0.00	845.64	

RUN DATE (		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	21
SALES UKNI	ц <sub>#</sub> 0203	LOC 001		SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196134 196135	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	23.00 12.00		335.34 I 174.96 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
196136 196137 196138	5/11/12 5/18/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ASHLEY, CLYDE ASHLEY, CLYDE ASHLEY, CLYDE	10.00 7.00 49.00		145.80 102.06 714.42	I I I
				CUSTOMER	66.00	0.00	962.28	
				CATEGORY	66.00	0.00	962.28	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	23
SALES JRN	1L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196139	5/25/12	800000	VISITING NURSE SERVICE	AVILA, ENIDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

ı	RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	24
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/01/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	196140	5/25/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	19.75		287.96 I	
ı									
ı									
ı					CATEGORY	19.75	0.00	287.96	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	25
SALES OWN	ш # 0203	100 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
196141	5/25/12	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE	1 -	26
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE		NY			ADU ADULT		
				SALES R	EGISTER			BILL WEEK	ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUN	T TYP	SURPLUS
196142	5/25/12	800000	VISITING NURSE SERVICE	BAEZ,	JUAN	34.00		495.7	2 I	
					CATEGORY	34.00	0.00	495.7	 2	

			YSIDE CITYWIDE				PAGE 1 -	<b>-</b> /
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK END	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
196143	5/25/12	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	30.00		437.40	I
196144	5/25/12	000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	56.00		816.48	I
196145	5/25/12	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	45.00		656.10	I
196146	5/11/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		102.06	I
196147	5/25/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	42.00		612.36	I
				CUSTOMER	180.00	0.00	2,624.40	
				CATEGORY	180.00	0.00	2,624.40	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	8
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196148	5/25/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		29
SALES URN	L # U203	LOC UUI		SALES REGISTER			BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196149 196150	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		151.00		2,201.58 43.74	I	
				CUSTOMER	154.00	0.00	2,245.32		
				CATEGORY	154.00	0.00	2,245.32		

			YSIDE CITYWIDE				PAGE 1	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				IOMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	OING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
196151	5/25/12	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	24.00		349.92	I
196152	5/25/12	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	30.75		448.34	I
				CUSTOMER	54.75	0.00	798.26	
				CATEGORY	54.75	0.00	798.26	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	31
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196153	5/25/12	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	47.75		696.20 I	
				CATEGORY	47.75	0.00	696.20	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	ъ # 0283	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196154	5/25/12	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3:	3
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196155	5/25/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	21.25		309.83 I	
				CATEGORY	21.25	0.00	309.83	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34	
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA	
			5	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
196156	5/25/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	22.25		324.41	I	
				CATEGORY	22.25	0.00	324.41		

RUN DATE 05/30/12 - SALES JRNL # 0283	- SUP SUNI LOC 001	SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - 35 ADU ADULT BILL WEEK ENDING 6/	01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
196157 5/04/12 196158 5/25/12 196159 5/18/12 196160 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BOCANEGRA, GLAD BOCANEGRA, GLAD BONILLA, ESPERA BONILLA, ESPERA	4.00 20.00 7.00 49.00		58.32 I 291.60 I 102.06 I 714.42 I	
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	IL # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196161	5/25/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	37
SALES JRN	L # 0283	LOC 001		REG NY NY			LTC NURSING HOMEW	•
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196162	5/25/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
				CATEGORY	25.00	0.00	 364.50	

			YSIDE CITYWIDE					38
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AUR ADULT REHAB ON BILL WEEK ENDING	NLY 6/01/12
				SALES REGISIER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
106160	E / 0 E / 1 0				- 00		<b>50.00</b> -	
196163	5/25/12	000008	VISITING NURSE SERVICE	BORSARI, ANTOIN	5.00		72.90 I	
				CATEGORY	5.00	0.00	72.90	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	39
SALES JRN	ъ # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196164	5/25/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 05/30/1 SALES JRNL # 028		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 4 LTC NURSING HOMEW, BILL WEEK ENDING	40 /O WALLS (LT 6/01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196165 5/18/1 196166 5/25/1		VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 35.50		87.48 I 517.59 I	
			CUSTOMER	41.50	0.00	605.07	
			CATEGORY	41.50	0.00	605.07	

RUN	DATE (	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SAL	ES JRNI	և # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				i	SALES REGISTER			BILL WEEK ENDING	6/01/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196	167	5/25/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	61.00		889.38 I	
					CATEGORY	61.00	0.00	889.38	

RUN D	ATE 05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 4:	2
SALES	JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOI	CEH DAME	GIIGH NO	CHOMOMED NAME	DEFEDENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	IAX AMI	AMOUNT TYP	SURPLUS
19616	8 5/25/12	000008	VISITING NURSE SERVICE	BROWN, BETTY	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 43 VCP CHOICE LHCSA BILL WEEK ENDING 6/01/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
196169	5/25/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		LOC 001		REG NY NY LES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196170	5/25/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			TYSIDE CITYWIDE				PAGE 1 -		
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LAD NURSING HO	OME W/O WALLS L' ING 6/01/12	Г
			'				DIDD WEEK END	0/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS	
196171	5/25/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 46	
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING 6/0	1/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	RPLUS
196172	5/25/12	800000	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

	TE 05/30/12 JRNL # 0283		IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	47
DIALLO (	71412    0203	100 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196173	5/25/12	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		48
	2 11 0200	200 001		SALES REGISTER			BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196174	5/25/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.50		634.24	I	
196175	5/18/12	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	6.00		87.48	I	
196176	5/25/12	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	42.00		612.36	I	
				CUSTOMER	91.50	0.00	1,334.08		
				CATEGORY	91.50	0.00	1,334.08		

l	RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	49	
l	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	ſ	
				5	SALES REGISTER			BILL WEEK ENDING	6/01/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	196177	5/25/12	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54 I		
					CATEGORY	63.00	0.00	918.54		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	. –	50
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			i	SALES REGI	STER		BILL WEEK EN	IDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196178	5/25/12	800000	VISITING NURSE SERVICE	CAMBARA, J	OSEFA 56.00		816.48	I	
								_	
				CATE	GORY 56.00	0.00	816.48		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196179	5/25/12	800000	VISITING NURSE SERVICE	CANDIDO, ELENA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE (	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	52
SALES JRNI	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196180	5/25/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE					11102	1 -	53
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY SALES R	NY EGISTEI	?		ADU ADULT BILL WEEK E	NDTNG	6/01/12
				-				DIED WEEK E	, DIIIO	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196181	5/25/12	000008	VISITING NURSE SERVICE	CANO,	GLORIA	15.00		218.70	I	
									_	
					CATEGORY	15.00	0.00	218.70		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
SALES JRN	NL # 0283	LOC 001		REG NY NY			VCP CHOICE LHC	
			:	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196182	5/25/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	81.00		1,180.98	I
				CATEGORY	81.00	0.00	1,180.98	

RUN DATE (	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	55
SALES JRNI	L # 0283	LOC 001		REG NY NY			LTC NURSING HOMEW	·
			•	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196183	5/25/12	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		56
				SALES REGISTED	R		BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196184	5/11/12	800000	VISITING NURSE SERVICE	CARDONA, MARIA	10.00		145.80	I	
196185	5/25/12	800000	VISITING NURSE SERVICE	CARDONA, MARIA	15.75		229.64	I	
196186	5/25/12	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	47.00		685.26	I	
196187	5/25/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	31.00		451.98	I	
196188	5/25/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	19.00		277.03	I 	
				CUSTOMER	122.75	0.00	1,789.71		
				CATEGORY	122.75	0.00	1,789.71		

RU.	N DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	57
SA	LES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	Γ
				5	SALES REGISTER			BILL WEEK ENDING	6/01/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19	6189	5/25/12	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	58 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196190	5/25/12	800000	VISITING NURSE SERVICE	CARRENO, CRISTI	21.75		317.12 I	
				CATEGORY	21.75	0.00	317.12	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196191	5/25/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	56.00		816.48 I	
				CATEGORY	56.00	0.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	60 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196192	5/25/12	800000	VISITING NURSE SERVICE	CASTANO, MARIA	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	

	05/30/12 - JL # 0283			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
196193	5/25/12	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62	
SALES JRN	L # 0283	LOC 001		REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
196194	5/25/12	800000	VISITING NURSE SERVICE	CELIO, MARION	3.00		43.74 I		
				CATEGORY	3.00	0.00	43.74		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	63	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L			
			S	ALES REG	ISTER		BILL WEEK EN	DING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEREN	CE HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196195	5/25/12	800000	VISITING NURSE SERVICE	CERNILLI	, MARIA 34.75		506.66	I		
				CA	TEGORY 34.75	0.00	506.66			

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196196 196197 196198 196199	4/06/12 5/11/12 5/18/12 5/25/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CHAPPLE, VICKIE	4.00 4.00 9.00 18.50		58.32 1 58.32 1 131.22 1 269.73 1	
150155	3/23/12	000000	VIDITING NORDE DERVICE	CUSTOMER	35.50	0.00	517.59	
				CATEGORY	35.50	0.00	517.59	

			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
196200	5/25/12	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DAT	E 05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	66
SALES J	RNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDING	G 6/01/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
196201	5/25/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

ı	RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	67
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				5	SALES REGISTER			BILL WEEK ENDING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196202	5/25/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	70.00		1,020.60 I	
					CATEGORY	70.00	0.00	1,020.60	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	68
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196203	5/25/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRN	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196204	5/25/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DAT	E 05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	70
SALES J	RNL # 0283	LOC 001		REG NY NY				MEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	YP SURPLUS
196205	5/25/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40	I
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 -	. =
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK ENDI	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP SURPLUS
196206	5/25/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	55.75		812.84	I
196207	5/25/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I
196208	5/25/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	27.25		397.31	I
				CUSTOMER	123.00	0.00	1,793.35	
				CATEGORY	123.00	0.00	1,793.35	

ı	RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	72	
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW		
				:	SALES REGISTER			BILL WEEK ENDING	6/01/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	196209	5/25/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.50		823.77 I		
ı										
ı					CATEGORY	56.50	0.00	823.77		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	73 IG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196210	5/25/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48	
				CATEGORY	6.00	0.00	 87.48	

			YSIDE CITYWIDE				11100	- 7	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE:	D		LTC NURSING I	,	O WALLS (LT 6/01/12
				SALES REGISIE	K.		DILL MEEV EN	DING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
100011	E /0E /10				10.00		0.7.7.00	_	
196211	5/25/12	800000	VISITING NURSE SERVICE	COLLER, FELISA	19.00		277.02	Τ	
196212	5/25/12	800000	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I	
196213	5/25/12	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I	
196214	5/25/12	000008	VISITING NURSE SERVICE	COLON, ISABEL	28.00		408.24	I	
				CUSTOMER	104.00	0.00	1,516.32		
				CATEGORY	104.00	0.00	1,516.32		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 75	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196215	5/25/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				 CATEGORY	168.00	0.00	2,449.44	

RUN DATE SALES JRN				REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196216	5/25/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	77
SALES JRN	rL # 0283	LOC 001		REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196217	5/25/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	8
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196218	5/18/12	000008	VISITING NURSE SERVICE	COSTA, ARSENE	18.00		262.44	I	
196219	5/25/12	800000	VISITING NURSE SERVICE	COSTA, ARSENE	40.00		583.20	I	
				CUSTOMER	58.00	0.00	845.64		
				CA EECODY		0.00	045.64		
				CATEGORY	58.00	0.00	845.64		

		SUP SUNN	YSIDE CITYWIDE	REG NY NY			-	79
SALES JRNI	J # UZ83	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	COTTON, MARCUS COVALIU, SIMION	1.00 29.50		14.58 I 430.12 I	
				CUSTOMER	30.50	0.00	444.70	
				CATEGORY	30.50	0.00	444.70	

			YSIDE CITYWIDE					PAGE 1	- 8	0	
SALES JRNI	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE	_		
			2	SALES R	EGISTER			BILL WEEK EN	DING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196222	5/25/12	800000	VISITING NURSE SERVICE	COX,	PETRA	17.50		255.15	I		
					CATEGORY	17.50	0.00	255.15			

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 - 81	-
SALES JRN	L # U283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196223 196224	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 9.00		131.22 I 131.22 I	
				CUSTOMER	18.00	0.00	262.44	
				CATEGORY	18.00	0.00	262.44	

ı	RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	82
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
ı				Ş	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	196225	5/25/12	800000	VISITING NURSE SERVICE	CRUZ, HECTOR	38.75		564.98 I	
ı									
ı									
ı					CATEGORY	38.75	0.00	564.98	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	83
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196226	5/25/12	000008	VISITING NURSE SERVICE	CRUZ, JUANA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 05/30/12			DDG NV NV				- 8	
SALES JRNL # 0283	LOC 001		REGNY NY SALES REGISTER			LTC NURSING BILL WEEK EN		6/01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196227 5/25/12		VISITING NURSE SERVICE	•	25.00		364.50	I	
196228 5/25/12	000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	56.00		816.48		
			CUSTOMER	81.00	0.00	1,180.98		
			CATEGORY	81.00	0.00	1,180.98		

			YSIDE CITYWIDE				11101	-	85
SALES JRN	IL # 0283	LOC 001		REG NY NY			VCP CHOICE L		
			S	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196229	5/25/12	000008	VISITING NURSE SERVICE	DAVIS, LOUELLEN	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88	-	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - { ADU ADULT BILL WEEK ENDING	86
INVOICE#	DATE	CUST NO	-	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196230	5/25/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING	– 8 HOMEW/	
				SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196231 196232	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	37.00 35.75		539.46 521.24	I	
190232	3/23/12	000008	VISITING NURSE SERVICE	DELIACRUZ, SEFER	35.75		521.24		
				CUSTOMER	72.75	0.00	1,060.70		
				CATEGORY	72.75	0.00	1,060.70		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		88
BALLS OIL	11 H 0203	HOC 001		SALES REGISTER			BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196233	5/25/12	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	30.00		437.40	I	
196234 196235	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	DELPOZO, MIGUEL DELUCA, ANTIONE	4.00 28.00		58.32 408.24	I I	
				CUSTOMER	62.00	0.00	903.96		
				COSTOMER	02.00	0.00	903.90		
				CATEGORY	62.00	0.00	903.96		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	89	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW		
			·	SALES REGISTER			BILL WEEK ENDING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
196236	5/25/12	000008	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30 I		
				CATEGORY	35.00	0.00	510.30		

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	90
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			:	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196237	5/25/12	000008	VISITING NURSE SERVICE	DEZUMARAN, REBE	44.75		652.46	I
196238	5/25/12	000008	VISITING NURSE SERVICE	DIAZ, MARIA	34.25		499.38	I
196239	5/25/12	800000	VISITING NURSE SERVICE	DIAZ, OLGA	42.00		612.36	I
				CUSTOMER	121.00	0.00	1,764.20	
				CATEGORY	121.00	0.00	1,764.20	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	-	91
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			ADU ADULT		
				SALES R	EGISTER			BILL WEEK END	ING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
106040	F / O F / 1 O	000000		5.7.7	2003	40.00		610 26	_	
196240	5/25/12	000008	VISITING NURSE SERVICE	DIAZ,	ROSA	42.00		612.36	Τ	
					CARRICODY	42.00	0.00	610.26		
					CATEGORY	42.00	0.00	612.36		

			YSIDE CITYWIDE				PAGE 1		92
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196241	5/25/12	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI	70.00		1,020.60	I	
196242	5/25/12	000008	VISITING NURSE SERVICE	,	41.75		608.72	I	
196243	5/25/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60		
				CUSTOMER	131.75	0.00	1,920.92		
				CATEGORY	131.75	0.00	1,920.92		

RUN DATE ( SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196244 196245	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- , -	16.00 40.00		233.28 583.20	I	
				CUSTOMER	56.00	0.00	816.48		
				– CATEGORY	56.00	0.00	816.48		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	94
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196246	5/25/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 95	
SALES JRN	IL # 0283	LOC 001		REG NY NY			VCP CHOICE LHO		
			:	SALES REGISTER			BILL WEEK END	ING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	
196247	5/25/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	42.75		623.30	I	
				CATEGORY	42.75	0.00	623.30		

	ATE 05/30/12 JRNL # 0283	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	96 6/01/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19624	8 5/25/12	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 97	7
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	SA	
			S	SALES REGISTER			BILL WEEK ENDI	NG	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP	SURPLUS
196249	5/25/12	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32	I	
				CATEGORY	4.00	0.00	 58.32		

ı	RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 98	
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE P	ROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING 6/	01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
	196250	5/25/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- :	99	
SALES JRN	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA		
			S	SALES	REGISTER			BILL WEEK EN	DING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196251	5/25/12	000008	VISITING NURSE SERVICE	ESF	EJO, FLORENC	12.00		174.96	I		
					CATEGORY	12.00	0.00	174.96			

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10	0
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
105050	5 / O 5 / 1 O				<b>54.00</b>		505.00	
196252	5/25/12	800000	VISITING NURSE SERVICE	ESPIN, CESAR	54.00		787.32 I	
				CATEGORY	54.00	0.00	787.32	
1				CALEGORY	54.00	0.00	101.32	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 10	1
SALES OWN	IL # 0203	HOC 001		SALES REGISTER			BILL WEEK END		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196253 196254	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ESPINAL, JOSE EVERETT, SHIRLE	9.00 21.00		131.22 306.18	I	
				CUSTOMER	30.00	0.00	437.40		
				CATEGORY	30.00	0.00	437.40		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	)2
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			2	SALES REGISTER			BILL WEEK ENI	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196255	5/25/12	000008	VISITING NURSE SERVICE	FADEN, ROBIN	70.00		1,020.60	I	
196256	5/25/12	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	11.75		171.32	I	
				CUSTOMER	81.75	0.00	1,191.92		
				CATEGORY	81.75	0.00	1,191.92		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	103
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	Γ
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196257	5/25/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

	05/30/12 - L # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	104
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
196258	5/25/12	800000	VISITING NURSE SERVICE	FAY, JULIA	23.00		335.34 I	
				CATEGORY	23.00	0.00	335.34	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
196259	5/25/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 106	5
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196260	5/25/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE (	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10'	7
SALES JRNI	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196261	5/25/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	08
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196262	5/25/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 109	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALL	S (LT
			:	SALES REGISTER			BILL WEEK ENDING 6/01/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
196263	5/11/12	000008	VISITING NURSE SERVICE	FIUMARA, ROSE	8.00		116.64 I	
196264	5/25/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	20.75		302.54 I	
196265	5/25/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	8.00		116.64 I	
				CUSTOMER	36.75	0.00	535.82	
				CATEGORY	36.75	0.00	535.82	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	110
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196266	5/25/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 05 SALES JRNL		P SUNNY	SIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI		1 6/01/12
INVOICE#	DATE CU	ST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP	SURPLUS
196268	5/25/12 00	8000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	FOLLETTO, ROSIN FONG, ALEFINA FONTEBOA, GUILL	34.50 4.00 29.75		503.01 58.32 433.76	I I I	
				CUSTOMER	68.25	0.00	995.09		
				CATEGORY	68.25	0.00	995.09		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	110
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
196270	5/25/12	800000	VISITING NURSE SERVICE	FRADELAKIS, EVA	27.00		393.66	I
				CATEGORY	27.00	0.00	393.66	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 113	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	BALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196271	5/25/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 - 1	114
SALES JRN	L # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	6 (01 (10
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196272	5/25/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

			YSIDE CITYWIDE				PAGE 1	
SALES JRNL	# 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK END	DING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
196273	5/25/12	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	45.50		663.39	I
196274	5/25/12	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	10.00		145.80	I
				CUSTOMER	55.50	0.00	809.19	
				CATEGORY	55.50	0.00	809.19	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	116	
SALES JRN		LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA	
			S	ALES REGISTER			BILL WEEK ENDI	NG 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
196275	5/25/12	000008	VISITING NURSE SERVICE	GAID, ASILA	35.00		510.30	I	
196276	5/25/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	34.00		495.72	I	
196277	5/25/12	000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	41.50		605.07	I	
196278	5/25/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I	
				CUSTOMER	119.50	0.00	1,742.31		
				CATEGORY	 119.50	0.00	1,742.31		

· ·	0/12 - SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				- 117
SALES JRNL #	0283 LOC 001		REGNY NY SALES REGISTER			BILL WEEK EN	HOMEW/O WALLS (LT DING 6/01/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
	25/12 000008	VISITING NURSE SERVICE	•	37.25		543.11	I
196280 5/2	25/12 000008	VISITING NURSE SERVICE	GARAY, ANGELES	12.00		174.96	
			CUSTOMER	49.25	0.00	718.07	
			CATEGORY	49.25	0.00	718.07	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 118	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 6	/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
196281	5/25/12	800000	VISITING NURSE SERVICE	GARCIA, CONCEPC	38.00		554.04 I	
				CATEGORY	38.00	0.00	554.04	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
SALES URN	L # U203	LOC UUI		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196282	5/25/12	800000	VISITING NURSE SERVICE	GARCIA, JESUS	15.25		222.35 I	
				CATEGORY	15.25	0.00	222.35	

E CITYWIDE			PAGE 1	- 120
NNYSIDE CITYWIDE REG NY NY	ď.		LTC NURSING	HOMEW/O WALLS (LT
SALES RE	GISTER		BILL WEEK EN	DING 6/01/12
TOMER NAME REFERI	ENCE HOURS	TAX AMT	AMOUNT	TYP SURPLUS
ITING NURSE SERVICE GARCIA	, OLGA 30.50		444.69	I
ITING NURSE SERVICE GEBHARI	DT, DOROT 34.00		495.72	I
(	CUSTOMER 64.50	0.00	940.41	
,		0.00	940 41	
N. T	NYSIDE CITYWIDE REG NY NY S A L E S R E OMER NAME REFERI TING NURSE SERVICE GARCIA TING NURSE SERVICE GEBHARI	NYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  OMER NAME REFERENCE HOURS  TING NURSE SERVICE GARCIA, OLGA 30.50 TING NURSE SERVICE GEBHARDT, DOROT 34.00  CUSTOMER 64.50	NYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  OMER NAME REFERENCE HOURS TAX AMT  TING NURSE SERVICE GARCIA, OLGA 30.50 TING NURSE SERVICE GEBHARDT, DOROT 34.00	NYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  OMER NAME  REFERENCE HOURS TAX AMT  AMOUNT  TING NURSE SERVICE GARCIA, OLGA 30.50 TING NURSE SERVICE GEBHARDT, DOROT 34.00  CUSTOMER 64.50  CUSTOMER 64.50  0.00  940.41

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	1
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196285	5/25/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.00		714.42 I	
				CATEGORY	49.00	0.00	 714.42	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	122
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196286	5/25/12	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	48.50		707.13 I	
				CATEGORY	48.50	0.00	707.13	

			YSIDE CITYWIDE				PAGE 1	- 12	23
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		C (01 (10
			i	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196287	5/25/12	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	56.00		816.48	I	
196288	5/25/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.50		371.79	I	
				CUSTOMER	81.50	0.00	1,188.27		
				CATEGORY	81.50	0.00	1,188.27		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	24
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196289	5/25/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I	
196290	5/25/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	29.25		426.47	I	
							026 55		
				CUSTOMER	64.25	0.00	936.77		
				CATEGORY	64.25	0.00	936.77		

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.25
0111111	_	200 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196291	5/25/12	800000	VISITING NURSE SERVICE	GOMEZ-VIDAL, AL	7.75		113.00 I	
				CATEGORY	7.75	0.00	113.00	

			YSIDE CITYWIDE				PAGE 1 - 3	126
SALES JI	RNL # 0283	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
INVOICE;	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196292	5/25/12	000008	VISITING NURSE SERVICE	GONGORA, MARUJA	12.00		174.96 I	
				CATEGORY	12.00	0.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 127 ADU ADULT	
Brilles order	L    0203	100 001		SALES REGISTER			BILL WEEK ENDING 6/01	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	PLUS
196293	5/25/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

				REG NY NY LES REGISTER			PAGE 1 - 128 VCP CHOICE LHCSA BILL WEEK ENDING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
196294	5/25/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	30.00		437.40 I
				CATEGORY	30.00	0.00	437.40

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196295	5/25/12	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 05/30/12 SALES JRNL # 0283		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 13 LTC NURSING HOMEW/ BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196296 5/25/12 196297 5/25/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 21.00		437.40 I 306.18 I	
			CUSTOMER	51.00	0.00	743.58	
			 CATEGORY	51.00	0.00	743.58	

RUN DATE	05/30/12 -		YSIDE CITYWIDE				PAGE 1 -	131
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	-
			i	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196298	5/25/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	4.00		58.32	I
196299	5/25/12	800000	VISITING NURSE SERVICE	GRAVER, EDNA	40.00		583.20	I
				CUSTOMER	44.00	0.00	641.52	
				CATEGORY	44.00	0.00	641.52	
				CAILGORI	44.00	0.00	041.52	

			YSIDE CITYWIDE				PAGE 1 - 132	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	-
			5	SALES REGISTER			BILL WEEK ENDING 6/01/12	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
196300	5/25/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	8.00		116.64 I	
								_
				CATEGORY	8.00	0.00	116.64	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 133	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS ADULT	POPUL
				SALES REGISTER			BILL WEEK ENDING 6/01/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
111101011	21112	0001 1.0	0001011011	TEL ETELLOS	110 0110		11100111 111 201112	0.0
196301	5/25/12	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 13	4
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
				SALES REGISTER			BILL WEEK ENDI	NG	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP	SURPLUS
196302	5/25/12	000008	VISITING NURSE SERVICE	GUAMBI, CONCEPC	1.00		14.58	I	
196303	5/25/12	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	82.00		1,195.56	I	
196304	5/25/12	800000	VISITING NURSE SERVICE	GUTHRIE, LORETH	9.00		131.22	I	
196305	5/25/12	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	83.50		1,217.44	I	
				CUSTOMER	175.50	0.00	2,558.80		
				CATEGORY	175.50	0.00	2,558.80		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	35
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196306	5/25/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 136	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196307	5/25/12	000008	VISITING NURSE SERVICE	HENAO, VICTORIA	20.00		291.60 I	
196308	5/25/12	800000	VISITING NURSE SERVICE	HENDY, BERNICE	28.75		419.18 I	
				CUSTOMER	48.75	0.00	710.78	
				COSTONER	10.75	0.00	710.70	
				CATEGORY	48.75	0.00	710.78	

	05/30/12 - JL # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1: ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196309	5/25/12	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13	38
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196310	5/25/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 139
SALES JRN	L # 0283	LOC 001		REG NY NY				OMEW/O WALLS (LT
			\$	SALES REGISTER			BILL WEEK END:	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
196311	5/25/12	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	30.00		437.40	I
196312	5/25/12	800000	VISITING NURSE SERVICE	HERRERA, HORACI	18.00		262.44	I
196313	5/25/12	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	41.00		597.78	I
							1 005 60	
				CUSTOMER	89.00	0.00	1,297.62	
				CATEGORY	89.00	0.00	1,297.62	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	40
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196314	5/25/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	TE 05/30/12 - JRNL # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1	41
	,14.12    0100	200 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196315	5/25/12	800000	VISITING NURSE SERVICE	ICIANO, ALFREDO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 - :	
SALES JRN	NL # 0283	LOC 001		REG NY NY			LAA LOMBARDI AID	
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196316	5/25/12	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10 I	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	143
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196317	5/25/12	800000	VISITING NURSE SERVICE	INSERRA, CATHER	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

			YSIDE CITYWIDE				PAGE 1 -	
SALES	JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
			•	SALES REGISIER			BILL MEEK ENDING	0/01/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196318	5/25/12	800000	VISITING NURSE SERVICE	INSERRA, CATHER	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : ADU ADULT	145
DALLO OIGN.	L # 0203	100 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196319	5/25/12	000008	VISITING NURSE SERVICE	INZALACO, ANGEL	2.50		36.45 I	
				CATEGORY	2.50	0.00	36.45	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	146
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196320	5/25/12	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	147
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S A	ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196321	5/25/12	800000	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	38.00		554.04 I	
				CATEGORY	38.00	0.00	554.04	

RUN DATE SALES JRN		- SUP SUNN LOC 001	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER	2		PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
196322 196323 196324 196325	5/25/12 5/25/12 5/25/12 5/25/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JARA DEURUCHIM, JARAMILLO PAL, JEWAT, LUCILLE JHAVERI, RAMESH	10.00 4.75 76.25 24.00		145.80 69.26 1,111.73 349.92	I I I
				CUSTOMER	115.00	0.00	1,676.71	
				CATEGORY	115.00	0.00	1,676.71	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
0111111	_    0200	200 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196326	5/25/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
1				CATEGORY	70.00	0.00	1,020.60	

		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 150 LTC NURSING HOMEW/O WA	т.т.9. / т.т
	1010 H 0203	100 001		SALES REGISTER			BILL WEEK ENDING 6/0	,
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
196327	5/25/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	22.00		320.76 I	
				CATEGORY	22.00	0.00	320.76	

ı	RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.51
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				S	SALES REGISTER			BILL WEEK ENDING	6/01/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	196328	5/25/12	800000	VISITING NURSE SERVICE	JIMENEZ, BETTY	25.00		364.50 I	
ı									
ı									
ı					CATEGORY	25.00	0.00	364.50	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 152 ADU ADULT
SALES OWN	H 0203	100 001		ALES REGISTER			BILL WEEK ENDING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
196329	5/25/12	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	20.00		291.60 I
				CATEGORY	20.00	0.00	291.60

				YSIDE CITYWIDE				PAGE 1 -	
5	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCS BILL WEEK ENDIN	
					SALES REGISIER			PILL MEEK ENDIN	G 6/01/12
I	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
1	196330	5/25/12	000008	VISITING NURSE SERVICE	JOHNSON, FANNY	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	54
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196331	5/25/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	23.00		335.35	I	
196332	5/25/12	800000	VISITING NURSE SERVICE	JORRIN, NILIO	33.75		492.08	I	
							005.43		
				CUSTOMER	56.75	0.00	827.43		
				CATEGORY	56.75	0.00	827.43		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI	- 15	55
	_			SALES REGISTER			BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196333	5/25/12	000008	VISITING NURSE SERVICE	KAUR, SARD	16.00		233.28	I	
196334	5/25/12	800000	VISITING NURSE SERVICE	KAUR, SHARAN	51.00		743.58	I	
196335	5/25/12	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	15.75		229.64	I	
				CUSTOMER	82.75	0.00	1,206.50		
				CATEGORY	82.75	0.00	1,206.50		

RUN	DATE 05/30/12	2 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 15	6
SALE	S JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ON	LY
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1963	36 5/25/12	2 000008	VISITING NURSE SERVICE	KEHOE, ELIZABET	5.75		83.84 I	
				 CATEGORY	5.75	0.00	83.84	

			YSIDE CITYWIDE				PAGE 1 - 157	1
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196337	5/25/12	800000	VISITING NURSE SERVICE	KHAN, MARGARET	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	58
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			:	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196338	5/25/12	000008	VISITING NURSE SERVICE	KILIMLIAN, PEPR	48.00		699.84	I	
196339	5/25/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	56.00		816.48	I	
				CUSTOMER	104.00	0.00	1,516.32		
				CATEGORY	104.00	0.00	1.516.32		
				CUSTOMER CATEGORY	104.00	0.00	1,516.32  1,516.32		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 159	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING 6	/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
196340	5/25/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	0
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196341	4/06/12	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	8.00		116.64	I	
196342	5/25/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	56.00		816.48	I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE 05/30/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER	2		PAGE 1 - 3 ADU ADULT BILL WEEK ENDING	6/01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196343 5/25/ 196344 5/18/ 196345 5/25/	12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LASAK, MICHAEL LEBRON, TIRSO LEBRON, TIRSO	9.00 4.00 23.00		131.22 I 58.32 I 335.34 I	
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 162	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (L	T
			S	SALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196346	5/25/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	24.00		349.92 I	
196347	5/18/12	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	3.75		54.68 I	
196348	5/25/12	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	15.75		229.64 I	
				CUSTOMER	43.50	0.00	634.24	
				CATEGORY	43.50	0.00	634.24	

RUN DATE 05/3 SALES JRNL #			REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	CSA	3 6/01/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196350 5/2	5/12 000008 5/12 000008 5/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LIRIANO, FRANCI LITSAS, MARTHA	56.00 68.00 20.00		816.48 991.44 291.60	I I I	
			CUSTOMER	144.00	0.00	2,099.52		
			CATEGORY	144.00	0.00	2,099.52		

RUN DATE 05/	/30/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 164
SALES JRNL ‡	# 0283 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK END	ING 6/01/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
	/18/12 000008 /25/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LLANES, ELEAZER LLANES, ELEAZER	21.00 27.75		306.18 404.60	I I
			CUSTOMER	48.75	0.00	710.78	
			CATEGORY	48.75	0.00	710.78	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 165
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
196354	5/18/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I
196355	5/25/12	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	56.00		816.48	I
196356	5/25/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	42.00		612.36	I
				CUSTOMER	106.00	0.00	1,545.48	
				CATEGORY	106.00	0.00	1,545.48	

			YSIDE CITYWIDE				11102	- 16	6
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		6 (01 (10
			2	SALES REGISTER			BILL WEEK END	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196357	5/18/12	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	6.00		87.48	I	
196358	5/18/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	9.00		131.22	I	
196359	5/25/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	70.00		1,020.60	I	
				CUSTOMER	85.00	0.00	1,239.30		
				CATEGORY	85.00	0.00	1,239.30		

ı	RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	57
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
ı				Ş	SALES REGISTER			BILL WEEK ENDING	6/01/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	196360	5/25/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	42.00		612.36 I	
ı									
ı						40.00			
ı					CATEGORY	42.00	0.00	612.36	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	168
SALES JRN	ъ # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			:	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196361	5/25/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	34.75		506.66 I	
196362	5/25/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	11.75		171.32 I	
				CUSTOMER	46.50	0.00	677.98	
				CATEGORY	46.50	0.00	677.98	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 169 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
196363	5/25/12	000008	VISITING NURSE SERVICE	LOPEZ, MARIA	41.50		605.07 I
				CATEGORY	41.50	0.00	605.07

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	170	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
196364	5/25/12	800000	VISITING NURSE SERVICE	LOPEZDELCASTIL,	10.00		145.80 I		
				CATEGORY	10.00	0.00	145.80		

RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE	PAGE 1 - 171
SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	ADU ADULT
SALES REGISTER	BILL WEEK ENDING 6/01/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TO	AX AMT AMOUNT TYP SURPLUS
196365 5/25/12 000008 VISITING NURSE SERVICE LOPEZDELCASTIL, 10.00	145.80 I
196366 5/25/12 000008 VISITING NURSE SERVICE LOZADA, LAURA 9.00	131.22 I
CUSTOMER 19.00	0.00 277.02
CATEGORY 19.00	0.00 277.02

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	172
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE	CARE PROGRAM
			S	ALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196367	4/13/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	4.00		58.32	I
196368	4/20/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	4.00		58.32	I
196369	5/25/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	19.50		284.32	I
196370	5/25/12	800000	VISITING NURSE SERVICE	LYMN, ANGIE	30.00		437.40	I
				CUSTOMER	57.50	0.00	838.36	
				CATEGORY	57.50	0.00	838.36	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	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
196371	5/25/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		597.78 I	
				CATEGORY	41.00	0.00	 597.78	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - AUR ADULT REHA BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196372	5/25/12	800000	VISITING NURSE SERVICE	MADDALENA, CECE	4.00		58.32	I
				CATEGORY	4.00	0.00	58.32	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.75
SALES JR	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196373	5/25/12	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 17 HCSA	76
			2	S A L E S R E G I S T E R			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196374	5/25/12	000008	VISITING NURSE SERVICE		84.00		1,224.72	I	
196375 196376	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	20.00 77.00		291.60 1,122.66	I	
130370	3,23,12		VIDITING NONDE DENVIOL						
				CUSTOMER	181.00	0.00	2,638.98		
				CATEGORY	181.00	0.00	2,638.98		

RUN DATE ( SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			11102	- 177 HOMEW/O WALLS (LT DING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
196377 196378	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	56.00 28.00		816.48 408.24	I I
				CUSTOMER	84.00	0.00	1,224.72	
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	'8
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA'		
				SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196379	5/25/12	000008	VISITING NURSE SERVICE	MARGOLIS, GERTR	20.00		291.60	I	
196380	5/25/12	800000	VISITING NURSE SERVICE	MARINO, ANN	18.00		262.44	I	
				CUSTOMER	38.00	0.00	554.04		
				COSTOMER	30.00	0.00	334.04		
				CATEGORY	38.00	0.00	554.04		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196381	5/25/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 180	
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WA	ALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING 6/0	01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUE	RPLUS
196382	5/25/12	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 18	1
0111111	_    0200	200 001		SALES REGISTER			BILL WEEK END		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196383 196384	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.75 15.00		98.42 218.70	I	
190304	3/23/12	000008	VISITING NURSE SERVICE	MARIIN, ELAUCAD	15.00		210.70		
				CUSTOMER	21.75	0.00	317.12		
				CATEGORY	21.75	0.00	317.12		

RUN DATE 05/ SALES JRNL #	30/12 - SUP SUNN 0283 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	182
SALES URNL #	0283 LOC 001		SALES REGISTER			BILL WEEK ENDING	G 6/01/12
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
	18/12 000008 25/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 24.00		87.48 I 349.92 I	
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
	2    0200	200 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
196387	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	3.00		43.74 I	
196388	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	15.00		218.70 I	
				CUSTOMER	18.00	0.00	262.44	
				CATEGORY	18.00	0.00	262.44	

RUN DATE (	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 184	1
SALES JRNI	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			2	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196389	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 05/30/12 SALES JRNL # 0283	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 185 ADU ADULT	
		·	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196390 5/18/12 196391 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	7.00 42.00		102.06 I 612.36 I	
			CUSTOMER	49.00	0.00	714.42	
			CATEGORY	49.00	0.00	714.42	

			YSIDE CITYWIDE				PAGE 1 - :	186
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196392	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	28.00		408.24 I	
196393	5/18/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	6.00		87.48 I	
196394	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	40.50		590.49 I	
196395	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	84.00		1,224.72 I	
				CUSTOMER	158.50	0.00	2,310.93	
				CATEGORY	158.50	0.00	2,310.93	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L87
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196396	5/25/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	88
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196397	5/11/12	000008	VISITING NURSE SERVICE	MATOS, ROSA	8.00		116.64 I	
196398	5/25/12	800000	VISITING NURSE SERVICE	MATOS, ROSA	48.00		699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 05/3 SALES JRNL #	30/12 - SUP SUNN 0283 LOC 001		REG NY NY			PAGE 1 ADU ADULT	- 18	39
SALES URINL #	0263 LOC 001		SALES REGISTER			BILL WEEK ENI	DING	6/01/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	25/12 000008 25/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	63.00 168.00		918.54 2,449.44	I I	
			CUSTOMER	231.00	0.00	3,367.98		
			CATEGORY	231.00	0.00	3,367.98		

			YSIDE CITYWIDE				PAGE 1 - 3	190
SALES JRN	IL # 0283	LOC 001		REG NY NY ALES REGISTER			VCP CHOICE LHCSA	6/01/12
			S	ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196401	5/25/12	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

	ATE 05/30/12 - JRNL # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 191 ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196402	2 5/25/12	800000	VISITING NURSE SERVICE	MCKAY, DOROTHY	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 192 VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196403 196404	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	23.00 24.00		335.34 I 349.92 I	
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00	 685.26	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 193	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	•
			S	SALES REGISTER			BILL WEEK ENDING 6/01/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	IS
196405	5/25/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	36.50		532.17 I	
				CATEGORY	36.50	0.00	532.17	-

	TE 05/30/12 JRNL # 0283	- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196406	5/25/12	800000	VISITING NURSE SERVICE	MENDEZ, ADA	36.25		528.53 I	
				CATEGORY	36.25	0.00	 528.53	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 195	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS	LT
			S	ALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196407	5/25/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	.96
SALES URI	NL # 0283	TOC 001		REGNY NY SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196408	5/25/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	78.00		1,137.24 I	
				CATEGORY	78.00	0.00	1,137.24	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 197	
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WA	•
			S	ALES REGISTER			BILL WEEK ENDING 6/0	1/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
196409	5/25/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		568.62 I	
				CATEGORY	39.00	0.00	 568.62	

- 1				YSIDE CITYWIDE					L98	
ı	SALES JRN	L # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA		
ı				:	SALES REGISTER			BILL WEEK ENDING	6/01/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	196410	5/25/12	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	16.00		233.28 I		
ı										
ı					CATEGORY	16.00	0.00	233.28		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	199
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196411	5/25/12	800000	VISITING NURSE SERVICE	MILEO, MARY	38.00		554.04 I	
				CATEGORY	38.00	0.00	554.04	

			YSIDE CITYWIDE					- 200
SALES JRNI	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE AI	-
			S	SALES REG	ISTER		BILL WEEK END	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENC	CE HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
196412	5/25/12	800000	VISITING NURSE SERVICE	MOLINA, A	ANA 25.00		364.50	I
				CA	TEGORY 25.00	0.00	364.50	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 20 VCP CHOICE LHCSA BILL WEEK ENDING	01 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196413 196414 196415	5/25/12 5/25/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MONSERRAT, DORI MONTES, MARTA MORAITIS, AGATH	10.00 18.00 25.00		145.80 I 262.44 I 364.50 I	
				CUSTOMER	53.00	0.00	772.74	
				CATEGORY	53.00	0.00	772.74	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	202
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	V/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196416	5/25/12	000008	VICTORING NUDGE CEDVICE	MODALEG ANGELT	42.00		612.36 I	
190410	5/25/12	000008	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 20	)3
			\$	SALES REGISTER			BILL WEEK END	ING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196417	5/25/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	84.00		1,224.72	I	
196418 196419	5/25/12	000008 000008	VISITING NURSE SERVICE	,	8.00 6.00		116.64 87.48	I	
196419	5/25/12	000008	VISITING NURSE SERVICE	MUSSALLI, NAIM	6.00		87.48		
				CUSTOMER	98.00	0.00	1,428.84		
				CATEGORY	98.00	0.00	1,428.84		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0283	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
			Š	SALES REGISIER			BILL MEEK ENDING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196420	5/25/12	000008	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	05
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196421	5/25/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	15.50		225.99 I	
				CATEGORY	15.50	0.00	225.99	

- 1				YSIDE CITYWIDE				PAGE 1 - 206	5
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
ı				\$	SALES REGISTER			BILL WEEK ENDING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196422	5/25/12	800000	VISITING NURSE SERVICE	NELLINI, MARY	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE 05/30/12	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	207
SALES JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196423 5/18/12 196424 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	NIDO, MICHAEL NIDO, MICHAEL	7.50 49.00		109.35 I 714.42 I	
			CUSTOMER	56.50	0.00	823.77	
			CATEGORY	56.50	0.00	823.77	

	RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	208
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196425	5/25/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	62.00		903.96 I	
					CATEGORY	62.00	0.00	903.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	09 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196426 196427	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	45.00 20.00		656.10 I 291.60 I	
				CUSTOMER	65.00	0.00	947.70	
				CATEGORY	65.00	0.00	947.70	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 21	LO
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		,
			S	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196428	5/25/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	22.50		328.05	I	
196429	5/25/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		495.72	I	
				CUSTOMER	56.50	0.00	823.77		
				CODIONER	30.30	0.00	025.77		
				CATEGORY	56.50	0.00	823.77		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 21	.1
Brilling Grav	1 0203	100 001		ALES REGISTER			BILL WEEK ENI		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196430	5/25/12	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	48.75		710.78	I	
196431	5/25/12	000008	VISITING NURSE SERVICE	OCHOA, LUIS	43.00		626.94		
				CUSTOMER	91.75	0.00	1,337.72		
				CATEGORY	91.75	0.00	1,337.72		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 212	2
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	) WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196432	5/25/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	213 IG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196433	5/25/12	800000	VISITING NURSE SERVICE	ONATE, MIGUEL	6.00		87.48	
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 21 VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196434 196435 196436	5/25/12 5/25/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORTEGA, CARLOS OSPINA, ANA PANASKAROLIDIS,	16.00 8.00 18.00		233.28 I 116.64 I 262.45 I	
				CUSTOMER	42.00	0.00	612.37	
				CATEGORY	42.00	0.00	612.37	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	223
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196437	5/25/12	800000	VISITING NURSE SERVICE	PAOLONI, MARY	7.00		102.06	I
				CATEGORY	7.00	0.00	102.06	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 21	L6
DALLD OIL	11 m 0203	100 001		SALES REGISTE	R		BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196438	5/25/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I	
196439	5/25/12	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.50		94.77	I	
196440	5/18/12	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
196441	5/25/12	000008	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
196442	5/25/12	000008	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I	
196443	5/25/12	000008	VISITING NURSE SERVICE	PENA, VICTORIA	35.50		517.60	I	
196444	5/25/12	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	20.00		291.60	I	
				CUSTOMER	174.00	0.00	2,536.93		
				CATEGORY	174.00	0.00	2,536.93		

	05/30/12 - NL # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - AUR ADULT REHA BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196445	5/25/12	800000	VISITING NURSE SERVICE	PENNACCHIA, MAR	8.75		127.58	I
				CATEGORY	8.75	0.00	127.58	

Ŧ

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
			S	ALES REGISTER			BILL WEEK ENDIN	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196446	5/25/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	I .
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	219
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196447	5/25/12	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	41.50		605.08 I	
				CATEGORY	41.50	0.00	605.08	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 220	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 6/01/12	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
196448	5/25/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	-

RUN DATE SALES JRN		LOC 001		REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196449	5/25/12	000008	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

ı	RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	222	
ı	SALES JRN	L # 0283	LOC 001		REG NY NY			LTC NURSING HOMEW	•	
ı				:	SALES REGISTER			BILL WEEK ENDING	6/01/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	196450	5/25/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	30.00		437.40 I		
ı										
ı					CATEGORY	30.00	0.00	437.40		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	223 A
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196451 196452	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PHILIPPS, MARY PIZARRO, BARBAR	39.75 2.50		579.56 I 36.45 I	
196453	5/25/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	35.00		510.30 I	
				CUSTOMER	77.25	0.00	1,126.31	
				CATEGORY	77.25	0.00	1,126.31	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	224
SALES OIGN	L # 0203	ПОС 001		SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196454 196455	5/04/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 42.00		174.96 612.36	I I
				CUSTOMER	54.00	0.00	787.32	
				CATEGORY	54.00	0.00	787.32	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	5
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196456	5/25/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY A L E S R E G I S T E R			PAGE 1 - 226 LTC NURSING HOMEW/C BILL WEEK ENDING	WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196457	5/25/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	27
SALES JRN	L # 0283	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196458	5/25/12	800000	VISITING NURSE SERVICE	PREVOST, IRENE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 228	8
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196459	5/25/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	229
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196460	5/25/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 230	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	SALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196461	5/25/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	48.50		707.14 I	
				CATEGORY	48.50	0.00	707.14	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	231
SALES JRN	L # 0283	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196462	5/25/12	800000	VISITING NURSE SERVICE	RAMBARAN, JOAN	7.50		109.35 I	
				CATEGORY	7.50	0.00	109.35	

RUN D	DATE 05/30/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 232	
SALES	3 JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PEDIATRIC	
				SALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
19646	53 5/25/12	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	38.00		554.04 I	
17040	)	000000	VIBILING NORSE SERVICE	KANTKEZ, ANA	30.00		334.04 1	
				CATEGORY	38.00	0.00	554.04	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 233	3
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196464	5/25/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	5.00		72.90 I	
196465	5/25/12	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	25.00		364.50 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 2 AUR ADULT REHAB C BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196466 196467	5/18/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMOS, JENNIFER RAMOS, JENNIFER	13.00 20.75		189.54 I 302.54 I	
				CUSTOMER	33.75	0.00	492.08	
				CATEGORY	33.75	0.00	492.08	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	- 235
DALLO OIU	L # 0203	100 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP SURPLUS
196468	5/25/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96	I
196469	5/25/12	800000	VISITING NURSE SERVICE	RANDAZZO, ROSAL	16.00		233.28	I
196470	5/25/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I
196471	5/25/12	800000	VISITING NURSE SERVICE	REINA, JOSE	20.00		291.60	I
196472	5/25/12	800000	VISITING NURSE SERVICE	RICCA, MARIE	18.75		273.38	I
196473	5/25/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		291.60	I
				CUSTOMER	92.75	0.00	1,352.30	
				CATEGORY	92.75	0.00	1,352.30	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	236
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196474	5/25/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
511225 0144	.2    0200	200 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196475 196476	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• •	20.00		291.60 I 291.60 I	
190470	3/23/12	000008	VISITING NORSE SERVICE	KIVERA, ERNESIO			291.00 1	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE				PAGE 1 - 2	
SALES JR	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196477	5/25/12	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	239
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/01/12
		~~						
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
106470	F / OF / 1 O	00000	THE THE MED OF CORNING		20.00		400 04 -	
196478	5/25/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	
				CAILGORI	20.00	0.00	400.24	

RUN DATE SALES JRN		SUP SUNN LOC 001		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
196479 196480	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	• • • • • • • • • • • • • • • • • • • •	36.75 12.00		535.82 174.96	I
				CUSTOMER	48.75	0.00	710.78	
				CATEGORY	 48.75	0.00	710.78	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	-	PAGE 1 - 241 VCP CHOICE LHCSA				
	0_00	200 001		REGNY NY SALES REGISTER			BILL WEEK END		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196481 196482	5/18/12	800000	VISITING NURSE SERVICE		7.00		102.06	I	
196482	5/25/12	000008	VISITING NURSE SERVICE	ROBINSON, MARGA	1.00		14.58		
				CUSTOMER	8.00	0.00	116.64		
				CATEGORY	8.00	0.00	116.64		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	242		
SALES JRNL # 0283 LOC 001				REG NY NY			LTC NURSING HOMEW/O WALLS (LT			
				SALES REGISTER			BILL WEEK ENDING	6/01/12		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS		
111101011	21112	0001 1.0		1121 21131102	1100112	11111 11111	11100111 111	50111 205		
196483	5/25/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20 I			
				CATEGORY	40.00	0.00	583.20			

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	3
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196484	5/25/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, FERM	20.00		291.60 I	
196485	5/25/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	42.00		612.36 I	
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 244	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE I	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 6,	01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	JRPLUS
196486	5/25/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

			YSIDE CITYWIDE				PAGE 1 - 245			
SALES JRN	L # 0283	LOC 001		REG NY NY		LTC NURSING HOMEW/O WALLS (LT				
			5	ALES REGISTER			BILL WEEK ENDING 6/01/12			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS			
196487	5/25/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I			
				CATEGORY	25.00	0.00	364.50			

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	246
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
				SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196488	5/25/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	247		
SALES JRN	L # 0283	LOC 001 SUNNYSIDE CITYWIDE		REG NY NY			LTC NURSING HOMEW/O WALLS (LT			
				SALES REGISTER			BILL WEEK ENDING	6/01/12		
TATTOTOTI	DAME	GIIGE NO	GUGEOMED NAME	DEFENDA	HOHDG	max and	AMOUNTE TWO	GIIDDI IIG		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS		
196489	5/25/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROOU	39.75		579.56 I			
150105	3/23/12	000000	VIBITING NORDE BERVICE	RODRIGOEZ, ROÇO	37.73		373.30			
				CATEGORY	39.75	0.00	579.56			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R	PAGE 1 - 248 ADU ADULT BILL WEEK ENDING 6/01/12			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196490	5/25/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, YLMA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/30/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - :	249
SALES JE	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196491	5/25/12	800000	VISITING NURSE SERVICE	ROLON, JUANITA	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	50
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196492	5/25/12	000008	VISITING NURSE SERVICE	ROMERO, SANTHY	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE		NY E G I S T E	R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196493 196494	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	FLOR ANA	56.00 40.00		816.48 583.20	I I	
					CUSTOMER	96.00	0.00	1,399.68		
					- CATEGORY	96.00	0.00	1,399.68		

			YSIDE CITYWIDE					PAGE 1	- 25	52	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			ADU ADULT			
			S	SALES R	EGISTE	R		BILL WEEK EN	DING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196495	5/25/12	800000	VISITING NURSE SERVICE	ROSA,	LUZ E	55.75		812.84	I		
					-						
					CATEGORY	55.75	0.00	812.84			

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 25 VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196497	5/25/12 5/25/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSA, MANOLO ROSARIO, ELSA ROSARIO, MARIA	16.00 18.00 23.00		233.28 I 262.44 I 335.34 I	
				CUSTOMER	57.00	0.00	831.06	
				CATEGORY	57.00	0.00	831.06	

RUN DATE	05/30/12 -		YSIDE CITYWIDE				PAGE 1 - 2	254
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196499	5/25/12	800000	VISITING NURSE SERVICE	ROSARIOBREU, EM	25.00		364.50 I	
196500	5/25/12	800000	VISITING NURSE SERVICE	RUBIN, EVGENY	19.50		284.31 I	
196501	5/25/12	800000	VISITING NURSE SERVICE	RUECKHER, PATRI	12.00		174.96 I	
				CUSTOMER	56.50	0.00	823.77	
				CATEGORY	56.50	0.00	823.77	

			YSIDE CITYWIDE	DEG NY NY			PAGE 1 - 2	255
SALES JRN	ш # 0283	TOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196502	5/25/12	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 25 LTC NURSING HOMEW	
SALES UKI	11 # 0203	TOC 001		ALES REGISTER			BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196503	5/25/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

- 1	RUN DATE ( SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
	196504	5/25/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60 I	
					CATEGORY	70.00	0.00	1,020.60	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	258
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	I/O WALLS (LT
			S	A L E S R E G I S T E R			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196505	5/25/12	800000	VISITING NURSE SERVICE	SAAVEDRA, STELL	26.00		379.08 I	
				CATEGORY	26.00	0.00	379.08	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 25	9
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			\$	SALES REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196506	5/25/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	15.00		218.70	I	
196507	5/25/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	75.75		1,104.44	I	
				CUSTOMER	90.75	0.00	1,323.14		
				COBTONER	50.75	0.00	1,323.11		
				CATEGORY	90.75	0.00	1,323.14		

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	260
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	//O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196508	5/25/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				PAGE 1 - 26	51
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196509	5/25/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	12.00		174.96 I	
196510	5/25/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		714.42 I	
				CUSTOMER	61.00	0.00	889.38	
				CATEGORY	61.00	0.00	889.38	

ı	RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 26	52
ı	SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196511	5/25/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
ı									
١					CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	263
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196512	5/25/12	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	12.00		174.96 I	
196513	5/25/12	000008	VISITING NURSE SERVICE	SANCHEZ, RAQUEL	4.00		58.32 I	
196514	5/25/12	000008	VISITING NURSE SERVICE	SCHMIDT, FREDER	5.50		80.19 I	
196515	5/25/12	800000	VISITING NURSE SERVICE	SCHNEIER, CATHE	9.00		131.22 I	
				CUSTOMER	30.50	0.00	444.69	
				CATEGORY	30.50	0.00	444.69	

RUN DATE SALES JRN	05/30/12 ·	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	54
511225 014	0203	200 001		SALES REGISTE	R		BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196516	5/25/12	000008	VISITING NURSE SERVIC	SCOTT, CATHERIN	56.00		816.48	I	
196517	5/25/12	800000	VISITING NURSE SERVIC	E SEGOVIA, BEATRI	30.00		437.40	I	
196518	5/11/12	800000	VISITING NURSE SERVIC	E SERAFIN, WALTER	8.00		116.64	I	
196519	5/18/12	000008	VISITING NURSE SERVIC	E SERAFIN, WALTER	40.00		583.20	I	
196520	5/25/12	000008	VISITING NURSE SERVIC	E SERAFIN, WALTER	54.75		798.26	I	
196521	5/25/12	000008	VISITING NURSE SERVIC	E SERRANO, AGUEDA	56.00		816.48	I	
196522	5/25/12	800000	VISITING NURSE SERVIC	E SHANNON, ELNORA	42.75		623.30	I	
				CUSTOMER	287.50	0.00	4,191.76		
				 CATEGORY	287.50	0.00	4,191.76		

RUN DATE 05/30 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	265
SALES URNL # (	1263 LOC 001		SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196523 5/25 196524 5/25		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	28.75 4.00		419.18 I 58.32 I	
			CUSTOMER	32.75	0.00	477.50	
			CATEGORY	32.75	0.00	477.50	

RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE	PAGE 1 - 266
SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	LTC NURSING HOMEW/O WALLS (LT
SALES REGISTER	BILL WEEK ENDING 6/01/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS	TAX AMT AMOUNT TYP SURPLUS
INVOICE# DATE COST NO COSTOMER NAME REFERENCE HOURS	TAX AMI AMOUNT TIP SURPLUS
196525 5/25/12 000008 VISITING NURSE SERVICE SILLS, JAMES 36.00	524.88 I
0, 1, 1, 1	
CATEGORY 36.00	0.00 524.88

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	267
	2 11 0200	200 001		ALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196526 196527	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40 I 218.70 I	
190527	3/23/12	000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70 1	
				CUSTOMER	45.00	0.00	656.10	
				CATEGORY	45.00	0.00	656.10	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196528	5/25/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DAT	E 05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	269
SALES J	RNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196529	5/25/12	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

- 1		05/30/12 - L # 0283			REG NY NY			LTC NURSING HOME	•
					SALES REGISTER			BILL WEEK ENDING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196530	5/25/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
ı					CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	- 271	
SALES JRN	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LHO		
			S	SALES	REGISTER			BILL WEEK ENDI	ING 6/01	_/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURP	PLUS
196531	5/25/12	800000	VISITING NURSE SERVICE	SO	TO, MARCELINA	12.00		174.96	I	
					 CATEGORY	12.00	0.00	 174.96		

			YSIDE CITYWIDE				PAGE 1 - 2	72
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
			•	SALES KEGISIEK			BILL WEEK ENDING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
106530	E / O E / 1 O	000000	TITGTEENIG NEIDGE GEDUTGE	CENT GED CEEDIN	10 00		174.06 +	
196532 196533	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	12.00 7.00		174.96 I 102.06 I	
130333	3/23/12	000000	VIBILING NORDE BERVICE					
				CUSTOMER	19.00	0.00	277.02	
				CATEGORY	19.00	0.00	277.02	

			NYSIDE CITYWIDE				PAGE 1 - :	
SALES	JRNL # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19653	5/25/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 274	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE AD		
			5	SALES REGISTER			BILL WEEK ENDI	ING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	i
196535	5/25/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	17.50		255.15	I	
				CATEGORY	17.50	0.00	255.15		

	05/30/12 - NL # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	275
	,, ,,			SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196536	5/25/12	800000	VISITING NURSE SERVICE	STENOS, MOSHOUL	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	276
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB	ONLY
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196537	5/25/12	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	!SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196538 196539 196540	5/25/12 5/25/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	STERGIOU, GLORI STICKELL, BLANC STROBL, ALFRED	10.00 27.00 36.00		145.80 393.67 524.88	I I I
				CUSTOMER	73.00	0.00	1,064.35	
				CATEGORY	73.00	0.00	1,064.35	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	78
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
				SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196541	5/25/12	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	29.50		430.11 I	
				CATEGORY	29.50	0.00	430.11	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 27	79
SALES URN	ш # 0203	LOC UUI		SALES REGISTER			BILL WEEK ENI		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196542 196543	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE	TABOADA, DIMAS TABOADA, ELIZAB	4.00 62.00		58.32 903.98	I	
190343	3/23/12	000008	VISITING NORSE SERVICE	TABOADA, ELIZAB					
				CUSTOMER	66.00	0.00	962.30		
				CATEGORY	66.00	0.00	962.30		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE:	R		PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196544 196545	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- •	56.00 20.00		816.48 291.60	I I
				CUSTOMER	76.00	0.00	1,108.08	
				 CATEGORY	76.00	0.00	1,108.08	

		)5/30/12 - L # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	281
				5	SALES REGIST	E R		BILL WEEK ENDING	6/01/12
I	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	L96546	5/25/12	800000	VISITING NURSE SERVICE	TAVERAS, BERNAI	R 15.75		229.64 I	
					CATEGORY	15.75	0.00	229.64	

			YSIDE CITYWIDE				PAGE 1 - 28	2
SALES JR	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/01/12
				SALES REGISIER			BILL MEEK ENDING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196547	5/25/12	000008	VISITING NURSE SERVICE	TEJADA, BALDOME	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

	05/30/12 · NL # 0283			REGNY NY SALES REGISTER			PAGE 1 - 283 ADU ADULT BILL WEEK ENDING 6/01/12	?
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
196548	5/25/12	800000	VISITING NURSE SERVICE	TEJADA, MARIA	10.00		145.80 I	-
				CATEGORY	10.00	0.00	145.80	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYV	WIDE REG 1	NY NY			PAGE 1 VCP CHOICE L	- 28	34
Brilles orde	11    0203	100 001	BONNIBIDE CITY	SALES				BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196549	5/25/12	000008	VISITING NURSE S	SERVICE	TERZIAN, ASDGHI	42.00		612.36	I	
196550	5/11/12	800000	VISITING NURSE S	SERVICE	TINOCO, INES	7.00		102.06	I	
196551	5/25/12	000008	VISITING NURSE S	SERVICE	TINOCO, INES	42.00		612.36	I	
196552	5/25/12	000008	VISITING NURSE S	SERVICE	TORO VEGA, LUZV	28.00		408.24	I	
196553	5/25/12	000008	VISITING NURSE S	SERVICE	TORO, PURA	84.00		1,224.72	I	
196554	5/25/12	000008	VISITING NURSE S	SERVICE	TORRES, EMELINA	40.00		583.20	I	
196555	5/25/12	800000	VISITING NURSE S	SERVICE	TORRES, LUZ M	84.00		1,224.72	I	
					CUSTOMER	327.00	0.00	4,767.66		
					CATEGORY	327.00	0.00	4,767.66		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	285
SALES JRN	L # 0283	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196556	5/25/12	800000	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	186
			S A	LES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196557	5/25/12	800000	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS. BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
196559	5/11/12 5/18/12 5/25/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TRUJILLO, AMPAR TRUJILLO, AMPAR	12.00 12.00 12.00		174.96 I 174.96 I 174.96 I	
				CUSTOMER	36.00	0.00	524.88	
				CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 288
SALES UKN	ш # UZO3	TOC 001		SALES REGISTER			BILL WEEK END	ING 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
196561	5/25/12	800000	VISITING NURSE SERVICE	TRUONG, TINH	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	289
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196562	5/25/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 290	
SALES JRN	rL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			S	ALES REGISTER			BILL WEEK ENDING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
196563	5/25/12	800000	VISITING NURSE SERVICE	TSUAI, PING	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	291	
SALES JR	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			i	SALES REGISTER			BILL WEEK ENDING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
196564	5/25/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	63.00		918.54 I		
				CATEGORY	63.00	0.00	918.54		

RUN DATE (		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	292
			S	SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196565	5/25/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	7.00		1,224.72	I
				CATEGORY	7.00	0.00	1,224.72	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	293
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
111101011	21112	0001 1.0	CODICINE IN IL	1121 21121102	1100110		11100111 111	2011 202
196566	5/25/12	800000	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 29	14
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ON	ILY
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196567	5/25/12	800000	VISITING NURSE SERVICE	VACCA, MARIA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	295
DIILLO GIUI	_	200 001		SALES REGISTER			BILL WEEK ENDING	G 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196568	5/25/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

			YSIDE CITYWIDE				PAGE 1 - 296	
SALES JRNI	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE P	
			S	SALES REGISTER			BILL WEEK ENDING 6/	01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
196569	5/25/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.75		127.58 I	
				CATEGORY	8.75	0.00	127.58	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	297
	_ "			SALES REGISTER			BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196570 196571	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENTIN, ALEJA VARELAS, ANNA	20.00 11.75		291.60 171.32	I T
	3, 23, 12		VIBILING NONDE BENVIOL	CUSTOMER	31.75	0.00	462.92	
				CATEGORY	31.75	0.00	462.92	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - 298 LTC NURSING HOMEW/O BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196572 196573	5/25/12 5/25/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.75 6.00		83.84 I 87.48 I	
				CUSTOMER	11.75	0.00	171.32	
				CATEGORY	11.75	0.00	171.32	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 299	
SALES JRN	ъ # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196574	5/25/12	800000	VISITING NURSE SERVICE	VASQUEZ, ARTURO	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING E	- 3C	
SALES OWN	II # 0203	100 001		SALES REGISTER			BILL WEEK ENI	,	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196575	5/25/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		481.14	I	
196576	5/18/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	3.00		43.74	I	
196577	5/25/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	21.00		306.18	I	
196578	5/25/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20	I	
				CUSTOMER	97.00	0.00	1,414.26		
				CATEGORY	97.00	0.00	1,414.26		

RUN DATE	05/30/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	301
SALES JF	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196579	5/25/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	19.50		284.31 I	
				CATEGORY	19.50	0.00	284.31	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196580	5/25/12	000008	VISITING NURSE SERVICE	VENTURA, ROSA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 303	3
SALES JRN	L # 0283	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196581	5/25/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	39.75		579.56 I	
				CATEGORY	39.75	0.00	 579.56	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	04	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT		
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
196582	5/25/12	000008	VISITING NURSE SERVICE	VIGORITO, ANN	19.75		287.96 I		
				CATEGORY	19.75	0.00	287.96		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	305
SALES JRI	NL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196583	5/25/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	30.00		437.40 I	-
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 306	
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE I	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 6/	/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	URPLUS
196584	5/25/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
				 CATEGORY	4.00	0.00	58.32	

RUN DATE	05/30/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	07
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196585	5/25/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	28.00		408.24 I	
				 CATEGORY	28.00	0.00	408.24	

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 308	
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
				SALES REGISTER			BILL WEEK END	ING 6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS	
196586	5/18/12	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	10.00		145.80	I	
196587	5/25/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	69.75		1,016.96	I	
				CUSTOMER	79.75	0.00	1,162.76		
				 CATEGORY	 79.75	0.00	1,162.76		

- 1				YSIDE CITYWIDE				PAGE 1 - 309	€
	SALES JRN	L # 0283	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
								DILL WEEK ENDING	0/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	196588	5/25/12	000008	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 31	.0
BALLS OICH	1L # 0203	100 001		SALES REGISTER			BILL WEEK END		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196589 196590	5/25/12 5/25/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VOLASTRO, JOHN WEINHAUS, SUSAN	3.00		43.74 72.90	I I	
	0, -0,			CUSTOMER	8.00	0.00	116.64		
				CATEGORY	8.00	0.00	116.64		

			YSIDE CITYWIDE	222			PAGE 1 - 31	11
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/01/12
							BILL WELK ENDING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196591	5/25/12	000008	VISITING NURSE SERVICE	WERKMEISTER, JO	19.75		287.96 I	
196592	5/25/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00		174.96 I	
							460.00	
				CUSTOMER	31.75	0.00	462.92	
				CATEGORY	31.75	0.00	462.92	

RUN I	DATE 05/30/12	- SUP SUNN	IYSIDE CITYWIDE				PAGE 1 - 3	312
SALES	S JRNL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19659	93 5/25/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE (	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	. – 31	L3
SALES JRNI	և # 0283	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGA	TE CAR	RE PROGRAM
			S	SALES	REGISTER			BILL WEEK EN	DING	6/01/12
				_						
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R.	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
106504	E /0E /10					10.00		171.06	_	
196594	5/25/12	000008	VISITING NURSE SERVICE	YE.	LLAPAH, DOLLI	12.00		174.96	Τ	
					CAMPICODY	10.00	0.00	174.06		
1					CATEGORY	12.00	0.00	174.96		

RUN DATE 05/	30/12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 31	L4
SALES JRNL #	0283 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	6/01/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196595 5/2	25/12 000008	VISITING NURSE SERVICE	ZAMBRANO, CRUZM	48.00		699.84 I	
196596 5/2	25/12 000008	VISITING NURSE SERVICE	ZAMBRANO, VICTO	9.00		131.22 I	
			CUSTOMER	57.00	0.00	831.06	
			CATEGORY	57.00	0.00	831.06	

RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 315 SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 6/01/12 GUILDNET
GUILDNET
GUILDNET
GUILDNET
GUILDNET
AL, AMRUNISSA
18.75
27.2.25
GUILDNET
AL, AMRUNISSA
18.75
27.2.25
GUILDNET
AMBAILE, ANTOIN
GUILDNET
AYALA, ENRIQUE
GUILDNET
GUILDNET
GUILDNET
AYALA, ENRIQUE
GUILDNET
GUILDNET
BEGUM, JAMILA
GUILDNET
GUILDNET
GUILDNET
GUILDNET
GUILDNET
GUILDNET
CARSWELL, LUELL
GUILDNET
COLAWITHI, JEAN
GUILDNET
COLAWITHI, JEAN
GUILDNET
GUILDNET
COLAWITHI, JEAN
GUILDNET
GUILDNET
GUILDNET
GUILDNET
COLAWITHI, JEAN
GUILDNET
ESPINOZA, MARIA
45.00
464.64
GUILDNET
GUI INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/18/12 5/25/12 3/23/12 5/04/12 5/25/12 5/18/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 4/20/12 5/25/12 000010 GUILDNET

			TYSIDE CITYWIDE	REG NY NY SALES REGISTEF			PAGE 2	- 31	.6
SALES JRN	1L # 0283	TOG 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET	TATO	C (01 (10
				SALES REGISTER	3		BILL WEEK END	ING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME					TYP	SURPLUS
196646	5/25/12	000010	GUILDNET	PROANO, ALICIA	18.00		279.36	I	
196647	5/25/12	000010	GUILDNET	PROANO, BRUNO	33.00		512.16	I	
196648	5/25/12	000010	GUILDNET	PRYCE, CLYDIA	10.00		145.20	I	
196649	5/25/12	000010	GUILDNET	RAMOS, ESTHER	15.00		217.80	I	
196650	5/25/12	000010	GUILDNET	RESTULA, VINCEN	18.00		261.36	I	
196651	5/25/12	000010	GUILDNET	RIVAS, GERTRUDI	16.00		232.32	I	
196652	5/25/12	000010	GUILDNET	RODRIGUEZ, FABI	28.00		406.56	I	
196653	5/25/12	000010	GUILDNET	RODRIGUEZ, HOLG	63.00		914.76	I	
196654	5/25/12	000010	GUILDNET	ROJAS, ANGEL	15.00		232.80	I	
196655	5/25/12	000010	GUILDNET	ROJAS, HAYDEE	20.00		310.40	I	
196656	5/25/12	000010	GUILDNET	RUBIANO, MARIA	16.00		232.32	I	
196657	5/25/12	000010	GUILDNET	SALJANIN, DILJA	61.00		885.72	I	
196658	5/25/12	000010	GUILDNET	SANCHEZ, ELIZAB	32.00		464.64	I	
196659	5/25/12	000010	GUILDNET	SHELTON, AGUEDA	28.00		406.56	I	
196660	5/18/12	000010	GUILDNET	SOMRAJ, UMILLA	17.00		246.84	I	
196661	5/25/12	000010	GUILDNET	TOROSSIAN, PARI	26.00		377.52	I	
196662	5/25/12	000010	GUILDNET	VILLACRES, LUZ	8.00		116.16	I	
196663	5/25/12	000010	GUILDNET	VLAHOS, MARIE	50.00		726.00	I	
196664	5/25/12	000010	GUILDNET	WEISZ, KLARA	4.00		58.08	I	
196665	5/25/12	000010	GUILDNET	WHITE, GLORIA	2.00		29.04	I	
196666	5/25/12	000010	GUILDNET	WHITLEY, MYRNA	20.00		290.40	I	
196667	5/25/12	000010	GUILDNET	YI, CARLOS	20.00		290.40	I	
196668	5/25/12	000010	GUILDNET	YIANTSELIS, VIR	7.00		1,321.04	I	
196669	5/25/12	000010	GUILDNET	ZARE, GLORIA	38.50		559.02	I	
196670	5/04/12	000010	GUILDNET	ZARE, GLORIA	1.00		85.00	I	
196671	5/18/12	000010	GUILDNET	ZARE, GLORIA	1.00		85.00	I	
196672	5/25/12	000010	GUILDNET	ZUMAETA, FANNY	64.00		929.28	I	
				REFERENCE  PROANO, ALICIA PROANO, BRUNO PRYCE, CLYDIA RAMOS, ESTHER RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, FABI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, HAYDEE RUBIANO, MARIA SALJANIN, DILJA SANCHEZ, ELIZAB SHELTON, AGUEDA SOMRAJ, UMILLA TOROSSIAN, PARI VILLACRES, LUZ VLAHOS, MARIE WEISZ, KLARA WHITE, GLORIA WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIR ZARE, GLORIA ZARE, GLORIA ZARE, GLORIA ZUMAETA, FANNY	2,375.25	0.00	38,685.55		
				CATEGORY	2,375.25	0.00	38,685.55		

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTEI			PAGE 1 HFS HEALTH F	- 31	17
BALLS Oldv	ш т 0203	HOC 001	SOMNIBIDE CITIWIDE	SALES REGISTE	R		BILL WEEK EN		6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196673	5/25/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
196674	5/25/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
196675	5/25/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
196676	5/25/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
196677	5/25/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
196678	5/25/12	000122	HEALTH FIRST	CEBALLOS, ANA	40.00		675.20	I	
196679	5/25/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
196680	5/25/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
196681	5/25/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	28.00		472.64	I	
196682	5/25/12	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
196683	5/25/12	000122	HEALTH FIRST	FERGERSON, TINA	35.00		590.80	I	
196684	5/25/12	000122	HEALTH FIRST	FERRERA, FRANCI	6.00		101.28	I	
196685	5/25/12	000122	HEALTH FIRST	FONTANES, PEDRO	46.00		776.48	Ī	
196686	5/25/12	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
196687	5/25/12	000122	HEALTH FIRST	FRIAS. BARBARA	12.00		202.56	I	
196688	5/25/12	000122	HEALTH FIRST	HERRING, CHARLE	12.00		202.56	Ī	
196689	5/25/12	000122	HEALTH FIRST	KAIIR HARBANS	49 00		827 12	Ī	
196690	5/25/12	000122	HEALTH FIRST	LARA. TOMASA	28.00		472.64	Ī	
196691	5/25/12	000122	HEALTH FIRST	LAZALA GLADYS	36 00		607 68	Ī	
196692	5/25/12	000122	HEALTH FIRST	IAZALA GLADYS	28 00		472 64	Ī	
196693	5/25/12	000122	HEALTH FIRST	IOPEZ-RAMIREZ	77 00		1 299 76	Ī	
196694	4/20/12	000122	HEALTH FIRST	MACARENA SAHAR	81 00		1 367 28	I	
196695	5/25/12	000122	HEALTH FIRST	MARTIN ARIANA	12 00		202 56	I	
196696	5/25/12	000122	UEALTH FIRST	OPTI 7 TIII A	10 00		168 80	I	
196697	5/25/12	000122	UEALTH FIRST	DIVEDA CHDICTO	21 00		354 48	I	
196698	5/25/12	000122	UEALTH FIRST	DIVERA FOOTE	9 00		151 02	I	
196699	5/25/12	000122	HEALTH FIRST	RIVERA, EDDIE	20.00		337 60	I	
196700	5/25/12	000122	HEALTH FIRST	RIITZ TR SAMIIFI.	17 00		286 96	I	
196701	5/18/12	000122	HEALIN FIRST	CALAZAR LUZ MA	53 00		894 64	I	
196702	5/25/12	000122	HEALIN FIRST	SALAZAK, 102 MA SALHIIANA VOLAN	16 00		270 08	I	
196703	5/25/12	000122	HEALIN FIRST	CDIVEY DATEICT	25 00		422 00	I	
196704	5/25/12	000122	DEVILD EIDGE	OF DOMAINE CLA	69 00		1 1/7 0/	I	
196704	5/25/12	000122	DEVLAR ELDCA	OI NOMAINE, CLA	20.00		1,171.04	I	
196705	5/25/12	000122	UDVILL LIVOI	NECA CIORIA	20.00		4/4.04	I	
196707	5/25/12	000122	UEALDI FIRSI	VEGA, GLORIA	39.00		405 10	I	
196707	5/25/12	000122	HEALIH FIRSI	WILLIAMS, RODNE	24.00		405.12		
				REFERENCE  BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HERRING, CHARLE KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA ORTIZ, TULA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VEGA, GLORIA WILLIAMS, RODNE	1,192.00	0.00	20,120.96		
				CATEGORY	1,192.00	0.00	20,120.96		

RUN DATE SALES JRN	05/30/12 - IL # 0283	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG 1	NY NY			PAGE 1 NHP NEIGHBORE	- 31 HOOD H	L8 HEALTH
			:	SALES	S REGISTER			BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196708	5/25/12	000120	NEIGHBORHOOD HEALTH PROBLEM PR	OVIDERS	AHMED, UMARA	56.00		945.28	I	
196709	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	AKHTER, SELINA	45.00		759.60	I	
196710	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	ARDITTO, PATRIC	30.00		506.40	I	
196711	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
196712	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	DIAZ, CARMEN	20.00		337.60	I	
196713	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	FERNANDEZ, MARI	7.00		118.16	I	
196714	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
196715	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	JONES, CYNTHIA	27.00		455.76	I	
196716	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	KHALIL, RASHAN	21.00		354.48	I	
196717	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	KHAN, FARUQUE	81.50		1,375.72	I	
196718	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	KROLL, KATHERIN	28.00		472.64	I	
196719	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	MORALES FERNAD	42.00		708.96	I	
196720	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	MOSKOWITZ, RONA	30.00		506.40	I	
196721	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	OCASIO, VIRGINI	22.00		371.36	I	
196722	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	RODRIGUEZ, JESS	20.00		337.60	I	
196723	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
196724	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	SALVATO, MARY	56.00		945.28	I	
196725	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	SCOTT, MICHAEL	24.00		405.12	I	
196726	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
196727	5/25/12	000120	NEIGHBORHOOD HEALTH PRO	OVIDERS	WILSON, SHERYL	32.00		540.16	I	
					CUSTOMER	743.50	0.00	12,550.28		
					CATEGORY		0.00			

RUN DATE			YSIDE CITYWIDE	DEG NV NV				- 31	
SALES JRN	L # U∠83	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			FID NY CATHO: BILL WEEK EN	- /	6/01/12
				SALES KEGISTEK			DILL WEEK EN.	DING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
196728	5/25/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
196729	5/25/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	40.00		674.80	I	
196730	5/25/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45	I	
196731	5/25/12	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	22.00		371.14	I	
196732	5/25/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.08	I	
196733	5/25/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81	I	
196734	5/11/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	49.00		826.63	I	
196735	5/25/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	13.00		219.31	I	
196736	5/25/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	20.00		337.40	I	
196737	5/25/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81	I	
				CUSTOMER	438.00	0.00	7,389.06		
				CATEGORY	438.00	0.00	7,389.06		

RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 320 SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY UHC UNITED HEALTH										
SALES URN	L # UZO3	LOC 001	SUNNISIDE CITIWIDE	SALES REGISTER			BILL WEEK EN		6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196738	5/25/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	I		
196739	5/25/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	42.00		720.72	I		
196740	5/25/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	15.00		257.40	I		
196741	5/25/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I		
196742	5/25/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I		
				CUSTOMER	211.00	0.00	3,620.76			
				CATEGORY	211.00	0.00	3,620.76			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - EHP EMBLEM HEAL	321 .TH
				SALES REGISTER			BILL WEEK ENDIN	IG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196743	5/25/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	13.00		182.00 I	
196744	5/25/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00 I	
196745	5/25/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00 I	
196746	5/18/12	000114	EMBLEM HEALTH	HENRIQUEZ, TERE	24.00		336.00 I	
196747	5/25/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	35.00		490.00 I	
196748	5/25/12	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,176.00 I	•
196749	5/25/12	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		168.00 I	· •
196750	5/25/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00 I	
				CUSTOMER	328.00	0.00	4,592.00	
				CATEGORY	328.00	0.00	4,592.00	

RUN DATE			YSIDE CITYWIDE	DEG	NT7 NT7				- 32	
SALES JRN	L # U283	LOC 001	SUNNYSIDE CITYWIDE	REG S A L E				HIP HEALTH I		6/01/12
				SALE	S KEGISIEK			DIDD WEEK EN	DING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196751	5/25/12	000136	HEALTH INSURANCE PLAN	OF NY	AHMAD, AMATUL	20.00		337.60	I	
196752	5/25/12	000136	HEALTH INSURANCE PLAN	OF NY	CIPRIAN, JACQUE	8.00		135.04	I	
196753	5/25/12	000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	63.00		1,063.44	I	
196754	5/25/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	63.00		1,063.44	I	
196755	5/18/12	000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	69.00		1,164.72	I	
196756	5/25/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	35.00		590.80	I	
196757	5/25/12	000136	HEALTH INSURANCE PLAN		PARADISE, ANITA	24.00		405.12	Т	
196758	5/25/12	000136	HEALTH INSURANCE PLAN	-	SHAH, HANSIKABE	5.00		84.40	Ī	
196759	5/25/12	000136	HEALTH INSURANCE PLAN		WILLIAMS, DIANE	20.00		337.60	T	
196760	5/25/12	000136	HEALTH INSURANCE PLAN		ZAMBRANO, ZOILA	16.00		270.08	T	
130700	3/23/12	000130	IIIIIIIII IIVOOIGIIVOD I DIIV	01 111						
					CUSTOMER	323.00	0.00	5,452.24		
								,		
					CATEGORY	323.00	0.00	5,452.24		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3 HPS HEALTH PLUS BILL WEEK ENDING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196761 196762 196763	5/25/12 5/25/12 5/25/12	000138 000138 000138	HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC	DENNISON, KELVI ESPERSON, CLAUD HARDING, EDNA	28.00 16.00 30.00		476.00 I 272.00 I 510.00 I	
				CUSTOMER	74.00	0.00	1,258.00	
				CATEGORY	74.00	0.00	1,258.00	

	05/30/12 - L # 0283		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - MPH METROPLUS	324 HEALTH
				REG NY NY SALES REGISTER	2		BILL WEEK ENDI	NG 6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
196764	5/25/12	000130	METROPLUS HEALTH	ANDERSON, BETH	26.00		445.90	I
196765	5/25/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I
196766	5/25/12	000130	METROPLUS HEALTH	BEDOYA, MONICA			85.75	I
196767	5/25/12	000130	METROPLUS HEALTH	BRACERO, HELEN	56.00		960.40	I
196768	5/25/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS			720.30	I
196769	5/25/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I
196770	5/18/12	000130	METROPLUS HEALTH	DAVIS, ANGIE			2,486.75	I
196771	5/25/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA			343.00	I
196772	5/25/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA			68.60	I
196773	5/25/12	000130	METROPLUS HEALTH	GALAS, TERESA			600.25	I
196774	5/25/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU			686.00	I
196775	5/25/12	000130	METROPLUS HEALTH	PERSAD, USHA	46.00		788.90	I
196776	5/25/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA			960.40	I
196777	5/25/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI				I
196778	5/25/12	000130	METROPLUS HEALTH	RYALS, CHARLES			205.80	I
196779	5/18/12	000130	METROPLUS HEALTH	SANTORO, MATTHE				I
196780	5/25/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00			I
196781	5/25/12	000130	METROPLUS HEALTH	VALLE, BLASINA	37.00		634.55	I
				CUSTOMER	738.00	0.00	12,656.70	
				CATEGORY	738.00	0.00	12,656.70	

			YSIDE CITYWIDE	222					32!	5
SALES JRN	L # U283	TOG 001	SUNNYSIDE CITYWIDE	REG S A L E		<b>5</b>		WEL WELCARE OF BILL WEEK END		6/01/12
				SALE	S KEGISIEI			DILL WEEK END	LING	0/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP	SURPLUS
196782	5/25/12	000124	WELCARE OF NEW YORK,	TNO	GENAO, DANIELA	55.00		946.00	т	
196783	5/25/12	000124	WELCARE OF NEW YORK,		GUERRERO, MIRTH	49.00		842.80	T	
196784	5/04/12	000124	WELCARE OF NEW YORK,		MARTINEZ, MARIA	48.00		825.60	Ī	
196785	5/25/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	63.00		1,083.60	I	
					CHGEOMED	215 00	0.00	2 600 00		
					CUSTOMER	215.00	0.00	3,698.00		
					CATEGORY	215.00	0.00	3,698.00		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 3 NPS NY PRESBYTERI BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
196786	5/25/12	000134	NY-PRESBYTERIAN SYSTEM	M SELECT KARASSAVIDES, A	35.00		600.60 I	
				CATEGORY	35.00	0.00	600.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMG AMERIGRO	- 32	27
SALES UKN	ш # UZO3	HOC 001	SUNNISIDE CITIWIDE	SALES REGISTER			BILL WEEK EN	-	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196787	5/25/12	000132	AMERIGROUP	FERNANDEZ, NORK	42.00		708.54	I	
196788	5/25/12	000132	AMERIGROUP	GUERRA, LORRAIN	62.00		1,045.94	I	
196789	5/25/12	000132	AMERIGROUP	HAWKINS S, MA	53.00		894.11	I	
196790	5/25/12	000132	AMERIGROUP	LINARES, NANCY	12.00		202.44	I	
196791	5/25/12	000132	AMERIGROUP	PRUITT, JOHNNY	4.00		67.52	I	
				CUSTOMER	173.00	0.00	2,918.55		
				CATEGORY	173.00	0.00	2,918.55		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			PAGE 1 PAR PRIVATE	- 32	28
SALES URI	IL # UZO3	TOC 001	S A L E				BILL WEEK ENI	OING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196792 196793 196794 196795 196796 196797 196798 196799	5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/25/12 5/18/12 5/25/12	000002 000002 000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES	GRECH, JANE MANIACE, AGNES MANIACE, VINCEN ROCSIN, FLORICA TEODORU, MIRELL	8.00 4.00 6.00		158.63 43.50 116.00 58.00 87.00 270.00 116.00 58.00	I I I I I I	
196800	5/25/12	000002	SUNNYSIDE COMMUNITY SERVICES	TUCCI, DOROTHY	8.00		116.00	Ī	
				CUSTOMER	72.75	0.00	1,023.13		
196801	5/25/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I	
196802 196803	5/25/12 5/25/12	000049 000049	ELIZABETH SETON PEDIATRIC CTR	MORSHELINA, NAS	25.00 15.00		344.75 206.85	I I	
				CUSTOMER	40.00	0.00	551.60		
196804	5/25/12	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
196805	5/25/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	147.75	0.00	3,346.73		

-	05/30/12		YSIDE CITYWIDE					- 32	
SALES JRN	IL # 0283	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			CAS CHILDREN BILL WEEK EN		6/01/12
			5 /	ALES REGISIER			DILL MEEV EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196806	5/25/12	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	25.00		387.50	I	
196807	5/18/12	000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	2.00		31.00	I	
196808	5/25/12	000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	4.00		62.00	I	
196809	5/18/12	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	2.00		31.00	I	
196810	5/25/12	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	4.00		62.00	I	
196811	5/25/12	000088	CHILDREN'S AID SOCIETY	JOHNSON, CAMRYN	20.00		310.00	I	
196812	5/25/12	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	24.00		372.00	I	
				CUSTOMER	81.00	0.00	1,255.50		
				CATEGORY	81.00	0.00	1,255.50		

- 1	RUN DATE SALES JRN		- SUP SUNN LOC 001	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 PAR PRIVATE	- 330	
		- "			SALES R				BILL WEEK ENI	DING	6/01/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	196813	5/25/12	000098	MILDRED PANSE	PANSE	E, MILDRED	20.00		310.00	I	
ı						CATEGORY	20.00	0.00	310.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVEH BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
196814 196815	5/25/12 5/25/12	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	15.00 20.00		213.75 I 285.00 I	
				CUSTOMER	35.00	0.00	498.75	
				CATEGORY	35.00	0.00	498.75	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 PAR PRIVATE BILL WEEK ENI	- 33 DING	6/01/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
196816	5/25/12	000143	ETTORE COPPOLA	COPPOLA, ETTORE	16.50		263.25	I		
196817	5/25/12	000145	LARRY EISENBERG	BERGER, TESS	53.00		848.50	I		
				CATEGORY	69.50	0.00	1,111.75			

RUN DATE	05/30/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 33	33
SALES JRN	L # 0283	LOC 001	SUNNYSIDE CITYWIDE	E REG	NY NY			CCM COMPREHE	NSIVE	CARE MGMT
				SALE	S REGISTE	R		BILL WEEK EN	DING	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196818	5/18/12	000150	COMPREHENSIVE CARE	MANAGEMENT	BONES, ANA	4.00		56.40	I	
196819	5/25/12	000150	COMPREHENSIVE CARE	MANAGEMENT	BONES, ANA	20.00		282.00	I	
196820	5/25/12	000150	COMPREHENSIVE CARE	MANAGEMENT	GARCIA, MARIA	40.00		564.00	I	
196821	5/25/12	000150	COMPREHENSIVE CARE	MANAGEMENT	ROSARIO, CELEST	36.00		507.60	I	
					CUSTOMER	100.00	0.00	1,410.00		
					CATEGORY	100.00	0.00	1,410.00		

	05/30/12 - NL # 0283	SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE RE S A L :	G NY NY ES REGISTE	l R		PAGE 1 PAR PRIVATE BILL WEEK EN	- 33	6/01/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
196822	5/25/12	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I	
196823	5/25/12	000165	ALZHEIMER'S ASSOCIATION	TUCCI, DOROTHY	4.00		62.00	I	
196824	5/25/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
196825	5/25/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
196826	5/25/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	6.00		93.00	I	
196827	5/25/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	15.00		202.50	I	
196828	5/25/12	006337	STEPHEN EDEL	EDEL, CANDACE	79.25		1,250.89	I	
196829	5/25/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I	
196830	5/25/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I	
196831	5/25/12	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	6.00		99.00	I	
196832	5/25/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
196833	5/25/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	25.00		387.50	I	
196834	5/25/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	6.00		93.00	I	
196835	5/25/12	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
196836	5/25/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	4.00		62.00	I	
196837	5/25/12	010195	ROBERT MURAYAMA-GREENBAUN	GREENBAUN, MASA	3.00		51.00	I	
196838	5/25/12	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I	
196839	5/25/12	010352	BETTIE GIACOMO	GIACOMO, BETTIE	4.00		62.00	I	
196840	5/25/12	010375	DOMINICA IRAOLA	IRAOLA, LILIAN	15.00		243.75	I	
196841	5/25/12	010377	DOMINICA IRAOLA	IRAOLA, ANTONIO	15.00		243.75	I	
196842	5/25/12	010529	STEPHEN WEISS	WEISS, STELLA	8.00		136.00	I	
196843	5/25/12	010530	DANA SITILDES	ANSELMI, PETER	24.00		384.00	I	
				CATEGORY	484.25	0.00	7,699.39		
				LOCATION	22,539.75	0.00	346,551.11		
				COMPANY	22,539.75		346,551.11		

RUN DATE 05/30/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 335
SALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

CALES JRNL # 0283 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 6/01/12

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

THIS PAGE INTENTIONALLY BLANK