RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE

INVOICE# DATE

PAGE 1 - 1 SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 5/17/13 CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS

241768	5/10/13	000082	SENIOR HEALTH PARTI	NERS ALVAREZ, ANGELA ANDERSON, BETH NERS ANDERSON, BETH APOSTOLOVA, LJU NERS BROOKS, NATALIE NERS COLON, RAYMUNDA NERS CUEVA, RAFAELA DEJESUS, YSABEL NERS ESCANIO, ANTONI NERS ESTRADA, MIRIAM NERS GARCIA, VICTORI NERS GARTSTEIN, LILL NERS HARIDIN, RAMDIA NERS MATONO, BAR MALDONADO, VICE NERS MALDONADO, VICE NERS MALDONADO, VICE NERS MARTINEZ 2, EMM NERS MATOS, AUREA NERS MATOS, ISABEL NERS RAMOS, ISABEL RAMOS, ISABEL NERS RAMOS, ISABEL NERS RAMOS, ISABEL NERS RAMOS, ISABEL	4.00	56.96	I	
241769	5/10/13	000082	SENIOR HEALTH PARTI	NERS ANDERSON, BETH	56.00	797.44	I	
241770	5/10/13	000082	SENIOR HEALTH PARTI	NERS APOSTOLOVA, LJU	60.00	854.40	I	
241771	5/10/13	000082	SENIOR HEALTH PARTI	NERS BROOKS, NATALIE	22.00	313.28	I	
241772	5/10/13	000082	SENTOR HEALTH PARTI	NERS COLON, RAYMINDA	35.00	498.40	I	
241773	5/10/13	000082	SENTOR HEALTH PARTI	NERS CHEVA RAFAELA	84.00	1.196.16	Ī	
241774	5/10/13	000082	SENTOR HEALTH PARTI	NERS DEJESTIS YSABEL	12 00	170 88	Ī	
241775	5/10/13	000082	SENTOR HEALTH PARTI	NERS ESCANTO ANTONI	14 00	199 36	Ī	
241776	5/10/13	000082	SENTOR HEALTH PARTI	NERS ESTRADA MIRIAM	44 00	626 56	Ī	
241777	5/10/13	000082	SENTOR HEALTH DARTH	NERS FILLER WILLIAM	70.00	996 80	Ī	
241778	5/10/13	000082	SENTOR HEALTH DARTH	NERS GARCIA VICTORI	20.00	284 80	Ī	
241779	5/10/13	000082	SENIOR HEALTH DARTH	NERS CHILIOTTY FLOR	32 00	455 68	Ī	
241780	5/10/13	000082	SENIOR HEALTH DARTH	NERS GOODWIN CLVDE	70 00	996 80	Ī	
241781	5/10/13	000082	SENIOR HEALTH DARTH	NERS GRAESTEIN LILL	3 00	600.00	Ī	
241782	5/10/13	000082	CENTOR HEALTH DARTH	MEDG UNDIDIN KUNMAT	34 25	487 72	Ī	
241783	4/26/13	000082	SENIOR HEALTH DARTH	NERS HARIDIN, KHAMAI	8 00	113 92	I	
241784	5/10/13	000082	SENIOR HEALTH DARTH	NERS HARIDIN, KANDIA	127 00	1 808 48	Ī	
241785	5/10/13	000082	SENIOR HEALTH DARTH	NERS HARLEY ETHEL	4 00	56 96	Ī	
241786	5/10/13	000082	SENIOR HEALTH PARTI	NERS HARLEI, EIHEL NEDC HEDNANDES EDAN	41 00	583 84	I	
241787	4/26/13	000082	SENIOR HEALTH PARTI	MEDS HERNANDEZ, FRAN	42.00	502.04	I	
241788	5/03/13	000082	SENIOR HEALTH PARTI	MEDS KATRAMADOS, BAR	42.00	598.08	I	
241789	5/10/13	000082	SENIOR HEALTH PARTI	MEDS KAIKAMADOS, BAK	7 00	1 400 00	I	
241790	5/10/13	000082	CENTOR HEALTH PARTI	MERC MAIDONADO, MAKI	1.00	2,400.00	I	
241791	5/10/13	000082	SENIOR REALIR PARTI	NERS MADDONADO, VICE NEDO MADTINEZ O EMM	4.00	56 06	I	
241791	5/10/13	000082	SENIOR REALIR PARTS	NEDO MARTINEZ Z, EMM	3 00	42 72	I	
241793	5/10/13	000082	SENIOR HEALTH PARTI	MEDS MARTINEZ Z, EMM	4 00	56 96	I	
241794	5/10/13	000082	SENIOR HEALTH PARTI	MEDS MATTINEZ, ROSAR	47 00	669.28	I	
241795	5/03/13	000082	SENIOR HEALTH PARTI	MEDS MAVNADO ITILITA	42 00	598 08	I	
241796	5/10/13	000082	SENIOR HEALTH PARTI	MEDS MEDCADO FINA	40.00	569.60	I	
241797	5/10/13	000082	CENTOR HEALTH PARTI	NERC MODOCHO MANUEL	76 00	1 002 24	I	
241798	5/10/13	000082	CENTOR HEALTH PARTI	MERC OPTI CANTIACO	50.00	712.00	I	
241799	5/10/13	000082	SENIOR REALIR PARTI	NERS ORIIZ, SANIIAGO	12.00	170 00	I	
241799	5/10/13	000082	SENIOR REALIR PARTI	NERS OSBORNE, DOROTH	40.00	560 60	I	
241801	5/10/13	000082	SENIOR REALIR PARTI	NERS PERALIA, ANIONI NEDO DOIANGO ANTONI	24 00	2/1 76	I	
241801	5/10/13	000082	SENIOR REALIR PARTI	NERS POLANCO, ANIONI NEDO DOIANCO DAMON	12 00	170 00	I	
241802	5/10/13	000082	SENIOR REALIR PARTI	NERS POLANCO, KAMON NEDO DAMOO TOADET	26.00	512 64	I	
241803	5/10/13	000082	SENIOR REALIR PARTI	NERS RAMOS, ISABEL NEDC DAMOC ICADEI	4.00	57.00	I	
241804	5/10/13	000082	SENIOR REALIR PARTI	NERS RAMOS, ISABEL NEDO DIVEDA DDICIDA	4.00	655 04	I	
241805	5/10/13	000082	SENIOR REALIR PARTI	NERS RIVERA, BRIGIDA	7 00	1 400 00	I	
241807	5/10/13	000082	SENIOR REALIR PARTI	NERS RODRIGUEZ, PAUL	16.00	1,400.00	I	
241807	5/10/13	000082	SENIOR REALIR PARTI	NERS ROSA, CARMEN	50.00	227.04	I	
		000082	SENIOR REALIR PARTI	NERS RUSADU, CARMEN	10.00	054.40		
241809 241810	5/10/13 5/10/13	000082	CENTOD REVILLE DAUGH	NEDO CALTODIO CADMO	10.00	230.32 170 00	I	
241810	5/03/13	000082	SENIOR DEVILLE LAKII	NEDO SALICKUP, CARME	16.00	170.88	I	
241812	5/03/13	000082	CENTOR DEALTH PARTI	NEDO CIEDDA DOMINGA	64 00	227.04 011 26	I	
241813	5/10/13	000082	CENTOR DEALTH PARTI	NEDO CIEDDA MIDIAM	40 00	511.30 570 00	I	
241813	5/10/13	000082	CENTOR DEALTH PARTI	NEDO CIMON LIDE	Q 00	112 02	I	
241814	5/10/13	000082	CENTOD REVILLE DARKII	NEDC COTO ACRIDINA	20 00	113.92	I	
241815	5/10/13	000082	SENIOR DEVIAD DADA	NEDC TODDEC ANTONIA	∠U.UU 7 ∩∩	1 400 00	I	
241010	5/10/13	000002	SENIOR REALIR PARII	NERD TORRED, ANIONIA	7.00	1,400.00	Τ.	

RUN DATE 05/1 SALES JRNL #	15/13 - SUP SUNN 0333 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E		R		PAGE 2 SHP SENIOR HE BILL WEEK ENI	CALTH PARTNERS
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS
241818 5/1 241819 5/1 241820 5/1	10/13 000082 10/13 000082 10/13 000082 10/13 000082 10/13 000082	SENIOR HEALTH PARTNERS	TORRES, JOSE TORRESCAMPOS, J WOO, LUZ WOO, LUZ ZAPATA, SIMON	20.00 40.00 12.00 4.00 12.00		284.80 569.60 170.88 56.96 170.88	I I I I
			CUSTOMER	1,631.25	0.00	28,430.72	
			CATEGORY	1,631.25	0.00	28,430.72	

RUN DATE SALES JRN	, - , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- HCG7	3
SALES OWN	иш # 0333	100 001		ALES REGISTER			BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241822	5/10/13	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	56.00		899.36	I	
241823	5/10/13	000008	VISITING NURSE SERVICE	ACOSTA, ALBERTO	35.00		562.10	I	
241824	5/10/13	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		401.50	I	
241825	5/10/13	000008	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		562.10	I	
241826	5/10/13	000008	VISITING NURSE SERVICE	ADAMS, MYRIAM	60.00		963.60	I	
241827	5/10/13	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	5.99		1,154.39	I	
241828	5/10/13	800000	VISITING NURSE SERVICE	AFZAL, AMIR	4.00		64.24	I	
				CUSTOMER	220.99	0.00	4,607.29		
				CATEGORY	220.99	0.00	4,607.29		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - CCL CONGREGATE C	4 ARE PROGRAM
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241829	5/10/13	000008	VISITING NURSE SERVICE	AGUILAR, ZORAID	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	5
SALES JRN	ъ # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241830	5/10/13	000008	VISITING NURSE SERVICE	AHMED, BALAL	12.75		204.77 I	
241831	5/10/13	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		321.20 I	
				CUSTOMER	32.75	0.00	525.97	
				CATEGORY	32.75	0.00	525.97	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	6
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241832	5/10/13	800000	VISITING NURSE SERVICE	ALBER, ARLENE	5.75		92.35 I	
				CATEGORY	5.75	0.00	92.35	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	7
SALES JRI	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241833	5/10/13	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	25.00		401.50 I	
				CATEGORY	25.00	0.00	401.50	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	8
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK E	NDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241834	5/10/13	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	41.00		658.46	I	
				CATEGORY	41.00	0.00	658.46		

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	9	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA	
ı					SALES REGISTER			BILL WEEK ENDIN	IG 5/17/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
	241835	5/10/13	800000	VISITING NURSE SERVICE	ALVAREZ, DALILA	20.00		321.20 I	-	
					CATEGORY	20.00	0.00	321.20		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADULT	10
	- "			SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241836	5/10/13	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	CSA	
T1770 T GT	D	G11GE 110		SALES REGISTER			BILL WEEK END		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241837	5/10/13	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	40.00		642.40	I	
241838	5/10/13	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	20.00		321.20	I	
241839	5/10/13	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	56.00		899.36	I	
241840	5/10/13	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	60.75		975.65	I	
241841	5/10/13	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	56.00		899.36	I	
				CUSTOMER	232.75	0.00	3,737.97		
				CATEGORY	232.75	0.00	3,737.97		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
241842	5/10/13	800000	VISITING NURSE SERVICE	ANGULO, ELCY	35.00		562.10	I
				CATEGORY	35.00	0.00	562.10	

			YSIDE CITYWIDE					11102 1	- 1	.3
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	-	NY	_		VCP CHOICE L		E /1 E /1 O
			:	SALES R	EGISTE	R		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241843	5/10/13	000008	VISITING NURSE SERVICE	ANUT,	ALICE	61.00		979.66	I	
241844	5/10/13	800000	VISITING NURSE SERVICE	AOUN,	ODETTE	24.00		385.44	I	
					CUSTOMER	 85.00	0.00	1,365.10		
					COSTOMER	03.00	0.00	1,303.10		
					CATEGORY	85.00	0.00	1,365.10		

RUN DATE 05/15/13						PAGE 1 - 14	•
SALES JRNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/17/13
			SALES REGISIER			BILL WEEK ENDING	5/1//13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241845 5/10/13 241846 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ARANCIBIA, SYLV ARIAS, MAGDALEN	16.00 55.25		256.96 I 887.32 I	
			CUSTOMER	71.25	0.00	1,144.28	
			CATEGORY	71.25	0.00	1,144.28	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	15
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241847	5/10/13	800000	VISITING NURSE SERVICE	AZAD, ABUL	13.75		220.83 I	
				CATEGORY	13.75	0.00	220.83	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	16
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241848	5/10/13	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	12.00		192.72 I	
				CATEGORY	12.00	0.00	192.72	
				CATEGORI	12.00	0.00	174.14	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L7
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	•
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	21112	0001 110		1121 21131102	110 0112	11111 11111	11100111 111	50111 205
241849	5/10/13	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATI	E 05/15/13 ·	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	18	
SALES J	RNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA.	
				SALES REGISTER			BILL WEEK ENDIN	rG 5/17/13	
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
241850	5/10/13	800000	VISITING NURSE SERVICE	BANEGAS, SANTOS	20.00		321.20 I		
				CATEGORY	20.00	0.00	321.20		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	19
Bridde Grav	I 0333	100 001		SALES REGISTER			BILL WEEK ENDI	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
241851 241852	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ /	31.75 42.00		509.91 674.52	I I
				CUSTOMER	73.75	0.00	1,184.43	
				CATEGORY	73.75	0.00	1,184.43	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	20	
SALES JRN	NL # 0333	LOC 001		REG NY NY			VCP CHOICE LHCS		
			\$	SALES REGISTER			BILL WEEK ENDIN	G 5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
241853	5/10/13	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		112.42 I		
				CATEGORY	7.00	0.00	112.42		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	21
BALLO OICE	ш н 0555	100 001		ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241854 241855	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BATTLE, MARY BENNETT, ROBIN	4.00		64.24 I 64.24 I	
				CUSTOMER	8.00	0.00	128.48	
				CATEGORY	8.00	0.00	128.48	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	22
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	241856	5/10/13	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	33.00		529.98 I	
ı									
ı									
ı					CATEGORY	33.00	0.00	529.98	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	23
SALES JRN	1L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241857	5/10/13	800000	VISITING NURSE SERVICE	BHATT, JYOTI	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING 5	/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
ı									
ı	241858	5/10/13	000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	22.50		361.35 I	
ı									
ı									
ı					CATEGORY	22.50	0.00	361.35	

			YSIDE CITYWIDE				PAGE 1	-	25
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LE		5/17/13
				SALES REGISIER			DILL MEEK EMI	JING	3/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241050	F /10 /12	000000	THE CHARLES OF THE CONTROL OF THE CO		40.00		640.40	-	
241859 241860	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		40.00 40.00		642.40 642.40	T	
211000	3/10/13	000000	VIBITING NORDE BERVICE	BLANCAI LOIC, TOR					
				CUSTOMER	80.00	0.00	1,284.80		
				CATEGORY	80.00	0.00	1,284.80		

			YSIDE CITYWIDE				PAGE 1 -	26
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 5/17/13
			5	ALES REGISTER			DILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241861	5/10/13	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	18.00		289.08 I	
				CATEGORY	18.00	0.00	289.08	

			YSIDE CITYWIDE				PAGE 1 - 2	27
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/17/13
			'	SALES REGISIER			BILL WEEK ENDING	5/1//13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241862	5/10/13	000008	VISITING NURSE SERVICE	~ ~ ~ ,	23.50		377.41 I	
241863	5/10/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		321.20 I	
				CUSTOMER	43.50	0.00	698.61	
				0021011210	13.30	0.00	050.01	
				CATEGORY	43.50	0.00	698.61	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	28
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241064	F /10 /13	00000	THE THE NEW AND A CONTROL	DOMGTONODE CAR	25 20		401 FO T	
241864	5/10/13	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		401.50 I	
				CATEGORY	25.00	0.00	401.50	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	29
SALES JRN	NL # 0333	LOC 001		REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241865	5/10/13	800000	VISITING NURSE SERVICE	BORGES, MARINA	12.00		192.72 I	
				CATEGORY	12.00	0.00		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	50
DALLS OIL	ш # 0333	HOC 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
241866	5/10/13	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		192.72	I
241867	5/10/13	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		562.10	I
241868	5/10/13	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	70.00		1,124.20	I
241869	5/10/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	84.00		1,349.04	I
241870	5/10/13	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		144.54	I
241871	5/10/13	800000	VISITING NURSE SERVICE	BURITICA, INES	25.00		401.50	I
				CUSTOMER	235.00	0.00	3,774.10	
				CATEGORY	235.00	0.00	3,774.10	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	31
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
0.41.000	E /10 /10							
241872	5/10/13	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE 05/15/13 SALES JRNL # 0333	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI	ICSA	32 5/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241873 5/10/13 241874 5/10/13 241875 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CABA, PURA CABRERA, HERMIN CAIPO, MATILDE	10.00 20.00 35.00		160.60 321.20 562.10	I I I	
			CUSTOMER	65.00	0.00	1,043.90		
			CATEGORY	65.00	0.00	1,043.90		

			YSIDE CITYWIDE					33
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL'	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241876	5/10/13	800000	VISITING NURSE SERVICE	CAJJEJAS, MERCE	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
ı				5	SALES REGISTER			BILL WEEK ENDING	5/17/13	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	241877	5/10/13	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	70.00		1,124.20 I		
					CATEGORY	70.00	0.00	1,124.20		

RUN DATE SALES JRN				REG NY NY ALES REGISTER			PAGE 1 - VCM VNS BILL WEEK ENDING	35 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241878	5/10/13	000008	VISITING NURSE SERVICE	CALDERON, FRANC	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	NL # 0333	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
241879	5/10/13	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		899.36 I	
				CATEGORY	56.00	0.00		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	37
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241880	5/10/13	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		674.52 I	
				CATEGORY	42.00	0.00	674.52	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		38
SALES OIM	ш # 0555	100 001		ALES REGISTER			BILL WEEK END		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241881	5/10/13	000008	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,349.04	I	
241882	5/10/13	800000	VISITING NURSE SERVICE	CARDONA, MARIA	35.00		562.10	I	
241883	5/10/13	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	84.00		1,349.04	I	
241884	5/10/13	000008	VISITING NURSE SERVICE	CARELA-REYES, M	25.00		401.50	I	
241885	5/10/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	20.00		321.20	I	
				CUSTOMER	248.00	0.00	3,982.88		
				CATEGORY	248.00	0.00	3,982.88		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	39
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241886	5/10/13	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	55.25		887.32 I	
				CATEGORY	55.25	0.00	 887.32	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_ 4	40
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241887	4/26/13	000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	7.00		112.42	I	
241888	5/10/13	800000	VISITING NURSE SERVICE	CASTANEDA, JOSE	42.00		674.52	I	
				CUSTOMER	49.00	0.00	786.94		
				CATEGORY	49.00	0.00	786.94		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	41 G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241889	5/10/13	800000	VISITING NURSE SERVICE	CAVATAIO, MILDR	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE	DEC MY MY			11102		12
SALES URN	ш # 0333	TOC 001	SUNNYSIDE CITYWIDE S A	REGNY NY LES REGISTER			VCP CHOICE LI BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241890	5/10/13	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		321.20	т	
	-, -, -			· · · · · · · · · · · · · · · · · · ·					
241891	5/10/13	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	28.00		449.68	Τ	
241892	5/10/13	800000	VISITING NURSE SERVICE	CERRA, ADA	12.00		192.72	I	
241893	5/10/13	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	22.00		353.32	I	
241894	5/10/13	800000	VISITING NURSE SERVICE	CHARITAR, RAMKA	36.25		582.18	I	
241895	5/10/13	000008	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		481.80	I	
241896	5/03/13	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	7.25		116.44	I	
241897	5/10/13	000008	VISITING NURSE SERVICE	CHAUCA, PEDRO	68.00		1,092.08	I	
241898	5/10/13	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	40.00		642.40	I	
241899	5/10/13	800000	VISITING NURSE SERVICE	CHINGA, CELESTE	30.00		481.80	I	
				CUSTOMER	293.50	0.00	4,713.62		
				CATEGORY	293.50	0.00	4,713.62		

- 1				YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	43
		- "			SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	241900	5/10/13	000008	VISITING NURSE SERVICE	CHOPRA, DARSHAN	42.00		674.52 I	
ı					CATEGORY	42.00	0.00	674.52	

RUN DATE 0		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	44
SALES ORNE	# 0333	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· ·	30.00		481.80 I 481.80 I	
				CUSTOMER	60.00	0.00	963.60	
				CATEGORY	60.00	0.00	963.60	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	45
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241903	5/10/13	000008	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 4	6
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241904	5/10/13	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		321.20	I	
241905	5/10/13	800000	VISITING NURSE SERVICE	COLLER, JOSE	20.00		321.20	I	
241906	5/10/13	800000	VISITING NURSE SERVICE	COLON, ANTONIA	36.00		578.16	I	
				CUSTOMER	76.00	0.00	1,220.56		
				CATEGORY	76.00	0.00	1,220.56		

			YSIDE CITYWIDE				PAGE 1 - 47	
SALES JRN	L # 0333	LOC 001		REGNY NY SALES REGISTER			CCL CONGREGATE CARE PROGR BILL WEEK ENDING 5/17/1	
				SALES REGISIER			BILL WEEK ENDING 5/17/1	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
041005	E /10 /10				1.60.00		0.500.00	
241907	5/10/13	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,698.08 I	
								_
				CATEGORY	168.00	0.00	2,698.08	

			YSIDE CITYWIDE				PAGE 1 - 48	
SALES JRN	ı∟ # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING 5	/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
241908	5/10/13	000008	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		481.80 I	
241909	5/10/13	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		321.20 I	
				CUSTOMER	50.00	0.00	803.00	
				CATEGORY	50.00	0.00	803.00	

RUN DATE (05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 4	9
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241910	5/03/13	800000	VISITING NURSE SERVICE	COSTA, ARSENE	7.00		112.42 I	
241911	5/10/13	000008	VISITING NURSE SERVICE	COSTA, ARSENE	54.00		867.24 I	
				CUSTOMER	61.00	0.00	979.66	
				CATEGORY	61.00	0.00	979.66	

RUN DATE 05/15/ SALES JRNL # 03			REG NY NY			PAGE 1 ADU ADULT	-	50
			SALES REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241912 5/03/ 241913 5/10/		VISITING NURSE SERVICE VISITING NURSE SERVICE	COVALIU, SIMION COVALIU, SIMION	4.00 15.25		64.24 244.92	I	
211713 3/10/	15 000000	VIBITING NORDE BERVICE	CUSTOMER	19.25	0.00	309.16		
			CUSTOMER	19.25	0.00	309.10		
			CATEGORY	19.25	0.00	309.16		

RUN DATE (SALES JRN)		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY N'				PAGE 1 HOA HOSPICE 2 BILL WEEK EN	ADULT	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241914	5/10/13	800000	VISITING NURSE SERVICE	COX, PI	ETRA	20.00		321.20	I	
				(CATEGORY	20.00	0.00	321.20		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	52
SALES UKN	ш # 0333	TOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
241915	5/10/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	69.75		1,120.19 I	
				CATEGORY	69.75	0.00	1,120.19	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	53
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	241916	5/10/13	000008	VISITING NURSE SERVICE	CRUZ, HECTOR	33.50		538.01 I	
ı									
ı									
ı					CATEGORY	33.50	0.00	538.01	

			YSIDE CITYWIDE	DEG 177						54
SALES JRN	IL # 0333	LOC 001		-	NY EGISTEI	R		VCP CHOICE LE		5/17/13
			_							
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241917	5/10/13	000008	VISITING NURSE SERVICE	CRUZ,	JUANA	19.25		309.16	I	
241918	5/10/13	800000	VISITING NURSE SERVICE	CRUZ,	LIDIA	35.00		562.10	I	
					CUSTOMER	 54.25	0.00	871.26		
					CATEGORY	54.25	0.00	871.26		

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	55
ı	SALES JRN	L # 0333	LOC 001		REG NY NY			LTC NURSING HOMEW/	•
ı				\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	241919	5/10/13	800000	VISITING NURSE SERVICE	DAMICO, ANGELA	25.00		401.50 I	
					CATEGORY	25.00	0.00	401.50	
- 1					CATEGORI	23.00	0.00	101.50	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	56
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	J
			S	SALES REGISTER			BILL WEEK ENDING	5 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241920	5/10/13	000008	VISITING NURSE SERVICE	DAVIS, LOUELLEN	42.00		674.52 I	
				CATEGORY	42.00	0.00	674.52	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	57
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241921	5/10/13	800000	VISITING NURSE SERVICE	DE LA HOZ, RUTH	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		58
			S	SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241922	5/10/13	000008	VISITING NURSE SERVICE	DEBARRENECHE, E	35.00		562.10	I	
241923	5/10/13	800000	VISITING NURSE SERVICE	DEBAZALAR, ANTO	18.00		289.08	I	
241924	5/10/13	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	37.75		606.27	I	
				CUSTOMER	90.75	0.00	1,457.45		
				CATEGORY	90.75	0.00	1,457.45		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 59 ADU ADULT)
DALLS OWN	ш # 0333	100 001		SALES REGISTER				5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241925 241926	5/10/13 4/26/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00		96.36 I 96.36 I	
241927	5/10/13	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA CUSTOMER	28.00 40.00	0.00	449.68 I 642.40	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	, - , -		YSIDE CITYWIDE				11102		50
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTE	R		BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241928	5/10/13	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	8.00		128.48	I	
241929	5/10/13	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	4.00		64.24	I	
241930	5/10/13	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	28.00		449.68	I	
241931	5/10/13	000008	VISITING NURSE SERVICE	DEY, KRISHNA	9.00		144.54	I	
241932	5/10/13	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	57.00		915.42	I	
				CUSTOMER	106.00	0.00	1,702.36		
				CATEGORY	106.00	0.00	1,702.36		

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY N				PAGE 1 – ADU ADULT	61
				SALES RE				BILL WEEK ENDING	-, , -
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER		HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241933	5/10/13	000008	VISITING NURSE SERVICE	DIAZ,	ELEODORA	28.75		461.73 I	
					CATEGORY	28.75	0.00	461.73	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	241934	5/10/13	800000	VISITING NURSE SERVICE	DIAZ, HILDA	45.75		734.75 I	
ı									
ı									
ı					CATEGORY	45.75	0.00	734.75	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE						PAGE 1	_	63
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITY			NΥ			VCP CHOICE L		
				S A	LES R	EGIST	E R		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241935	5/10/13	800000	VISITING NURSE S	SERVICE	DIAZ,	OLGA	53.50		859.21	I	
241936	5/10/13	800000	VISITING NURSE S	SERVICE	DIAZ,	ROSA	41.75		670.51	I	
241937	5/10/13	800000	VISITING NURSE S	SERVICE	DIAZ,	WILLIAM	49.25		790.96	I	
						CUSTOMER	144.50	0.00	2,320.68		
						CATEGORY	144.50	0.00	2,320.68		

			YSIDE CITYWIDE				-	64
SALES JRN	L # 0333	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/17/13
				SALES KEGISIEK			BILL WEEK ENDING	3/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241938	5/10/13	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	73.75		1,184.43 I	
				CATEGORY	73.75	0.00	1,184.43	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	65
DALLO OIGN	ш н 0555	100 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
241939 241940	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	DOMINGUEZ, MARI DOMINGUEZ-REIN,	35.50 20.00		570.13 I 321.20 I	
				CUSTOMER	55.50	0.00	891.33	
				CATEGORY	55.50	0.00	891.33	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	66 G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
241941	5/10/13	800000	VISITING NURSE SERVICE	DONA, ISABEL	8.25		132.50 I	
				CATEGORY	8.25	0.00	132.50	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	67	
SALES JRN	ь # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
241942	5/10/13	000008	VISITING NURSE SERVICE	DUTAN, SELINDA	40.00		642.40 I		
				CATEGORY	40.00	0.00	642.40		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	8
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241943	5/10/13	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241944	5/10/13	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	41.50		666.50 I	
				CATEGORY	41.50	0.00	666.50	

RUN DATE 05/15/						PAGE 1 - 70
SALES JRNL # 03	33 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 5/17/13
						DIED WEEK ENDING 3/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
241945 5/10/	13 000008	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		240.90 I
241946 5/10/	13 000008	VISITING NURSE SERVICE	ELMANSOURY, XEN	9.00		144.54 I
			CUSTOMER	24.00	0.00	385.44
			CATEGORY	24.00	0.00	385.44

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	71
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241947	5/10/13	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	72
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241948	5/10/13	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	16.00		256.96 I	
				CATEGORY	16.00	0.00	256.96	

- 1				YSIDE CITYWIDE					73
	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	241949	5/10/13	800000	VISITING NURSE SERVICE	ERAZO, ROSA	12.00		192.72 I	
					CATEGORY	12.00	0.00		

RUN DATE SALES JRN			JYSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REG NY NY LES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241950	5/10/13	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	75 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241951	5/03/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	!SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
241952	5/10/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	56.00		899.36	I
				CATEGORY	56.00	0.00	899.36	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 7 ADU ADULT	17
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241953	5/10/13	800000	VISITING NURSE SERVICE	,	25.00		401.50 I	
241954 241955	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 18.00		192.72 I 289.08 I	
241)33	3/10/13	000000	VISITING NORSE SERVICE	ESTADES, MAKTA				
				CUSTOMER	55.00	0.00	883.30	
				CATEGORY	55.00	0.00	883.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - T	78
SALES UKN	ш # 0333	LOC 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241956 241957	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ESTADES, MARIA EVERETT, SHIRLE	24.00 21.00		385.44 I 337.26 I	
				CUSTOMER	45.00	0.00	722.70	
				CATEGORY	45.00	0.00	722.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	79
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241958	5/10/13	000008	VISITING NURSE SERVICE	FADEN, ROBIN	68.25		1,096.10 I	
241959 241960	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FAMBIATOU, PARA FAROUGIAS, ANGE	4.00 9.00		64.24 I 144.54 I	
241961	5/10/13	000008	VISITING NURSE SERVICE	FAY, JULIA	24.00		385.44 I	
				CUSTOMER	105.25	0.00	1,690.32	
				CATEGORY	105.25	0.00	1,690.32	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	80
SALES JRN	rL # 0333	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241962	5/10/13	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	81
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			i	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241963	5/10/13	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	~ —
SALES URN	ш # 0333	TOC 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
241964 241965	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 27.25		96.36 437.64	I
				CUSTOMER	33.25	0.00	534.00	
				CATEGORY	33.25	0.00	534.00	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	83
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
			\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241966	5/10/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	18.00		289.08 I	
				CATEGORY	18.00	0.00	289.08	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	84
SALES URN	ш # 0333	TOC 001		SALES REGISTER	2		BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241967 241968	5/03/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 30.00		192.72 I 481.80 I	
241700	3/10/13	000000	VISITING NORSE SERVICE	CUSTOMER	42.00	0.00	401.00 I 674.52	
				CUSTOMER	42.00	0.00	0/4.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE 05	5/15/13 - SUP S	SUNNYSIDE CITYWIDE				PAGE 1	- 8	5
SALES JRNL	# 0333 LOC 0	001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			SALES REGIST	E R		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241969 4	1/26/13 00000	08 VISITING NURSE SERV	CE FIUMARA, ROSE	8.00		128.48	I	
241970 5	5/10/13 00000	08 VISITING NURSE SERV	CE FIUMARA, ROSE	52.50		843.15	I	
			CUSTOMER	60.50	0.00	971.63		
			CATEGORY	60.50	0.00	971.63		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	6
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241971	5/10/13	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 87	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241972	5/10/13	000008	VISITING NURSE SERVICE	FONG, ALEFINA	15.00		240.90 I	
241973	5/10/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		562.10 I	
				CUSTOMER	50.00	0.00	803.00	
				CATEGORY	50.00	0.00	803.00	

			YSIDE CITYWIDE					88
SALES JRN	L # 0333	LOC 001		REG NY NY			LTC NURSING HOMEW,	•
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241974	5/10/13	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	36.50		586.19 I	
				CATEGORY	36.50	0.00	586.19	

			YSIDE CITYWIDE				PAGE 1 -	0,5
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHO	
							DIEE WEEK END.	1110 3/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
241975 241976	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		36.50 9.00		586.19 144.54	I
				CUSTOMER	45.50	0.00	730.73	
				CATEGORY	45.50	0.00	730.73	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	90
SALES JRN	L # 0333	LOC 001		REG NY NY			LTC NURSING HOME	
			i	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241977	5/10/13	800000	VISITING NURSE SERVICE	GARAY, ANGELES	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 9 ADU ADULT	91
SALES UKN	ш # 0333	HOC 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241978 241979	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · ·	4.00 15.00		64.24 I 240.90 I	
				CUSTOMER	19.00	0.00	305.14	
				CATEGORY	19.00	0.00	305.14	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	92
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	
ı					SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	241980	5/10/13	000008	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		481.80 I	
					CATEGORY	30.00	0.00	481.80	

	05/15/13 - NL # 0333		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	93 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241981	5/10/13	800000	VISITING NURSE SERVICE	GARCIA, URANIA	15.00		240.90 I	
				CATEGORY	15.00	0.00		

			YSIDE CITYWIDE				PAGE 1 -	94
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDING	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241982	5/10/13	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	40.00		642.40 I	
241983	5/10/13	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	28.00		449.68 I	
				CUSTOMER	68.00	0.00	1,092.08	
				CODICIEN	00.00	0.00	1,002.00	
							1 000 00	
1				CATEGORY	68.00	0.00	1,092.08	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	95
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241984	5/10/13	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	47.50		762.85 I	
				CATEGORY	47.50	0.00	762.85	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
241985	5/10/13	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.50		409.53 I	
				CATEGORY	25.50	0.00	409.53	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 9	7
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK END	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241986	5/10/13	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	34.25		550.06	I	
241987	5/10/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	33.50		538.01	I	
				CUSTOMER	67.75	0.00	1,088.07		
				CATEGORY	67.75	0.00	1,088.07		

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	IG 5/17/13
INVOICE;	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241988	5/10/13	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	35.00		562.10 I	
				CATEGORY	35.00	0.00	562.10	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	99
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			:	SALES REGISTE	R		BILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
241989	4/19/13	000008	VISITING NURSE SERVICE	GONZALEZ, ELBA	10.00		160.60 I	
241990	4/26/13	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	25.00		401.50 I	
				CUSTOMER	35.00	0.00	562.10	
				CATEGORY	35.00	0.00	562.10	

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 - 1 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241991	5/10/13	800000	VISITING NURSE SERVICE	GONZALEZ, JOSEF	25.00		401.50 I	
				CATEGORY	25.00	0.00	401.50	

RUN DAT	E 05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L01
SALES J	RNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241992	5/10/13	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	21.00		337.26 I	
				CATEGORY	21.00	0.00	337.26	

RUN DATE			IYSIDE CITYWIDE	DEC MY MY				- 10)2
SALES JRN	⊔ # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		5/17/13
				ALES KEGISIEK	•		DILL WEEK ENI	JING	3/1//13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
241993	5/10/13	000008	VISITING NURSE SERVICE	GOYES, ELBA	4.00		64.24	I	
241994	5/10/13	800000	VISITING NURSE SERVICE	GRAVER, EDNA	40.00		642.40	I	
241995	4/26/13	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	14.00		224.84	I	
241996	5/10/13	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	39.50		634.38	I	
241997	5/10/13	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	72.00		1,156.32	I	
241998	5/10/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	71.50		1,148.30	I	
				CUSTOMER	241.00	0.00	3,870.48		
				CATEGORY	241.00	0.00	3,870.48		
				CALEGORY	Z41.00	0.00	3,870.48		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	03
Brille order	L 0333	100 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
241999	5/10/13	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	56.00		899.36 I	
				CATEGORY	56.00	0.00	899.36	

RUN DATE 05/15 SALES JRNL # 0		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 10 VCP CHOICE LHCSA BILL WEEK ENDING	4 5/17/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242000 4/26 242001 5/10 242002 5/10	/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HARRISON, GLORI HARRISON, GLORI HENAO, VICTORIA	8.00 59.00 20.00		128.48 I 947.54 I 321.20 I	
			CUSTOMER	87.00	0.00	1,397.22	
			CATEGORY	87.00	0.00	1,397.22	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L05
SALES JRN	և # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL	
			\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242003	5/10/13	800000	VISITING NURSE SERVICE	HENDERSON, FAYE	8.25		132.50 I	
				CATEGORY	8.25	0.00	132.50	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242004	5/10/13	800000	VISITING NURSE SERVICE	HENDY, BERNICE	29.00		465.74	I
				CATEGORY	29.00	0.00	465.74	

				YSIDE CITYWIDE				-	L07
SAI	LES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/17/13
				· ·	SALES REGISIER			BILL MEEK ENDING	5/1//13
IN	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242	2005	5/10/13	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	52.75		847.17 I	
					CATEGORY	52.75	0.00	847.17	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 108	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WA	ALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING 5/1	17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	RPLUS
	242006	5/10/13	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	31.75		509.91 I	
ı									
ı					CATEGORY	31.75	0.00	509.91	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	109
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242007	5/10/13	800000	VISITING NURSE SERVICE	HERRERA, CLARA	16.00		256.96 I	
				CATEGORY	16.00	0.00	256.96	

RUN DATE 05 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 11 HOA HOSPICE ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE C	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242009	5/03/13 0	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HOEPPNER, RAYMO HOEPPNER, RAYMO HOEPPNER, RAYMO	6.00 10.00 15.00		96.36 I 160.60 I 240.90 I	
				CUSTOMER	31.00	0.00	497.86	
				CATEGORY	31.00	0.00	497.86	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.11
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_ , ,_
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242011	5/10/13	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.12
	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS	S ADULT POPUL
				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	242012	5/10/13	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	44.50		714.67 I	
						44.50			
ı					CATEGORY	44.50	0.00	714.67	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY ALES REGISTER			PAGE 1 - 113 MCA MATERNAL CHILD HEALTH ANT BILL WEEK ENDING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
242013	5/10/13	800000	VISITING NURSE SERVICE	JACOME, HAIDEE	20.00		321.20 I
				CATEGORY	20.00	0.00	321.20

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 11 VCP CHOICE LHCSA BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242014 242015	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	27.75 33.50		445.67 I 538.03 I	
				CUSTOMER	61.25	0.00	983.70	
				CATEGORY	61.25	0.00	983.70	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 115 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242016	5/10/13	800000	VISITING NURSE SERVICE	JAMISON, BESSIE	13.50		216.81 I	
				CATEGORY	13.50	0.00	216.81	

			YSIDE CITYWIDE					- 11	.6
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		F /17 /13
				SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242017	5/10/13	000008	VISITING NURSE SERVICE	,	65.00		1,043.90	I	
242018	5/10/13	000008	VISITING NURSE SERVICE	JHAVERI, RAMESH	25.00		401.50	Τ	
				CUSTOMER	90.00	0.00	1,445.40		
				0021011211	20.00	0.00	1,113.10		
				CATEGORY	90.00	0.00	1,445.40		

RUN DATE	05/15/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13	17
SALES JRI	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242019	5/10/13	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	69.50		1,116.17 I	
				CATEGORY	69.50	0.00	1,116.17	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242020 242021	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 42.00		481.80 1 674.52 1	
				CUSTOMER	72.00	0.00	1,156.32	
				CATEGORY	72.00	0.00	1,156.32	

			YSIDE CITYWIDE				PAGE 1 - 119	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING 5/17/1	L3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
0.40000	E /10 /10				4 00		54.04 -	
242022	5/10/13	800000	VISITING NURSE SERVICE	KELLY, PATRICK	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

			YSIDE CITYWIDE				PAGE 1 - 120)
SALES JR	NL # 0333	LOC 001		REG NY NY			HOA HOSPICE ADULT	_ , _ , _ ,
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242023	5/10/13	800000	VISITING NURSE SERVICE	KHAN, MARGARET	19.00		305.14 I	
				CATEGORY	19.00	0.00	305.14	

			YSIDE CITYWIDE					-	- 12	21
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY N SALES RE	Y GISTER			VCP CHOICE L BILL WEEK EN		5/17/13
				ал сацко	GISIEK			PILL MEEK EN	JING	3/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242024	5/10/13	800000	VISITING NURSE SERVICE	KILIML	IAN, PEPR	55.75		895.35	I	
					 CATEGORY	55.75	0.00	895.35		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT		
			S	SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242025	5/10/13	000008	VISITING NURSE SERVICE	KNOWLES, ANAMAR	83.50		1,341.01	I	
242026	5/10/13	000008	VISITING NURSE SERVICE		9.00		144.54	I	
242027	5/10/13	800000	VISITING NURSE SERVICE	KOSKINAS, NIKOL	3.00		48.18	I	
				CUSTOMER	95.50	0.00	1,533.73		
				CATEGORY	95.50	0.00	1,533.73		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	123
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242028	5/10/13	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	8.00		128.48 I	
				CATEGORY	8.00	0.00	 128.48	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242029	5/10/13	800000	VISITING NURSE SERVICE	LAMBERT, HARLEY	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 125	5
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			\$	SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
242030	4/26/13	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	8.00		128.48	I	
242031	5/10/13	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	55.75		895.35	I	
				CUSTOMER	63.75	0.00	1,023.83		
				CATEGORY	63.75	0.00	1,023.83		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242032	5/10/13	800000	VISITING NURSE SERVICE	LASAK, MICHAEL	15.00		240.90 I	
				CATEGORY	15.00	0.00	240.90	

RUN I	DATE 05/15/13	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	L27
SALES	S JRNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	N/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
24203	5/10/13	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	16.00		256.96 I	
				CATEGORY	16.00	0.00	 256.96	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L28
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242034	5/10/13	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	16.00		256.96 I	
				CATEGORY	16.00	0.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	129
SALES URN.	L # 0333	LOC UUI		SALES REGISTER			BILL WEEK ENDI	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
242035 242036	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	9.00 15.75		144.54 252.95	I I
				CUSTOMER	24.75	0.00	397.49	
				CATEGORY	24.75	0.00	397.49	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242037 242038 242039	5/10/13 5/10/13 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LINARES, ELSA LITSAS, MARTHA	56.00 4.00 30.00		899.36 64.24 481.80	I I I	
				CUSTOMER	90.00	0.00	1,445.40		
				CATEGORY	90.00	0.00	1,445.40		

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13	31
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
ı				Š	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	242040	5/10/13	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	3.25		52.20 I	
ı									
ı									
ı					CATEGORY	3.25	0.00	52.20	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 132 ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 5	/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
242041	5/10/13	000008	VISITING NURSE SERVICE	LOCORRIERE, LAR	24.75		397.49 I	
				CATEGORY	24.75	0.00	397.49	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 - 1	L33
SALES JRNI	L # U333	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242042	5/10/13	800000	VISITING NURSE SERVICE	LOGAN, ADELE	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

			YSIDE CITYWIDE				PAGE 1 - 3	
SALES JR	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			•	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242043	5/10/13	800000	VISITING NURSE SERVICE	LOGAN, ADELE	6.00		96.36 I	
				CATEGORY	6.00	0.00	96.36	

			YSIDE CITYWIDE				PAGE 1 -	
SALES J	RNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	G 5/17/13
INVOICE:	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242044	5/10/13	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	69.00		1,108.14 I	
				CATEGORY	69.00	0.00	1,108.14	

RUN DATE	05/15/13 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	136
SALES JRN	1L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			i	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242045	5/10/13	800000	VISITING NURSE SERVICE	LONDONO, MARIA	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	137	
SALES JRN	L # 0333	LOC 001		REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
242046	5/10/13	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	30.50		489.83 I		
				CATEGORY	30.50	0.00	489.83		

	05/15/13 - NL # 0333			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
242047	5/10/13	800000	VISITING NURSE SERVICE	LOPEZ, ISABEL	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.39
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_ , ,_
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242048	5/10/13	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	
1				CALEGORI	20.00	0.00	221.20	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 140	
١	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	GRAM
				5	SALES REGISTER			BILL WEEK ENDING 5/17	/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURF	LUS
	242049	5/10/13	800000	VISITING NURSE SERVICE	LUCES, LETICIA	20.00		321.20 I	
					CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242050	5/10/13	800000	VISITING NURSE SERVICE	LUNA, YSABEL	40.00		642.40 I	
				CATEGORY	40.00	0.00	642.40	

RUN DATE	05/15/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	142
SALES JRI	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
	53.00	GTTGT 170	GUGEOMED MANE	2552254	*******		31401DT	G11D D1 11G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242051	5/10/13	000008	VISITING NURSE SERVICE	LYMN, ANGIE	7.00		112.42 І	
212031	3/10/13	000000	VIBITING NORBE BERVICE	HIM, ANGE	7.00		112.12	
				CATEGORY	7.00	0.00	112.42	

		SUNNYSIDE CITYWID		NTV NTV				- 14	.3
SALES JRNL	# 0333 LOC	001 SUNNYSIDE C	CITYWIDE REG 1 S A L E S				ADU ADULT BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE CUST	NO CUSTOMER NAM	1E	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	5/10/13 0000 5/10/13 0000			LYNCH, JAMES MACCHIA, CATHY	6.00 36.00		96.36 578.16	I I	
				CUSTOMER	42.00	0.00	674.52		
				CATEGORY	42.00	0.00	674.52		

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L44
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242054	5/10/13	800000	VISITING NURSE SERVICE	MADRID, ANA	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 145	
SALES JR	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE I	PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING 5/	/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	URPLUS
242055	5/10/13	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 140 VCP CHOICE LHCSA BILL WEEK ENDING	6 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242056 242057 242058 242059	5/10/13 3/29/13 5/10/13 5/10/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAIO, CHINGTSAI MALDONADO, DOMI MALDONADO, DOMI MALDONADO, MARI	12.00 3.00 12.00 25.00		192.72 I 48.18 I 192.72 I 401.50 I	
				CUSTOMER	52.00	0.00	835.12	
				CATEGORY	52.00	0.00	835.12	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 147	
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WAI	,
			5	SALES REGISTER			BILL WEEK ENDING 5/17	7/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	PLUS
242060	4/19/13	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	7.00		112.42 I	
242061	5/03/13	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	7.00		112.42 I	
242062	5/10/13	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	28.00		449.68 I	
				CUSTOMER	42.00	0.00	674.52	
				CATEGORY	42.00	0.00	674.52	

RUN DATE 05/15/13 SALES JRNL # 0333		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	!SA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242063 5/10/13 242064 5/10/13 242065 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARINO, ANN	56.00 12.00 25.00		899.36 192.72 401.50	I I
			CUSTOMER	93.00	0.00	1,493.58	
			CATEGORY	93.00	0.00	1,493.58	

		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242066	5/10/13	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		690.58 I	
				CATEGORY	43.00	0.00	 690.58	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
242067	5/10/13	800000	VISITING NURSE SERVICE	MARTE, JOSE	8.00		128.48 I	
				CATEGORY	8.00	0.00	128.48	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 151	1
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242068	5/10/13	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	69.00		1,108.14 I	
				CATEGORY	69.00	0.00	1,108.14	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	52 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242069 242070 242071	5/10/13 5/10/13 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARTA MARTINEZ, ROSA	30.00 22.25 40.00		481.80 I 357.34 I 1,349.04 I	
242071	5/10/13	000008	VISITING NURSE SERVICE	MARTINEZ, RUSA CUSTOMER	92.25	0.00	2,188.18	
				CATEGORY	92.25	0.00	2,188.18	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	53
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242072	5/10/13	000008	VISITING NURSE SERVICE	MARTINEZ, ROSAL	36.50		586.19 I	
				CATEGORY	36.50	0.00	586.19	

	TE 05/15/13 -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	L54
			\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242073	5/10/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	7.00		112.42 I	
				CATEGORY	7.00	0.00	112.42	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
			2	SALES REGISTER			BILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242074	F /10 /13	000008	VICINITA NUDGE CEDVICE	MARIOG DOGA	41 00		650 46 5	
242074	5/10/13	000008	VISITING NURSE SERVICE	MATOS, ROSA	41.00		658.46 I	
				CATEGORY	41.00	0.00	658.46	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	156
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242075 242076	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	63.00 168.00		1,011.78 I 2,698.08 I	
				CUSTOMER	231.00	0.00	3,709.86	
				CATEGORY	231.00	0.00	3,709.86	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 15	57
BILLED GIAN	11 11 0333	100 001		SALES REGISTER			BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242077 242078	4/26/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MCGUIRE, HELEN MCGUIRE, HELEN	12.00 84.00		192.72 1,349.04	I I	
				CUSTOMER	96.00	0.00	1,541.76		
				CATEGORY	96.00	0.00	1,541.76		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	158
SALES JRN	ъ # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDIN	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242079	4/26/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	16.00		256.96 I	
242080	5/03/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	4.00		64.24 I	
242081	5/03/13	000008	VISITING NURSE SERVICE	MEGALOUDIS, CAR	12.00		192.72 I	
242082	5/10/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	20.00		321.20 I	
				CUSTOMER	52.00	0.00	835.12	
				CATEGORY	52.00	0.00	835.12	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	9
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			2	SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242083	5/10/13	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	41.00		658.46	I	
242084	5/10/13	000008	VISITING NURSE SERVICE	MEJIA, CLAUDIO	49.00		786.94	I	
				CUSTOMER	90.00	0.00	1,445.40		
				CATEGORY	90.00	0.00	1,445.40		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 16 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242085	5/10/13	800000	VISITING NURSE SERVICE	MEJIA, DINORAH	55.00		883.30 I	
				CATEGORY	55.00	0.00	883.30	

RUN DATE (05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 161	
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 5/17/	13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	JUS
242086	5/10/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	24.00		385.44 I	
				CATEGORY	24.00	0.00	385.44	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	2
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242087	5/10/13	000008	VISITING NURSE SERVICE	MEJIA, ROSA	16.00		256.96 I	
					16.00		056.06	
				CATEGORY	16.00	0.00	256.96	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	163
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	242088	5/10/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	16.25		260.98 I	
ı									
ı									
ı					CATEGORY	16.25	0.00	260.98	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	164
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242089	5/10/13	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	36.50		586.19 I	
				CATEGORY	36.50	0.00	586.19	

RUN DATE SALES JRN		LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	165 IG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242090	5/10/13	800000	VISITING NURSE SERVICE	MENDOZA, RAFAEL	1.00		16.06	
				CATEGORY	1.00	0.00	16.06	

	05/15/13 -		YSIDE CITYWIDE	DEC MY MY				- 16	56
SALES JRN	ш # 0333	LOC 001	SUNNYSIDE CITYWIDE S A	REGNY NY LES REGISTER			VCP CHOICE LE		5/17/13
									-, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242091	5/10/13	000008	VISITING NURSE SERVICE	MIRANDA, LUIS	30.00		481.80	т	
	-, -, -			•					
242092	5/10/13	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	15.00		240.90	Τ	
242093	5/10/13	800000	VISITING NURSE SERVICE	MONTOYA, ROSALB	20.00		321.20	I	
242094	5/10/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	25.00		401.50	I	
242095	4/12/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		96.36	I	
242096	4/19/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		96.36	I	
242097	5/10/13	000008	VISITING NURSE SERVICE	MORALES, ANGELI	36.00		578.16	I	
242098	5/10/13	000008	VISITING NURSE SERVICE	MORALES, CARMEN	25.00		401.50	Ī	
242099	5/10/13	000008	VISITING NURSE SERVICE	MULLER, ROBERT	38.00		610.28	I	
242100	5/10/13	000008	VISITING NURSE SERVICE	NAGY, GEORGE	49.00		786.94	I	
				CUSTOMER	250.00	0.00	4,015.00		
				CATEGORY	250.00	0.00	4,015.00		

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242101	5/10/13	800000	VISITING NURSE SERVICE	NANIS, KOSTAS	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	68
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242102	5/10/13	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	19.50		313.17 I	
				CATEGORY	19.50	0.00	313.17	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 16	9
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES R	EGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242103	5/10/13	800000	VISITING NURSE SERVICE	NIDO,	MICHAEL	49.00		786.94	I	
					CATEGORY	49.00	0.00	786.94		

RUN DATE (05/15/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 17	0
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGAT	re car	E PROGRAM
			S	SALES	REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242104	5/10/13	800000	VISITING NURSE SERVICE	NIE	TO RAMOS, JO	63.00		1,011.78	I	
					CATEGORY	63.00	0.00	1,011.78		

RUN DATE 05/15/13 SALES JRNL # 0333		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEI	R		PAGE 1 - 171 VCP CHOICE LHCSA BILL WEEK ENDING 5	/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
242105 4/12/13 242106 5/10/13 242107 5/10/13 242108 5/10/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NIEVES, NANCY NIEVES, NANCY NINO, CARMEN NOBLIN, ELOISE	20.00 40.00 20.00 30.00		321.20 I 642.40 I 321.20 I 481.80 I	
			CUSTOMER	110.00	0.00	1,766.60	
			CATEGORY	110.00	0.00	1,766.60	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	172
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	A L E S R E G I S T E R			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242109	5/10/13	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		546.04 I	
				CATEGORY	34.00	0.00	546.04	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1'	73
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242110	5/10/13	800000	VISITING NURSE SERVICE	NOGUE, FIDELINA	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	174 5 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242111	5/10/13	800000	VISITING NURSE SERVICE	NOZZI, CONO	4.00		64.24 I	
				CATEGORY	4.00	0.00	64.24	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	5
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242112	5/10/13	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	56.00		899.36 I	
				====				
				CATEGORY	56.00	0.00	899.36	

			YSIDE CITYWIDE				PAGE 1 -	176
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	E /4 E /4 O
			2	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242113	5/10/13	800000	VISITING NURSE SERVICE	OCAMPO, WILSON	3.00		48.18 I	
				CATEGORY	3.00	0.00	48.18	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	77
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242114	5/10/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	44.00		706.64 I	
				CATEGORY	44.00	0.00	706.64	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	8
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	,
			5	SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242115	5/03/13	000008	VISITING NURSE SERVICE	OLVERA, ROSALIA	7.00		112.42	I	
242116	5/10/13	000008	VISITING NURSE SERVICE	OLVERA, ROSALIA	42.00		674.52	I	
242117	5/10/13	800000	VISITING NURSE SERVICE	PANDYA, HANSABE	16.00		256.96	I	
				CUSTOMER	65.00	0.00	1,043.90		
				CATEGORY	65.00	0.00	1,043.90		

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 17 VCP CHOICE LHCSA	'9
DALLO CIUN	ш т 0333	100 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242118	5/10/13	800000	VISITING NURSE SERVICE	PANTALEONDEREN,	24.75		397.49 I	
				CATEGORY	24.75	0.00	397.49	

RUN DATE 05/15 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 180
SALES UNIV # (1333 LOC 001		SALES REGISTER			BILL WEEK END	ING 5/17/13
INVOICE# DAT	'E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
242119 5/10 242120 5/10		VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	10.75 6.00		172.65 96.36	I I
			CUSTOMER	16.75	0.00	269.01	
			CATEGORY	16.75	0.00	269.01	

			YSIDE CITYWIDE				-	- 18	1
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			VCP CHOICE LH	ICSA	
			S.	ALES REGISTER			BILL WEEK END	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242121	5/10/13	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		803.00	I	
242122	5/10/13	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	11.00		176.66	I	
242123	5/10/13	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		48.18	I	
242124	5/10/13	000008	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		899.36	I	
242125	5/03/13	000008	VISITING NURSE SERVICE	PARKER, ALLISON	8.00		128.48	I	
242126	5/03/13	000008	VISITING NURSE SERVICE	PARKER, ALLISON	12.00		192.72	I	
242127	5/10/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA	42.00		674.52	I	
242128	5/10/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	25.50		409.53	Ī	
242129	5/10/13	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	48.25		774.90	I	
242130	5/10/13	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	24.25		389.46	T	
242131	5/10/13	000008	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		481.80	T	
242132	5/10/13	000008	VISITING NURSE SERVICE	PHILIPPS, MARY	47.75		766.87	T	
212132	3/10/13	000000	VIBITING NORDE BERVICE	IIIIIIIIO, MAKI			700.07		
				CUSTOMER	357.75	0.00	5,745.48		
				COSTOMER	331.15	0.00	5,745.40		
				CA TERCODY	257 75	0.00			
				CATEGORY	357.75	0.00	5,745.48		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	182
	_	200 001		SALES REGISTER			BILL WEEK ENDIN	IG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242133 242134	5/10/13	800000	VISITING NURSE SERVICE	,	6.00		96.36 I 80.30 I	-
242134	5/10/13	000008	VISITING NURSE SERVICE	PINEDA, EMILIA	5.00		80.30	
				CUSTOMER	11.00	0.00	176.66	
				CATEGORY	11.00	0.00	176.66	

RUN DATE	RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 183										
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA			
			5	SALES REGISTER			BILL WEEK ENDI	ING 5/17/13			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS			
242135	5/10/13	000008	VISITING NURSE SERVICE	PINEDA, EMILIA	30.00		481.80	I			
242136	5/10/13	800000	VISITING NURSE SERVICE	PIZARRO, BARBAR	27.50		441.66	I			
242137	5/10/13	800000	VISITING NURSE SERVICE	PLACIDO, GENARO	35.00		562.10	I			
242138	5/10/13	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	42.00		674.52	I			
				CUSTOMER	134.50	0.00	2,160.08				
				CATEGORY	134.50	0.00	2,160.08				

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 18	4
SALES ORN	ш # 0333	HOC 001		SALES REGISTER				5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242139	5/10/13	800000	VISITING NURSE SERVICE	PLASENZOTTI, NE	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L85
SALES JRN	1L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL	HEALTH
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242140	5/10/13	800000	VISITING NURSE SERVICE	PLENCA, GORDANA	3.00		48.18 I	
				CATEGORY	3.00	0.00	48.18	

RUN DATE SALES JRN	, - , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 18	36
511225 0141	2 0333	200 001		LES REGISTER			BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242141	4/05/13	000008	VISITING NURSE SERVICE	POGGI, EMERITA	6.00		96.36	I	
242142	5/10/13	000008	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		578.16	I	
242143	5/10/13	800000	VISITING NURSE SERVICE	POLITIS, HELEN	30.00		481.80	I	
242144	5/10/13	800000	VISITING NURSE SERVICE	PONCE, ALICIA	39.75		638.39	I	
242145	4/26/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	1.00		16.06	I	
242146	5/10/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	38.00		610.28	I	
242147	5/10/13	800000	VISITING NURSE SERVICE	QUINONES, MARIA	9.00		144.54	I	
242148	5/10/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	35.00		562.10	I	
				CUSTOMER	194.75	0.00	3,127.69		
				 CATEGORY	 194.75	0.00	3,127.69		

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 187	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING 5	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
040140	F /10 /10				40.00		654.50	
242149	5/10/13	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	42.00		674.52 I	
					40.00			
1				CATEGORY	42.00	0.00	674.52	

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE				PAGE 1 - 188	
SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWID				VCP CHOICE LHCSA	
	SALES REGISTER			BILL WEEK ENDING 5/	17/13
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
242150 5/10/13 000008 VISITING NURSE SER	VICE QUIZHPI, MARIA	24.00		385.44 I	
242151 5/10/13 000008 VISITING NURSE SER	VICE RAJA, HANIFA	18.00		289.08 I	
	CUSTOMER	42.00	0.00	674.52	
	CATEGORY	42.00	0.00	674.52	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 18	9
DALLED ORN.	ш # 0333	100 001		SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242152	5/03/13	000008	VISITING NURSE SERVICE	RAJESWARI, BODD	1.00		16.06	I	
242153	5/10/13	800000	VISITING NURSE SERVICE	RAJESWARI, BODD	1.00		16.06	I	
242154	5/10/13	000008	VISITING NURSE SERVICE	RAJESWARI, BODD	9.00		144.54	I	
				CUSTOMER	11.00	0.00	176.66		
				CATEGORY	11.00	0.00	176.66		

			YSIDE CITYWIDE				PAGE 1 - 190
SALES JRN	L # 0333	LOC 001		REG NY NY			LAP LOMBARDI AIDES PEDIATRIC
				SALES REGISTER			BILL WEEK ENDING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
242155	5/10/13	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	39.50		634.38 I
				CATEGORY	39.50	0.00	634.38

			YSIDE CITYWIDE	DDG 1997			PAGE 1 - 191	
SALES JRNI	L # 0333	LOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 5/	17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
242156	5/10/13	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	34.50		554.07 I	
				CAMPIGODY				
1				CATEGORY	34.50	0.00	554.07	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 192 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
242157 242158	5/03/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	12.00 35.00		192.72 I 562.10 I
				CUSTOMER	47.00	0.00	754.82
				CATEGORY	47.00	0.00	 754.82

RUN DATE (05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	93
SALES JRNI	և # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242159	5/10/13	800000	VISITING NURSE SERVICE	RAMOS, ISMAEL	3.00		48.18 I	
				CATEGORY	3.00	0.00	48.18	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242160	5/10/13	800000	VISITING NURSE SERVICE	,	12.00		192.72	[
242161	5/10/13	000008	VISITING NURSE SERVICE	REINA, JOSE	20.00		321.20	[
				CUSTOMER	32.00	0.00	513.92	
				CATEGORY	32.00	0.00	513.92	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	95
DILLEO CIUV	L 0333	100 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242162	5/10/13	800000	VISITING NURSE SERVICE	RENDON, EDUARDO	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 196	;)
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242163	5/10/13	800000	VISITING NURSE SERVICE	RICCA, MARIE	16.00		256.96 I	
				CATEGORY	16.00	0.00	256.96	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	97
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
			2	SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242164	4/12/13	000008	VISITING NURSE SERVICE	RISCO, GUILLERM	7.00		112.42	I	
242165	5/10/13	800000	VISITING NURSE SERVICE	RISCO, GUILLERM	62.75		1,007.77	I	
				CUSTOMER	69.75	0.00	1,120.19		
				CATEGORY	69.75	0.00	1,120.19		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	98
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242166	5/10/13	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	55.75		895.35 I	
1				CATEGORY	55.75	0.00	895.35	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 199	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 5/1	7/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
242167	5/10/13	800000	VISITING NURSE SERVICE	RIVERA, CARMEN	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - 200 ADU ADULT BILL WEEK ENDING 5	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
242168	5/10/13	800000	VISITING NURSE SERVICE	RIVERA, CAROL	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 20)1
Brilles orde	0333	100 001		SALES REGISTER			BILL WEEK ENI		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242169	5/10/13	000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	20.00		321.20	I	
242170	5/10/13	000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		321.20	Τ	
				CUSTOMER	40.00	0.00	642.40		
				CATEGORY	40.00	0.00	642.40		

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	202
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	242171	5/10/13	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	36.50		586.19 I	
					CATEGORY	36.50	0.00	586.19	

			YSIDE CITYWIDE	DEC NY NY			PAGE 1	- 20	3
SALES JRNL	# 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LI BILL WEEK ENI		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242173 5	5/10/13 5/10/13 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROCCISANO, LOUI RODRIGUEZ, ANA RODRIGUEZ, BIEN	48.00 24.00 4.00		770.88 385.44 64.24	I I I	
				CUSTOMER	76.00	0.00	1,220.56		
				CATEGORY	76.00	0.00	1,220.56		

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - 20 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242175	5/10/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, CARL	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

			YSIDE CITYWIDE				PAGE 1	- 205	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	SALES REGISTER			BILL WEEK END	ING 5/17/1	13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU	JS
242176	5/10/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	42.00		674.52	I	
242177	5/10/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,349.04	I	
242178	5/03/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, MARI	4.00		64.24	I	
242179	5/03/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARI	14.00		224.84	I	
242180	5/10/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARI	10.00		160.60	I	
				CUSTOMER	154.00	0.00	2,473.24		
				CATEGORY	154.00	0.00	2,473.24		

	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	206
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				5	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	040101	5/10/13	000000	VICINING NUDGE CEDVICE	DODDIGUEZ OLGA	F 00		00 20 T	
	242181	5/10/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	5.00		80.30 I	
					CATEGORY	5.00	0.00	80.30	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20)7
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242182	5/10/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	28.00		449.68 I	
				CATEGORY	28.00	0.00	449.68	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242183 242184	5/10/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	40.00 40.00		642.40 I 642.40 I	
				CUSTOMER	80.00	0.00	1,284.80	
				CATEGORY	80.00	0.00	1,284.80	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 209	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				S	SALES REGISTER			BILL WEEK ENDING 5/17/13	
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
ı									
ı	242185	5/10/13	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	56.00		899.36 I	
ı									
ı									
ı					CATEGORY	56.00	0.00	899.36	

RUN DATE 05/15, SALES JRNL # 03		SUNNYSIDE CITYWIDE	-	NY EGIST:	E R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242186 5/10, 242187 5/10,		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	FLOR ANA	56.00 16.00		899.36 256.96	I	
				CUSTOMER	72.00	0.00	1,156.32		
				CATEGORY	72.00	0.00	1,156.32		

			YSIDE CITYWIDE				-	- 211
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	· · · ·
				SALES REGISTER			BILL WEEK ENDI	ING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
242188	5/10/13	800000	VISITING NURSE SERVICE	ROSA, LUZ E	48.00		770.88	I
242189	5/10/13	000008	VISITING NURSE SERVICE	ROSA, MANOLO	30.00		481.80	I
242190	5/10/13	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	25.00		401.50	I
242191	5/10/13	800000	VISITING NURSE SERVICE	ROSARIOBREU, EM	20.00		321.20	I
				CUSTOMER	123.00	0.00	1,975.38	
				CATEGORY	123.00	0.00	1,975.38	

			YSIDE CITYWIDE				PAGE 1 - 23	12
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/17/13
			•	SALES KEGISIEK			BILL WEEK ENDING	3/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242192	5/10/13	800000	VISITING NURSE SERVICE	ROSTKOWSKI, WIE	9.00		144.54 I	
				CATEGORY	9.00	0.00	144.54	

	ATE 05/15/13 JRNL # 0333		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 213 VCM VNS	
				SALES REGISTER				5/17/13
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
24219	3 5/10/13	800000	VISITING NURSE SERVICE	RUEDA, INES	50.50		811.03 I	
				CATEGORY	50.50	0.00	811.03	
1				CALEGORY	50.50	0.00	011.03	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 214	
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING 5/17/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
242194	5/10/13	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	24.00		385.44 I	
				CATEGORY	24.00	0.00	385.44	-

RUN DATE 05/15/ SALES JRNL # 03		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 21	.5
	20 202		SALES REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242195 5/10/ 242196 5/10/		VISITING NURSE SERVICE VISITING NURSE SERVICE	RUIZ, TERESA RUSSO, MONICA	2.00 70.00		32.12 1,124.20	I I	
			CUSTOMER	72.00	0.00	1,156.32		
			CATEGORY	72.00	0.00	1,156.32		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	216
BALLS OIL	ш н оэээ	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242197	5/10/13	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	35.75		574.15	I
242198 242199	3/01/13 5/10/13	000008 000008	VISITING NURSE SERVICE		11.00 77.00		176.66 1,236.62	I
242199	5/10/13	000008	VISITING NURSE SERVICE	SALADIN, MARIA			1,230.02	
				CUSTOMER	123.75	0.00	1,987.43	
				CATEGORY	123.75	0.00	1,987.43	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	217
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242200	5/10/13	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 21	L8
SALES URN	ш # 0333	TOC 001		REGNI NI SALES REGISTER			BILL WEEK EN		5/17/13
			_						0, -1, -0
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242201	5/10/13	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	77.00		1,236.62	Т	
242202	4/26/13	000008	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	5.00		80.30	Ī	
242203	5/03/13	000008	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	5.00		80.30	Ī	
242204	5/10/13	000008	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	25.00		401.50	I	
242205	5/10/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	48.75		782.93	I	
242206	5/10/13	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		786.94	I	
				CUSTOMER	209.75	0.00	3,368.59		
				CATEGORY	 209.75	0.00	3,368.59		

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	219
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	242207	5/10/13	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	35.00		562.10 I	
					CATEGORY	35.00	0.00	562.10	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242208	5/03/13	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	8.00		128.48	<u> </u>
242209	5/10/13	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	56.00		899.36	[
				CUSTOMER	64.00	0.00	1,027.84	
				CATEGORY	64.00	0.00	1,027.84	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	221
			;	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242210 242211	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, ~-	9.00 48.00		144.54 I 770.88 I	
242211	5/10/13	000008	VISITING NORSE SERVICE	SANDOVAL, FANNY	40.00		770.00 1	
				CUSTOMER	57.00	0.00	915.42	
				CATEGORY	57.00	0.00	915.42	

RU	N DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	222
SA	LES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				\$	SALES REGISTER			BILL WEEK ENDING	5/17/13
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
24	2212	5/10/13	800000	VISITING NURSE SERVICE	SANTELLA, LAURA	8.00		128.48 I	
					CATEGORY	8.00	0.00	128.48	

			YSIDE CITYWIDE					223
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 5/17/13
				SALES KEGISTEK			BIDD WEEK ENDI	NG 5/17/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242213	5/10/13	800000	VISITING NURSE SERVICE	SANTORINIOS, GE	15.25		244.93	I
				CATEGORY	15.25	0.00	244.93	

			YSIDE CITYWIDE				PAGE 1		4
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH		5/17/13
			•	SALES REGISTER			BILL WEEK END	ING	5/1//13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242214 242215	5/10/13	000008	VISITING NURSE SERVICE		29.00		465.74	I	
242215	5/10/13	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	42.00		674.52		
				CUSTOMER	71.00	0.00	1,140.26		
							1 140 06		
				CATEGORY	71.00	0.00	1,140.26		

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	25
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	242216	5/10/13	800000	VISITING NURSE SERVICE	SCOTTI, CAROLIN	12.00		192.72 I	
					CATEGORY	12.00	0.00	192.72	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 226	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			S	SALES REGISTER			BILL WEEK END:	ING 5/	/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SU	JRPLUS
242217	5/10/13	000008	VISITING NURSE SERVICE	SCRO, WILLIAM	28.00		449.68	I	
242218	5/10/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	42.00		674.52	I	
				CUSTOMER	70.00	0.00	1,124.20		
				CATEGORY	70.00	0.00	1,124.20		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242219 242220	5/03/13 5/10/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SELTZER, BERTHA SELTZER, BERTHA	2.75 15.00		44.17 I 240.90 I	
				CUSTOMER	17.75	0.00	285.07	
				CATEGORY	17.75	0.00		

			YSIDE CITYWIDE				PAGE 1 - 2	228
SALES JRN	L # 0333	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/17/13
				SALES REGISIER			BILL MEEK ENDING	5/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242221	5/10/13	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	68.50		1,100.11 I	
				CATEGORY	68.50	0.00	1,100.11	

			YSIDE CITYWIDE				PAGE 1 -	229
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDI	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242222	5/10/13	800000	VISITING NURSE SERVICE	SERRA, JOSE	34.00		546.04	I
				CATEGORY	34.00	0.00	546.04	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
511225 014	0000	200 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242223	5/10/13	800000	VISITING NURSE SERVICE		42.00		674.52 I	
242224	5/10/13	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		160.60 I	
				CUSTOMER	52.00	0.00	835.12	
				CATEGORY	 52.00	0.00	835.12	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	231
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242225	5/10/13	800000	VISITING NURSE SERVICE	SILLS, JAMES	36.00		578.16 I	
				CATEGORY	36.00	0.00	578.16	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 232 VCP CHOICE LHCSA	
Bridde Grav	1 0333	100 001		SALES REGISTER			BILL WEEK ENDING 5/17,	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	LUS
242226	5/10/13	000008	VISITING NURSE SERVICE	SINGH, BADREE	42.00		674.52 I	
242227	5/10/13	800000	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		240.90 I	
				CUSTOMER	57.00	0.00	915.42	
				CATEGORY	 57.00	0.00	915.42	

ı	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	233
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	·
ı				i	SALES REGISTER			BILL WEEK ENDING	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	242228	5/10/13	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	11.00		176.66 I	
					CATEGORY	11.00	0.00		

RUN DATE (05/15/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 23	4
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGAT	CE CAR	E PROGRAM
			S	SALES	REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R.I	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242229	5/10/13	800000	VISITING NURSE SERVICE	SO	PCHEK, SAMUEL	12.00		192.72	I	
					CATEGORY	12.00	0.00	192.72		

			YSIDE CITYWIDE				PAGE 1 - 23	5
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	E /15 /13
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242230	5/10/13	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 ADU ADULT	36
SALES UKN.	ц # 0333	HOC 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242231	5/10/13	800000	VISITING NURSE SERVICE	SOTIRIOU, EVANG	37.00		1,300.86 I	
				GA EELGODY			1 200 06	
				CATEGORY	37.00	0.00	1,300.86	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	և # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242232	5/10/13	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	32.00		513.92 I	
				GAMPIGODY				
				CATEGORY	32.00	0.00	513.92	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 ADU ADULT	8
SALES UKNI	1 # 0333	TOC 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242233 242234	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 12.00		144.54 I 192.72 I	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 23 HCSA	39
			\$	SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242235 242236	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 59.75		192.72 959.59	I I	
242237	5/10/13	800000	VISITING NURSE SERVICE	•	56.00		899.36	I	
				CUSTOMER	127.75	0.00	2,051.67		
				CATEGORY	127.75	0.00	2,051.67		

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242238	5/10/13	000008	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		337.26 I	
				CATEGORY	21.00	0.00	337.26	

RUN DATE	05/15/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	241
SALES JRN	rL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			Ş	SALES REGISTER	3		BILL WEEK ENDI	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242239	5/10/13	800000	VISITING NURSE SERVICE	STENOS, MOSHOUL	30.00		481.80	I
242240	5/10/13	000008	VISITING NURSE SERVICE	STICKELL, BLANC	28.00		449.68	I
242241	5/10/13	800000	VISITING NURSE SERVICE	STROBL, ALFRED	39.00		626.34	I
242242	5/10/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	30.00		481.80	I
				CUSTOMER	127.00	0.00	2,039.62	
				CATEGORY	127.00	0.00	2,039.62	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 242	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			\$	SALES REGISTER	1		BILL WEEK ENDING 5	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
242243	5/10/13	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	32.75		525.97 I	
242244	5/10/13	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	25.75		413.55 I	
				CUSTOMER	58.50	0.00	939.52	
				CATEGORY	58.50	0.00	939.52	

RUN DATE	05/15/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	43
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242245	5/10/13	800000	VISITING NURSE SERVICE	TAVERAS, BERNAR	20.25		325.22 I	
				CATEGORY	20.25	0.00	325.22	

RUN DATE			YSIDE CITYWIDE				PAGE 1	- 24	4
SALES JRN	L # 0333	LOC 001		REG NY NY			ADU ADULT		
			S	ALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242246	4/26/13	000008	VISITING NURSE SERVICE	TEODORU, MIRELL	3.00		48.18	I	
242247	5/10/13	000008	VISITING NURSE SERVICE	TEODORU, MIRELL	15.00		240.90	I	
242248	5/10/13	800000	VISITING NURSE SERVICE	TERZIAN, ASDGHI	35.00		562.10	I	
242249	5/10/13	800000	VISITING NURSE SERVICE	THUCH, SYVONN	42.00		674.52	I	
				CUSTOMER	95.00	0.00	1,525.70		
				CATEGORY	95.00	0.00	1,525.70		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWII	DE REG NY	NY			PAGE 1 VCP CHOICE L	- 24	15
SALES URI	и # 0333	TOC 001	SUNNISIDE CITIWII	SALES	REGISTER			BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242250	5/10/13	000008	VISITING NURSE SEF	RVICE TI	INOCO, INES	35.00		562.10	I	
242251	5/03/13	800000	VISITING NURSE SER	RVICE TO	DLENTINO, PASC	4.00		64.24	I	
242252	5/10/13	800000	VISITING NURSE SER	RVICE TO	DLENTINO, PASC	25.00		401.50	I	
242253	4/12/13	800000	VISITING NURSE SER	RVICE TO	ORO VEGA, LUZV	4.00		64.24	I	
242254	5/10/13	800000	VISITING NURSE SER	RVICE TO	ORO VEGA, LUZV	23.50		377.41	I	
242255	5/10/13	800000	VISITING NURSE SER	RVICE TO	ORRES, EMELINA	40.00		642.40	I	
242256	5/10/13	800000	VISITING NURSE SEF	RVICE TO	ORRES, LUZ M	83.00		1,332.98	I	
					CUSTOMER	214.50	0.00	3,444.87		
					CATEGORY	214.50	0.00	3,444.87		

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	246
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S A	ALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242257	5/10/13	800000	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		674.52 I	
				CATEGORY	42.00	0.00	674.52	

			YSIDE CITYWIDE				PAGE 1		7
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		E /17 /13
				SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242258	5/10/13	000008	VISITING NURSE SERVICE	TOUMA, MATTA	40.00		642.40	I	
242259	5/10/13	000008	VISITING NURSE SERVICE	•	42.00		674.52	I	
				CUSTOMER	82.00	0.00	1,316.92		
				CATEGORY	82.00	0.00	1,316.92		

			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	210
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242260	5/10/13	800000	VISITING NURSE SERVICE	TRAVLOS, GERASI	17.75		285.07	I
				CATEGORY	17.75	0.00	285.07	

RUN DATE 09 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242262 242263	5/03/13 5/03/13 5/10/13 5/10/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TRUJILLO, AMPAR TRUJILLO, AMPAR TSOLISOS, FOTIN	4.00 5.00 4.00 56.00		64.24 80.30 64.24 899.36	I I I
				CUSTOMER	69.00	0.00	1,108.14	
				CATEGORY	69.00	0.00	1,108.14	

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 250	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS	$_{ m LT}$
				SALES REGISTER			BILL WEEK ENDING 5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
242265	5/10/13	800000	VISITING NURSE SERVICE	TSUAI, PING	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242266 242267 242268	5/10/13 5/10/13 5/10/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TZOUMAS, EFFIE URBINA, ANA URENA, ARGELIA	63.00 30.00 28.50		1,011.78 481.80 457.71	I I
				CUSTOMER	121.50	0.00	1,951.29	
				CATEGORY	121.50	0.00	1,951.29	

RUN	DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 252	
SAL	ES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				S	SALES REGISTER			BILL WEEK ENDING 5/1	7/13
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
242	269	5/10/13	800000	VISITING NURSE SERVICE	URUCHIMA, VICTO	49.00		786.94 I	
					CATEGORY	49.00	0.00	786.94	

RUN DATE (05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	253
SALES JRNI	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTE	R		BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242270	5/10/13	000008	VISITING NURSE SERVICE	VALENCIA, BERNA	25.50		409.53 I	
				 CATEGORY	25.50	0.00	409.53	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE AD	· 254 OULT
			\$	SALES REGISTER			BILL WEEK ENDI	ING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
242271	5/03/13	800000	VISITING NURSE SERVICE	VALENCIA, EMMA	9.00		144.54	I
242272	5/10/13	000008	VISITING NURSE SERVICE	VALENCIA, EMMA	12.00		192.72	
				CUSTOMER	21.00	0.00	337.26	
				CATEGORY	21.00	0.00	337.26	

ı	RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 255	
ı	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING 5	5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
	242273	5/10/13	800000	VISITING NURSE SERVICE	VALENTI, HELEN	40.00		642.40 I	
ı					CATEGORY	40.00	0.00	642.40	

- 1		05/15/13 - L # 0333			REG NY NY			PAGE 1 - VCP CHOICE LHCSA	A
					SALES REGISTER			BILL WEEK ENDING	G 5/17/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	242274	5/10/13	800000	VISITING NURSE SERVICE	VALENZA, GIUSEP	40.00		642.40 I	
					CATEGORY	40.00	0.00	642.40	

١	RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 257	
١	SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
ı				S	SALES REGISTER			BILL WEEK ENDING 5/17/13	3
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
ı									
ı	242275	5/10/13	000008	VISITING NURSE SERVICE	VAROL, ELMAS	9.00		144.54 I	
١									
١									-
١					CATEGORY	9.00	0.00	144.54	

	05/15/13 - NL # 0333		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 25 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242276	5/10/13	800000	VISITING NURSE SERVICE	VASQUEZ, DULCE	23.50		377.41 I	
				CATEGORY	23.50	0.00	377.41	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 259	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (I	$_{ m T}$
			:	SALES REGISTER			BILL WEEK ENDING 5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
242277	5/10/13	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	32.75		525.97 I	
				CATEGORY	32.75	0.00	 525.97	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	260
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242278	5/10/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	18.00		289.08 I	
				CATEGORY	18.00	0.00	289.08	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	61
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242279	4/26/13	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	5.00		80.30 I	
242280	5/10/13	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		642.40 I	
				CUSTOMER	45.00	0.00	722.70	
				CATEGORY	45.00	0.00	722.70	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 262 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
242281	5/10/13	800000	VISITING NURSE SERVICE	VAZQUEZ, FELIPE	30.00		481.80 I	
				CATEGORY	30.00	0.00	481.80	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	;3
	_			SALES REGISTER			BILL WEEK EN		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242282	5/10/13	000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	12.00		192.72	I	
242283	5/10/13	800000	VISITING NURSE SERVICE	VELECELA, LUIS	15.00		240.90	I	
242284	5/10/13	000008	VISITING NURSE SERVICE	VELECELA, MARIA	20.00		321.20	I	
				CUSTOMER	47.00	0.00	754.82		
				CATEGORY	47.00	0.00	754.82		

RUN DATE 05/15/13 SALES JRNL # 0333		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 264 ADU ADULT	
SALES UNIL # 0333	LOC UUI		SALES REGISTER				5/17/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
242285 5/10/13 242286 5/10/13		VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00 7.00		48.18 I 112.42 I	
242200 5/10/13	000008	VISITING NURSE SERVICE	VELOZ REIES, AL	7.00		112.42 1	
			CUSTOMER	10.00	0.00	160.60	
			CATEGORY	10.00	0.00	160.60	

			YSIDE CITYWIDE				PAGE 1 - 2	65
SALES JRNI	L # 0333	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242287	5/10/13	800000	VISITING NURSE SERVICE	VENTURA, ROSA	35.00		562.10 I	
				CATEGORY	35.00	0.00	 562.10	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 266 ADU ADULT	
511111	_	200 001		SALES REGISTER				17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUI	RPLUS
242288	5/10/13	800000	VISITING NURSE SERVICE	VERA, VICTOR	1.00		16.06 I	
				 CATEGORY	1.00	0.00	16.06	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	267
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242289	5/10/13	800000	VISITING NURSE SERVICE	VERAS, JUANA	70.25		1,128.22 I	
				CATEGORY	70.25	0.00	1,128.22	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242290	5/10/13	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE	05/15/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 26	69
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242291	5/10/13	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	36.25		582.18 I	
				CATEGORY	36.25	0.00	 582.18	

RUN D.	ATE 05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 270)
SALES	JRNL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
24229	2 5/10/13	000008	VISITING NURSE SERVICE	VITO, CARMEN	22.00		353.32 I	
				CATEGORY	22.00	0.00	353.32	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	= : =
				SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242293	5/10/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	70.00		1,124.20 I	
				CATEGORY	70.00	0.00	1,124.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 272 ADU ADULT BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
242294	5/10/13	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		321.20 I	
				CATEGORY	20.00	0.00	321.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
	.2 0000	200 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242295	5/03/13	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		48.18 I	
242296	5/10/13	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		48.18 I	
				CUSTOMER	6.00	0.00	96.36	
				 CATEGORY	6.00	0.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	274
Bribbs orde	11 11 0333	100 001		SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242297 242298	5/10/13 5/10/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	WATKINS, ELOISE	3.00		48.18 I 48.18 I	
242298	5/10/13	000008	VISITING NURSE SERVICE	WATKINS, ELOISE	3.00		48.18 1	
				CUSTOMER	6.00	0.00	96.36	
				CATEGORY	6.00	0.00	96.36	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			:	SALES REGISTER			BILL WEEK END	ING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
242299	5/10/13	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	36.00		578.16	I
242300	5/10/13	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	15.50		248.94	I
				CUSTOMER	51.50	0.00	827.10	
				0021011211	32.30	3.00	027.120	
				CATEGORY	51.50	0.00	827.10	

RUN DATE (05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	76
SALES JRNI	և # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242301	5/10/13	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.25		196.74 I	
				CATEGORY	12.25	0.00	196.74	

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 277 SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/17/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT

ALIX, APERNO 7.00 1,400.00

ALIX, PEDRO 7.00 1,008.64

ALVARADO, RUFIN 21.00 330.96

ALVARADO, SARA 84.00 1,320.96

ASH, MARIE 4.00 63.04

BEGUM, JAMILA 72.00 1,134.72

BERIASHEVIC LI 12.00 189.12

BERRY LEONOR 40.00 630.40

BUCARO, CONCETT 45.00 709.20

CANINO, CARMEN 33.00 551.936

CAQUIAS, LILLIR 15.75 248.22

CARTAGEAN, LUZ 10.00 157.60

CEPEDA, TOMASA 28.00 441.28

COLEMAN, REGINA 40.00 598.88

COLEMAN, REGINA 40.00 630.40

COLON, MARIA 104.00 1,636.16

COMET, JULIA 30.00 472.80

CRUZ, ANGELA 16.00 252.16

CUCALON, INSS 44.00 653.44

DANIELS, MAGGIE 6.00 94.56

DE LA CRUZ, AGU 30.00 472.80

DELEON, JUANA 30.00 472.80

D REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS ALI, AMRUNISSA 51.00 ALIX, PEDRO 7.00 ALSTON, ZULINE 64.00 242302 803.76 I 5/10/13 000010 GUILDNET 1,400.00 I 1,008.64 I 242303 5/10/13 000010 GUILDNET 242304 5/03/13 000010 GUILDNET 242305 5/10/13 000010 GUILDNET GUILDNET 242306 5/03/13 000010 GUILDNET 242307 5/10/13 000010 242308 5/10/13 000010 GUILDNET 242309 5/10/13 000010 GUILDNET 242310 5/10/13 000010 GUILDNET 242311 5/10/13 000010 GUILDNET 242312 5/10/13 000010 GUILDNET 242313 GUILDNET 5/10/13 000010 242314 4/26/13 000010 GUILDNET 242315 5/10/13 000010 GUILDNET 242316 5/10/13 000010 GUILDNET 242317 5/10/13 000010 GUILDNET 242318 4/26/13 000010 GUILDNET 242319 5/10/13 000010 GUILDNET 242320 5/10/13 000010 GUILDNET 242321 4/26/13 000010 GUILDNET 242322 GUILDNET 5/10/13 000010 242323 GUILDNET 5/10/13 000010 242324 5/10/13 000010 GUILDNET 242325 5/10/13 000010 GUILDNET 242326 5/10/13 000010 GUILDNET Ι 242327 5/10/13 000010 GUILDNET Ι 242328 5/10/13 000010 GUILDNET 242329 5/10/13 000010 GUILDNET 242330 5/10/13 000010 GUILDNET 242331 5/10/13 000010 GUILDNET 242332 5/10/13 000010 GUILDNET 242333 5/10/13 000010 GUILDNET 242334 5/10/13 000010 GUILDNET 242335 5/10/13 000010 GUILDNET 242336 000010 5/03/13 GUILDNET 242337 5/10/13 000010 GUILDNET 242338 5/03/13 000010 GUILDNET 242339 5/10/13 000010 GUILDNET 242340 000010 GUILDNET 5/03/13 242341 GUILDNET 5/03/13 000010 242342 5/10/13 000010 GUILDNET 242343 5/10/13 000010 GUILDNET 242344 5/10/13 000010 GUILDNET 242345 5/10/13 000010 GUILDNET 242346 5/10/13 GUILDNET 000010 242347 5/10/13 000010 GUILDNET 242348 5/10/13 000010 GUILDNET 242349 5/03/13 000010 GUILDNET 5/10/13 000010 GUILDNET 242350 I

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 278SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/17/13 REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS INVOICE# DATE CUST NO CUSTOMER NAME GREAVES, BARBAR 8.00 242351 126.08 I 5/10/13 000010 242352 614.64 I 5/10/13 000010 242353 5/10/13 000010 I 242354 5/10/13 000010 242355 5/10/13 000010 242356 5/10/13 000010 242357 5/03/13 000010 242358 5/10/13 000010 242359 5/10/13 000010 242360 4/26/13 000010 242361 5/10/13 000010 242362 5/10/13 000010 242363 5/10/13 000010 242364 5/10/13 000010 242365 5/10/13 000010 242366 5/10/13 000010 242367 5/10/13 000010 242368 5/10/13 000010 242369 5/10/13 000010 242370 5/10/13 000010 242371 5/10/13 000010 242372 5/10/13 000010 242373 5/10/13 000010 242374 5/10/13 000010 242375 5/10/13 000010 GUILDNET Ι 242376 5/10/13 000010 Ι 242377 5/10/13 000010 242378 5/10/13 000010 242379 5/10/13 000010 242380 5/10/13 000010 242381 4/26/13 000010 242382 5/10/13 000010 242383 5/10/13 000010 242384 5/10/13 000010 242385 5/10/13 000010 242386 4/12/13 000010 242387 5/10/13 000010 242388 5/10/13 000010 242389 5/10/13 000010 GUILDNET 242390 000010 GUILDNET 5/03/13 242391 5/10/13 000010 GUILDNET 242392 000010 GUILDNET 5/10/13 000010 GUILDNET 242393 5/10/13 242394 5/10/13 000010 242395 5/10/13 000010 242396 5/10/13 000010 242397 5/10/13 000010 5/10/13 242398 000010 GUILDNET 5/10/13 000010 GUILDNET 242399

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 279 SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET WIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 5/17/13 CUST NO CUSTOMER NAME

REFERECE

NUMBOLD, RAMONA

25.00

394.00

394.00

00010 GUILDNET

NISHMURA, ALBE

84.00

1.323.84

000010 GUILDNET

NINEZ, RANGELINA

16.00

567.36

000010 GUILDNET

NUNEZ, REYNA

000010 GUILDNET

NUNEZ, REYNA

000010 GUILDNET

NUNEZ, REYNA

000010 GUILDNET

OUTEDA, SARA

45.00

754.20

000010 GUILDNET

OUTEDA, SARA

45.00

754.20

000010 GUILDNET

OUTEDA, SARA

000010 GUILDNET

PAGENA, ARGEES

000010 GUILDNET

PATTERSON, RUME

000010 GUILDNET

PATTERSON

00 REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS NEWBOLD, RAMONA 25.00 242400 394.00 I 5/10/13 1,323.84 I 242401 5/10/13 242402 5/10/13 242403 5/10/13 242404 5/10/13 242405 5/10/13 242406 5/10/13 242407 5/10/13 242408 5/10/13 242409 5/10/13 242410 5/10/13 242411 5/10/13 242412 5/10/13 242413 5/10/13 242414 5/10/13 242415 5/10/13 242416 5/10/13 242417 5/10/13 242418 5/10/13 242419 5/10/13 242420 5/10/13 242421 5/10/13 242422 5/10/13 242423 4/19/13 242424 5/10/13 242425 5/10/13 242426 5/10/13 242427 5/10/13 242428 5/10/13 242429 5/10/13 242430 5/10/13 242431 5/10/13 242432 5/10/13 242433 5/10/13 242434 5/10/13 242435 5/10/13 242436 5/10/13 242437 5/10/13 242438 5/10/13 242439 5/10/13 242440 5/10/13 242441 5/10/13 242442 5/10/13 242443 5/10/13 242444 5/10/13 242445 5/10/13 242446 5/10/13 5/10/13 242447 5/10/13 000010 GUILDNET 242448

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE S 2					PAGE 4	- 28	30		
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		
				SALES REGISTER			BILL WEEK END	DING	5/17/13
INVOICE#	DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242449	5/10/13	000010	GUILDNET	SAI"TANTN, DII"TA	58.50		921.96	Т	
242450	5/10/13	000010	GUILDNET	SANCHEZ ANA MA	39.00		653.64	T	
242451	5/10/13	000010	GUILDNET	SANCHEZ, ELIZAB	36.00		567.36	Ī	
242452	5/10/13	000010	GUILDNET	SANCHEZ, ESTERV	20.00		315.20	Ī	
242453	5/10/13	000010	GUILDNET	SANTANA, OCTAVI	25.00		394.00	Ī	
242454	5/10/13	000010	GUILDNET	SANTIAGO, ARMIN	20.00		315.20	Ī	
242455	5/10/13	000010	GUILDNET	SANTIAGO, ILIA	56.00		882.56	Ī	
242456	5/03/13	000010	GUILDNET	SANTIAGO, IVETH	60.25		949.54	Ī	
242457	5/10/13	000010	GUILDNET	SANTIAGO, VICTO	20.00		335.20	I	
242458	5/03/13	000010	GUILDNET	SCHENK, ENI	38.00		596.96	I	
242459	5/10/13	000010	GUILDNET	SCHNEIDER, RUTH	56.00		882.56	Ī	
242460	5/10/13	000010	GUILDNET	SHELTON, AGUEDA	38.75		610.70	Ī	
242461	5/10/13	000010	GUILDNET	SOLIS, JUDITH	48.00		756.48	Ī	
242462	5/10/13	000010	GUILDNET	SOMRAT. IIMITITA	1.00		15.76	T	
242463	5/10/13	000010	GUILDNET	SWABY, CLARENCE	5.00		1,000.00	Ī	
242464	5/10/13	000010	GUILDNET	THEN MARTA	33.00		520.08	T	
242465	5/10/13	000010	GUILDNET	THERMOSY, MARIE	45.00		709.20	T	
242466	5/03/13	000010	GUILDNET	TORO, ROSARIO	53.50		841.24	Ī	
242467	5/10/13	000010	GUILDNET	TORRES, JUANITA	48.25		760.42	Ī	
242468	5/10/13	000010	GUILDNET	TOUSSAINT, MIGU	33.00		520.08	Ī	
242469	5/10/13	000010	GUILDNET	TROISI, DELIA	48.00		756.48	Ī	
242470	5/10/13	000010	GUILDNET	VARGAS, ALCIBIA	30.00		472.80	Ī	
242471	5/10/13	000010	GUILDNET	VARGAS, AUREA	21.00		351.96	Ī	
242472	5/10/13	000010	GUILDNET	VARGAS, AUREA	15.00		251.40	Ī	
242473	5/10/13	000010	GUILDNET	VAZOUEZ 2. ROSA	19.75		311.26	T	
242474	5/10/13	000010	GUILDNET	VEGA. ADELATDA	5.00		1.000.00	T	
242475	5/10/13	000010	GUILDNET	VELEZ, CARMEN	38.00		598.88	Ī	
242476	5/10/13	000010	GUILDNET	VELEZ, WILLIAM	16.00		252.16	Ī	
242477	5/10/13	000010	GUILDNET	VENTURA, DAISY	25.00		394.00	Ī	
242478	5/10/13	000010	GUILDNET	VICTORIO ROCUE	65.00		1.024.40	T	
242479	5/10/13	000010	GUILDNET	VIAHOS. MARTE	64.00		1.008.64	T	
242480	5/10/13	000010	GUILDNET	WARD. ALTHEA	8.00		126.08	T	
242481	5/10/13	000010	GUILDNET	WARD, ALTHEA	4.00		58.40	T	
242482	5/10/13	000010	GUILDNET	WEISZ, KLARA	8.00		126.08	T	
242483	5/10/13	000010	GUILDNET	WEST BALDWIN	16 00		252 16	Ť	
242484	5/10/13	000010	GUILDNET	WHITLEY, MYRNA	20.00		315.20	T	
242485	5/10/13	000010	GUILDNET	YI. CARLOS	24.00		378.24	T	
242486	5/10/13	000010	GUILDNET	ZARE, GLORIA	56.00		882.56	Ī	
242487	5/10/13	000010	GUILDNET	ZUMAETA, FANNY	34.00		535.84	Ī	
				REFERENCE SALJANIN, DILJA SANCHEZ, ANA MA SANCHEZ, ELIZAB SANCHEZ, ESTERV SANTANA, OCTAVI SANTIAGO, ARMIN SANTIAGO, ILIA SANTIAGO, IVETH SANTIAGO, VICTO SCHENK, ENI SCHENK, ENI SCHEIDER, RUTH SHELTON, AGUEDA SOLIS, JUDITH SOMRAJ, UMILLA SWABY, CLARENCE THEN, MARIA THERMOSY, MARIE TORO, ROSARIO TORRES, JUANITA TOUSSAINT, MIGU TROISI, DELIA VARGAS, ALCIBIA VARGAS, ALCIBIA VARGAS, AUREA VAZQUEZ 2, ROSA VEGA, ADELAIDA VELEZ, WILLIAM VENTURA, DAISY VICTORIO, ROQUE VLAHOS, MARIE WARD, ALTHEA WARD, ALTHEA WEISZ, KLARA WEST, BALDWIN WHITLEY, MYRNA YI, CARLOS ZARE, GLORIA ZUMAETA, FANNY CUSTOMER	6,180.75	0.00	106,185.72		
				CATEGORY	6,180.75	0.00	106,185.72		

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE			REG NY NY SALES REGISTER			PAGE 1 - 281			
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	IRST	
				SALES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
040400	F /10 /12	000100			00 00		450 64	_	
242488	5/10/13	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		4/2.64	1	
242489	5/10/13	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	Ţ	
242490	5/10/13	000122	HEALTH FIRST	BLANCO, CARMELI	20.00		337.60	Τ	
242491	5/10/13	000122	HEALTH FIRST	BOCHENEC, JOLAN	36.00		607.68	I	
242492	5/10/13	000122	HEALTH FIRST	BOWERS *, DIANE	50.00		844.00	I	
242493	5/10/13	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
242494	5/10/13	000122	HEALTH FIRST	CARRILLO, MARIA	24.00		405.12	I	
242495	5/10/13	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
242496	5/10/13	000122	HEALTH FIRST	CEBALLOS, ANA	48.00		810.24	I	
242497	5/03/13	000122	HEALTH FIRST	CORTES DE GALIN	60.00		1,012.80	I	
242498	5/10/13	000122	HEALTH FIRST	ESPAILLAT, AMPA	38.00		641.44	I	
242499	5/10/13	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
242500	5/10/13	000122	HEALTH FIRST	FERRERA, FRANCI	70.00		1,181.60	I	
242501	5/10/13	000122	HEALTH FIRST	FONTANES, PEDRO	52.00		877.76	I	
242502	4/26/13	000122	HEALTH FIRST	FRANCISCO, RICH	64.00		1,080.32	I	
242503	5/10/13	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
242504	5/10/13	000122	HEALTH FIRST	TSKANDER JACOU	56.00		945.28	T	
242505	5/10/13	000122	HEALTH FIRST	KAUR. HARBANS	49.00		827.12	Ť	
242506	5/10/13	000122	HEALTH FIRST	LARA. TOMASA	40.00		675.20	T	
242507	5/10/13	000122	HEALTH FIRST	LAZALA GLADYS	84 00		1 417 92	T	
242508	5/10/13	000122	HEALTH FIRST	I.ODEZ-RAMIREZ	66 00		1 114 08	Ť	
242509	5/10/13	000122	UEALTH FIRST	IODEZ RAMIDEZ	11 00		185 68	т т	
242510	5/10/13	000122	UEALIII FIRSI	MACADEMA CAHAD	48 00		810 24	T	
242510	5/10/13	000122	DEVILL LIKSI	ODTI7 TIII A	26.00		607.69		
242511	5/03/13	000122	UEVILLI EIDGE	DALAZZOLO ELOD	93.00		1 401 04		
242512	5/10/13	000122	UEVILLI EIDOA	PALAZZOLO, FLOR	70 00		1 101 60		
242513	5/10/13	000122	UEVILLI EIDOM	REINOSO, EMELIA	12.00		1,101.00		
242514	5/10/13	000122	UEALIN FIRSI	RIVERA, EDDIE	20.00		202.50		
242515		000122	HEALIH FIRSI	RUDRIGUEZ, MARG	20.00		337.60		
	5/10/13	000122	HEALIH FIRSI	SALAZAR, LUZ MA	53.00		594.04		
242517	5/10/13	000122	HEALTH FIRST	SALHUANA, YULAN	32.00		540.16	Τ	
242518	5/10/13	000122	HEALTH FIRST	SCHOONMAKER, JE	52.00		8//./6	1	
242519	5/10/13	000122	HEALTH FIRST	SPIVEY, PATRICI	31.00		523.28	Ţ	
242520	5/10/13	000122	HEALTH FIRST	ST ROMAINE, CLA	59.00		995.92	Ţ	
242521	5/10/13	000122	HEALTH FIRST	SURIEL, GERTRUD	84.00		1,41/.92	I	
242522	5/10/13	000122	HEALTH FIRST	THORNTON, SHIRL	46.00		776.48	I	
242523	5/10/13	000122	HEALTH FIRST	VALENCIA, ESTHE	24.00		405.12	I	
242524	5/10/13	000122	HEALTH FIRST	VASQUEZ, OLGA	20.00		337.60	I	
242525	5/10/13	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	I	
				CUSTOMER	1,704.00	0.00	28,763.52		
				REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BLANCO, CARMELI BOCHENEC, JOLAN BOWERS *, DIANE CARMONA, LUZ CARRILLO, MARIA CARRION, MARIA CEBALLOS, ANA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA ISKANDER, JACOU KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MOPEZ-RAMIREZ, MACARENA, SAHAR ORTIZ, TULA PALAZZOLO, FLOR REINOSO, EMELIA RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SCHOONMAKER, JE SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD THORNTON, SHIRL VALENCIA, ESTHE VASQUEZ, OLGA VEGA, GLORIA	1,704.00	0.00	28,763.52		

			YSIDE CITYWIDE	EG NY NY ES REGISTER			PAGE 1	- 28	82
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE RE	EG NY NY			NHP NEIGHBORE	HOOD I	HEALTH
			S A L	ES REGISTER			BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO			HOURS	TAX AMT	AMOUNT		SURPLUS
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENCE	nours	IAA AMI	AMOUNT	IIP	SURPLUS
242526	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER NEIGHBORHOOD HEALTH PROVIDER NEIGHBORHOOD HEALTH PROVIDER NEIGHBORHOOD HEALTH PROVIDER NEIGHBORHOOD HEALTH PROVIDER	RS AHMED, UMARA	55.00		928.40	I	
242527	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS AKHTER, SELINA	45.00		759.60	I	
242528	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS DEKMAK, GRISEL	84.00		1,417.92	I	
242529	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS DIAZ 1, CARMEN	28.00		472.64	I	
242530	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS FERNANDEZ, MARI	12.00		202.56	I	
242531	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS FLORES, MARITZA	70.00		1,181.60	I	
242532	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS GARDNER, DIANE	16.00		270.08	I	
242533	4/26/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS JONES, CYNTHIA	26.00		438.88	I	
242534	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS FERNANDEZ, MARI RS FLORES, MARITZA RS GARDNER, DIANE RS JONES, CYNTHIA RS KHAN, FARUQUE RS MORALES HERNAD RS OCASIO, VIRGINI RS RODRIGUEZ -2, M RS RODRIGUEZ, JESS RS SHEPPARD, ERMA RS WELLS WYNORIA	71.00		1,198.48	I	
242535	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS MORALES HERNAD	36.00		607.68	I	
242536	5/03/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS MOSKOWITZ, RONA	42.00		708.96	I	
242537	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS OCASIO, VIRGINI	30.00		506.40	I	
242538	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS RODRIGUEZ -2, M	30.00		506.40	I	
242539	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS RODRIGUEZ, JESS	25.00		422.00	I	
242540	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS SHEPPARD, ERMA	69.00		1,164.72	I	
242541	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS WELLS, WYNORIA	16.00		270.08	I	
242542	5/10/13	000120	NEIGHBORHOOD HEALTH PROVIDER	RS WELLS, WYNORIA RS WILSON, SHERYL	34.00		573.92	I	
				CUSTOMER	689.00	0.00	11,630.32		
				CATEGORY	689.00	0.00	11,630.32		

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 283 SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY FID NY CATHOLIC/FIDELIS										
Brilling Grav	1 1 0555	100 001	SOMMISTED CITIVIES	SALES REGISTER			BILL WEEK ENDI	- ,		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS		
242543	5/10/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I		
242544	5/10/13	000126	NYS CATHOLIC/FIDELIS	BROWN, CARMEN	7.00		118.09	I		
242545	5/10/13	000126	NYS CATHOLIC/FIDELIS	GARCIA, CLEMENT	7.00		118.09	I		
242546	5/10/13	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	42.00		708.54	I		
242547	5/10/13	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	28.00		472.36	I		
242548	5/10/13	000126	NYS CATHOLIC/FIDELIS	SALABERRY, ANA	84.00		1,417.08	I		
242549	2/01/13	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	32.00		539.84	I		
242550	5/10/13	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	41.00		691.67	I		
				CUSTOMER	290.00	0.00	4,892.30			
				CATEGORY	290.00	0.00	4,892.30			

RUN DATE SALES JRN			PAGE 1 - 284 UHC UNITED HEALTH						
DALLO OICI	ш н 0555	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			BILL WEEK ENI		5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242551	5/10/13	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	I	
242552	5/10/13	000128	UNITED HEALTH CARE	FARFAN, MARIA	15.00		257.40	I	
242553	5/10/13	000128	UNITED HEALTH CARE	KHAN, FAZAL	84.00		1,441.44	I	
242554	5/10/13	000128	UNITED HEALTH CARE	KOH, BYUNG CHOL	21.00		360.36	I	
242555	5/10/13	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	49.00		840.84	I	
242556	5/10/13	000128	UNITED HEALTH CARE	REYES, RODOLFO	20.00		343.20	I	
242557	5/10/13	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I	
				CUSTOMER	315.00	0.00	5,405.40		
				CATEGORY	315.00	0.00	5,405.40		

-	, - , -		YSIDE CITYWIDE				PAGE 1		5
SALES JRN	L # U333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM HE		E /1 E /1 2
				SALES REGISTER			BILL WEEK END	ING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242558	5/10/13	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,417.92	I	
242559	5/10/13	000114	EMBLEM HEALTH	COPELAND, ELISE	56.00		798.00	I	
242560	5/10/13	000114	EMBLEM HEALTH	DE JESUS, TIBUR	67.00		1,130.96	I	
242561	5/10/13	000114	EMBLEM HEALTH	GAFFNEY, FREDER	16.00		270.08	I	
242562	5/10/13	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	60.00		1,012.80	I	
242563	5/10/13	000114	EMBLEM HEALTH	JACKSON, FRANCE	49.00		827.12	I	
242564	5/10/13	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,417.92	I	
242565	5/10/13	000114	EMBLEM HEALTH	LANGELOH, HOWAR	42.00		708.96	I	
242566	5/10/13	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		202.56	I	
242567	5/10/13	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		945.28	I	
242568	5/10/13	000114	EMBLEM HEALTH	YIANNITSIS, LEO	19.00		320.72	I	
				CUSTOMER	545.00	0.00	9,052.32		
				CATEGORY	545.00	0.00	9,052.32		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE REC S A L F	GNY NY ES REGISTEI	₹		PAGE 1 HIP HEALTH I BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242569 242570 242571 242572 242573 242574	5/10/13 5/10/13 5/10/13 5/10/13 5/10/13 5/10/13	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA ORR, LOUISE SHAH, HANSIKABE WILLIAMS, DIANE	24.00 20.00 30.00 35.00 5.00 20.00		405.12 337.60 506.40 590.80 84.40 337.60	I I I I I	
				CUSTOMER	134.00	0.00	2,261.92		
				CATEGORY	134.00	0.00	2,261.92		

RUN DATE			YSIDE CITYWIDE					- 28	
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLUS HEALTH		
				SALES REGIST	ER		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242575	5/10/13	000130	METROPLUS HEALTH	ARIAS, NORA	67.00		1,149.05	I	
242576	5/10/13	000130	METROPLUS HEALTH	CORDERO, ROSEN	D 70.00		1,200.50	I	
242577	5/10/13	000130	METROPLUS HEALTH	DOBBINS, SANDR	A 168.00		2,881.20	I	
242578	5/10/13	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
242579	5/10/13	000130	METROPLUS HEALTH	GOMEZ, LUZ	40.00		686.00	I	
242580	4/26/13	000130	METROPLUS HEALTH	MURDOCK, GERTR	U 58.00		994.70	I	
242581	5/10/13	000130	METROPLUS HEALTH	OSORIO, ELVIA	18.00		308.70	I	
242582	5/10/13	000130	METROPLUS HEALTH	PERSAD, USHA	70.00		1,200.50	I	
242583	5/10/13	000130	METROPLUS HEALTH	RAMPERSAID, AL	I 24.00		411.60	I	
242584	5/10/13	000130	METROPLUS HEALTH	RYALS, CHARLES	39.00		668.85	I	
242585	5/10/13	000130	METROPLUS HEALTH	VALLE, BLASINA	37.00		634.55	I	
				CUSTOMER	626.00	0.00	10,735.90		
				CATEGORY	626.00	0.00	10,735.90		

RUN DATE SALES JRN	RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R								PAGE 1 - 288 WEL WELCARE OF NY		
				SALES	REGISTE	R		BILL WEEK EN	DING	5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
242586	5/10/13	000124	WELCARE OF NEW YORK,	INC. A	LONSO, ANA	35.00		602.00	I		
242587	5/10/13	000124	WELCARE OF NEW YORK,	INC. B	ATILO, MARTA	45.00		774.00	I		
242588	5/10/13	000124	WELCARE OF NEW YORK,	INC. B	ISRAM, ROOPKAL	20.00		344.00	I		
242589	5/10/13	000124	WELCARE OF NEW YORK,	INC. C	EBALLOS, FRANC	50.00		860.00	I		
242590	5/10/13	000124	WELCARE OF NEW YORK,	INC. C	HOUDHURY, MEHE	72.00		1,238.40	I		
242591	5/03/13	000124	WELCARE OF NEW YORK,	INC. C	RUZ, LUIS	56.00		963.20	I		
242592	5/10/13	000124	WELCARE OF NEW YORK,	INC. F	RANCISCO, BRIG	35.00		602.00	I		
242593	5/10/13	000124	WELCARE OF NEW YORK,	INC. G	ODINOT, CARMEN	30.00		516.00	I		
242594	5/10/13	000124	WELCARE OF NEW YORK,	INC. G	OMEZ, RANNIE	28.00		481.60	I		
242595	5/10/13	000124	WELCARE OF NEW YORK,	INC. H	AYNES, LAMONT	30.00		516.00	I		
242596	5/10/13	000124	WELCARE OF NEW YORK,	INC. H	UDGINS, LOUZET	30.00		516.00	I		
242597	5/10/13	000124	WELCARE OF NEW YORK,	INC. L	OPEZ, ISABEL	35.00		602.00	I		
242598	5/10/13	000124	WELCARE OF NEW YORK,	INC. L	OPEZ, MANUEL	84.00		1,444.80	I		
242599	5/10/13	000124	WELCARE OF NEW YORK,	INC. L	OPEZ, VITALIA	84.00		1,444.80	I		
242600	5/10/13	000124	WELCARE OF NEW YORK,	INC. M	ARTINEZ, MARIA	30.00		516.00	I		
242601	5/10/13	000124	WELCARE OF NEW YORK,	INC. M	EDINA, MARTHA	12.00		206.40	I		
242602	5/10/13	000124	WELCARE OF NEW YORK,	INC. M	OHAMED, DENISE	30.75		528.90	I		
242603	5/10/13	000124	WELCARE OF NEW YORK,	INC. M	ORALES, FRANCI	35.00		602.00	I		
242604	5/10/13	000124	WELCARE OF NEW YORK,	INC. M	URPHY, RUBY	11.00		189.20	I		
242605	5/10/13	000124	WELCARE OF NEW YORK,	INC. N	AVARRO, ANTONI	45.00		774.00	I		
242606	5/10/13	000124	WELCARE OF NEW YORK,	INC. O	RTIZ, DOLORES	18.00		309.60	I		
242607	5/10/13	000124	WELCARE OF NEW YORK,	INC. O	RTIZ, JOSE	8.00		137.60	I		
242608	5/03/13	000124	WELCARE OF NEW YORK,	INC. P.	ATRICK, IMAGEN	80.00		1,376.00	I		
242609	5/10/13	000124	WELCARE OF NEW YORK,	INC. P	ERALTA RODRIGO	20.00		344.00	I		
242610	5/10/13	000124	WELCARE OF NEW YORK,	INC. P	ERALTA, INEZ	20.00		344.00	I		
242611	5/10/13	000124	WELCARE OF NEW YORK,	INC. P	EREZ, JULIO	15.00		258.00	I		
242612	5/10/13	000124	WELCARE OF NEW YORK,	INC. R	AMIREZ, ALIDA	63.00		1,083.60	I		
242613	5/10/13	000124	WELCARE OF NEW YORK,	INC. R	EGLA, MARIA F	48.00		825.60	I		
242614	5/10/13	000124	WELCARE OF NEW YORK,	INC. R	EYES, TERESA	32.00		550.40	I		
242615	5/10/13	000124	WELCARE OF NEW YORK,	INC. S	ANCHEZ FLORES,	12.00		206.40	I		
242616	5/10/13	000124	WELCARE OF NEW YORK,	INC. S	ANCHEZ, BETANI	35.00		602.00	I		
242617	5/03/13	000124	WELCARE OF NEW YORK,	INC. S	ANTOS MAROUEZ,	12.00		206.40	I		
242618	5/10/13	000124	WELCARE OF NEW YORK,	INC. S	ERRANO, CARMEN	28.00		481.60	I		
242619	5/10/13	000124	WELCARE OF NEW YORK.	INC. S	OTO, RAFAEL B	60.00		1,032.00	Ī		
242620	5/10/13	000124	WELCARE OF NEW YORK.	INC. V	AZOUEZ 1, ROSA	40.00		688.00	Ī		
242621	5/10/13	000124	WELCARE OF NEW YORK,	INC. V	ENTURA, CLARA	19.50		335.40	Ī		
242622	5/10/13	000124	WELCARE OF NEW YORK,	INC. Y	OUNG, MARY	56.00		963.20	I		
			WELCARE OF NEW YORK,		CUSTOMER	1,364.25	0.00	23,465.10			
					- CATEGORY	1,364.25	0.00	23,465.10			

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 289 SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY AMG AMERIGROUP										
SALES URN	ш # 0333	TOC 001	SUNNYSIDE CITYWIDE	SALES REGISTER			BILL WEEK ENDI		5/17/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP	SURPLUS	
242623	3/29/13	000132	AMERIGROUP	GUERRA, LORRAIN	5.00		84.40	I		
242624	5/10/13	000132	AMERIGROUP	GUERRA, LORRAIN	32.00		540.16	I		
242625	5/10/13	000132	AMERIGROUP	PRUITT, JOHNNY	8.00		135.04	I		
242626	5/03/13	000132	AMERIGROUP	WALTERS, BYRON	60.00		1,012.80	I		
242627	5/03/13	000132	AMERIGROUP	YOUNG, KALEILE	46.00		776.48	I		
				CUSTOMER	151.00	0.00	2,548.88			
				CATEGORY	151.00	0.00	2,548.88			

			YSIDE CITYWIDE	DEC MY MY			-	- 29	0
SALES JRN	L # ∪333	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AM2 AMERIGRO		5/17/13
							2122 112211 2111	221.0	3, 11, 13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242620	F /02 /12	000004	AMEDICADOUR 2	ALCHEAD CAMIDIA	24 00		260.00	_	
242628	5/03/13	000204	AMERIGROUP 2	AKHTAR, CATHRIN	24.00		360.00	Τ	
242629	5/03/13	000204	AMERIGROUP 2	AKHTAR, CATHRIN	21.00		315.00	I	
242630	5/10/13	000204	AMERIGROUP 2	COLCHAMIRO, EST	32.00		480.00	I	
242631	5/10/13	000204	AMERIGROUP 2	CRUZ, SALVADOR	24.00		360.00	I	
242632	5/10/13	000204	AMERIGROUP 2	DENNISON, KELVI	12.00		180.00	I	
242633	5/10/13	000204	AMERIGROUP 2	ESPINAL, MARIA	36.00		540.00	I	
242634	5/10/13	000204	AMERIGROUP 2	FERNANDEZ, NORK	40.00		600.00	I	
242635	5/10/13	000204	AMERIGROUP 2	HARDING, EDNA	20.00		300.00	I	
242636	5/10/13	000204	AMERIGROUP 2	MARTINEZ, TOMAS	20.00		300.00	I	
242637	5/10/13	000204	AMERIGROUP 2	RIVERA, CARMEN	25.00		375.00	I	
				CUSTOMER	254.00	0.00	3,810.00		
				CATEGORY	254.00	0.00	3,810.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HCP HEALTHCARE F BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242638 242639 242640	5/10/13 5/10/13 5/10/13	000148 000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA SCOTT, AKHNATON ZAMBRANO, ZOILA	63.00 32.00 8.00		1,063.44 I 540.16 I 135.04 I	
				CUSTOMER	103.00	0.00	1,738.64	
				CATEGORY	103.00	0.00	1,738.64	

			YSIDE CITYWIDE				PAGE 1 -	- 292
SALES JRN	rL # 0333	LOC 001		G NY NY			ICS INDEPENDEN	NCE CARE SYSTEMS
			SALE	ES REGISTER	<u>!</u>		BILL WEEK END	ING 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
242641	5/03/13	000172	INDEPENDENCE CARE SYSTEMS	AGOSTINI, MONSE	36.00		590.40	I
242642	5/10/13	000172	INDEPENDENCE CARE SYSTEMS	BERRY, ANGELINA	28.00		459.20	I
242643	5/10/13	000172	INDEPENDENCE CARE SYSTEMS	JONES, VALERIE	20.00		328.00	I
242644	5/10/13	000172	INDEPENDENCE CARE SYSTEMS	MUSHAYEV, BORIS	20.00		328.00	I
242645	5/10/13	000172	INDEPENDENCE CARE SYSTEMS	POLANCO, BRIGID	4.00		900.00	I
242646	5/10/13	000172	INDEPENDENCE CARE SYSTEMS	RODRIGUEZ, SILV	24.00		393.60	I
				GLICEOMED	122 00	0.00	2 000 20	
				CUSTOMER	132.00	0.00	2,999.20	
				CATEGORY	132.00	0.00	2,999.20	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	293
SALES JRN	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG N	Y NY			VCS VNSNY CHOICE	SELECTHEALTH
				SALES	REGISTER			BILL WEEK ENDING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
242647	5/10/13	000170	VNSNY CHOICE SELECT	HEALTH I	KARASSAVIDES, A	27.00		463.32 I	
					CATEGORY	27.00	0.00	463.32	

			YSIDE CITYWIDE					- 29	94
SALES JRN	1L # 0333	LOC 001		REG NY NY			PAR PRIVATE		E /1 E /1 2
			SAI	LES REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242648	5/10/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES BENZ, ROBERT	12.00		174.00	I	
242649	5/10/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES JONES-MORGAN, V	4.00		58.00	I	
242650	1/11/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES RAYZMAN, SOLOMO	4.00		58.00	I	
242651	2/15/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES RAYZMAN, SOLOMO	4.00		58.00	I	
242652	3/01/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES RAYZMAN, SOLOMO	4.00		58.00	I	
242653	3/08/13	000002	SUNNYSIDE COMMUNITY SERVICE	,	4.00		58.00	I	
242654	3/22/13	000002	SUNNYSIDE COMMUNITY SERVICE		4.00		58.00	I	
242655	4/05/13	000002	SUNNYSIDE COMMUNITY SERVICE		4.00		58.00	I	
242656	5/03/13	000002	SUNNYSIDE COMMUNITY SERVICE	ES RAYZMAN, SOLOMO	4.00		58.00	I	
				CUSTOMER	44.00	0.00	638.00		
242657	5/10/13	000040	DUISIN, CHRISTINE	DUISIN, XENIA	24.00		378.00	I	
242658	5/10/13	000049	DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE	26.25		380.64	I	
242659	5/10/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	102.25	0.00	1,520.64		

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	15
SALES JRN	IL # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CAS CHILDREN	'S AID	SOCIETY
			S	ALES REGISTER			BILL WEEK ENI	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242660	5/10/13	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	20.00		310.00	I	
242661	5/10/13	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	28.00		434.00	I	
				CUSTOMER	48.00	0.00	744.00		
				CATEGORY	48.00	0.00	744.00		

RUN DATE	05/15/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	296
SALES JRN	L # 0333	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAR PRIVATE	
				SALES REGI	STER		BILL WEEK ENDING	G 5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
242662	5/10/13	000098	MILDRED PANSE	PANSE, MILD	RED 20.00		310.00 I	
				CATEG	ORY 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 ELDERSERVEHI BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
242663 242664	5/10/13 5/10/13	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA MEYSTER, LYUBOV	25.00 25.00		362.50 I 362.50 I	
				CUSTOMER	50.00	0.00	725.00	
				CATEGORY	50.00	0.00	725.00	

RUN DATE	05/15/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	98
SALES JRN	NL # 0333	LOC 001	SUNNYSIDE CITYWIDE R	EG NY NY			CCM COMPREHE	NSIVE	CARE MGMT
			S A L	ES REGISTER	2		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242665	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT APONTE, ANA	15.00		211.50	I	
242666	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT CARO, CLARA	70.00		987.00	I	
242667	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT GARCIA, MARIA	21.00		296.10	I	
242668	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT MELAMED, ESTER	4.00		56.40	I	
242669	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT POOLE, JENNIFER	9.00		126.90	I	
242670	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT PULLIAM, WILLIE	30.00		423.00	I	
242671	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT ROSARIO, CELEST	25.00		352.50	I	
242672	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT RUDA, EDWIN	13.00		183.30	I	
242673	5/10/13	000150	COMPREHENSIVE CARE MANAGEME	NT RUSSELL, BERNIC	18.00		253.80	I	
				CUSTOMER	205.00	0.00	2,890.50		
				CATEGORY	205.00	0.00	2,890.50		

		- SUP SUNI LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 PAR PRIVATE BILL WEEK EN	- 29	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242674	5/10/13	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	157.50		2,499.00	I	
242675	5/10/13	000179	DOROTHY TABICKMAN	TABICKMAN, DORT	12.00		186.00	I	
				CATEGORY	 169.50	0.00	2,685.00		

RUN DATE 05 SALES JRNL	5/15/13 - SUP SUNN # 0333 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I	STER		PAGE 1 HHH HOME (BILL WEEK END)	
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
	5/03/13 000192 5/10/13 000192	HHH LONG TERM HOME HLTH HHH LONG TERM HOME HLTH	· ·			120.00 510.00	I
			CUSTO	OMER 42.00	0.00	630.00	
			CATEG	ORY 42.00	0.00	630.00	

RUN DATE 05/15/13 - SALES JRNL # 0333		SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE REG NY NY					PAGE 1 - 301 PAR PRIVATE		
			SALE	SREGISTE	R		BILL WEEK EN	DING	5/17/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
242678	5/10/13	000205	BILL NANIS	NANIS, KOSTAS	96.00		1,542.00	I	
242679	5/10/13	002215	KEITH SALMON	LAWRANCE, LILLA	19.00		306.50	I	
242680	5/10/13	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
242681	5/10/13	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	24.75		334.13	I	
242682	5/10/13	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
242683	5/10/13	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
242684	5/10/13	010269	ANGELINA MARASA	MARASA, ANGELIN	3.00		46.50	I	
242685	5/10/13	010529	STEPHEN WEISS	WEISS, STELLA	6.00		102.00	I	
242686	5/10/13	010530	DANA SITILDES	ANSELMI, PETER	23.25		366.38	I	
242687	5/10/13	011016	MICHAEL SIANO	SIANO, ANDREW	30.00		405.00	I	
242688	5/10/13	011060	ROBIN WARREN CHARLES	WARREN, CYNTHIA	133.00		2,118.50	I	
242689	5/10/13	011394	HELGA JENSEN	JENSEN, HELGA	70.00		1,115.00	I	
242690	5/10/13	011630	JAMES BENZ	CAGAN, RUMANDO	8.00		124.00	I	
242691	5/10/13	011642	ROSA FLORES	FLORES, ROSA	30.00		465.00	I	
242692	4/12/13	012326	LORRAINE BIANCO-HOPKINS	BIANCO HOPKINS,	8.00		124.00	I	
242693 242694	4/26/13 5/10/13	012326 012326	LORRAINE BIANCO-HOPKINS LORRAINE BIANCO-HOPKINS	BIANCO HOPKINS, BIANCO HOPKINS,	8.00 20.00		124.00 310.00	I	
				CUSTOMER	36.00	0.00	558.00		
242695	5/10/13	012565	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
242696	5/10/13	012725	CATHERINE BARLIS	BARLIS, CATHERI	10.00		170.00	I	
242697	5/10/13	012929	JENNA SPERO	SPERO, NICHOLAS	36.00		579.00	I	
242698	5/10/13	013244	FRANK JARAMILLO	FLOREZ, CAROLIN	6.00		93.00	I	
				CATEGORY -	591.00	0.00	10,529.51		
				LOCATION	29,004.99	0.00	483,803.44		
				COMPANY	29,004.99	0.00	483,803.44		-

RUN DATE 05/15/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 302
SALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

ALES JRNL # 0333 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 5/17/13

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

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