RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 11/23/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS AMOUNT TYP TAX AMT SURPLUS 216655 11/16/12 000082 SENIOR HEALTH PARTNERS ALVAREZ, ANGELA 7.75 110.36 I 216656 11/16/12 000082 SENIOR HEALTH PARTNERS BANKS, ANASTAZJ 40.00 570.00 I SENIOR HEALTH PARTNERS BROOKS, NATALIE 216657 11/16/12 000082 22.00 313.50 CARRILLO, MARIA
COLON, RAYMUNDA
GHILIOTTY, FLOR
GRAFSTEIN, LILL
HARIDIN, KHAMAT
HARIDIN, RAMDIA
HERNANDEZ, FRAN
MALDONADO, VICE
MOROCHO, MANUEL
RAMOS, EFRAIN
RODRIGUEZ, MARI
ROSA, CARMEN
SIERRA, MIRIAM
SIMON, LUPE
SOTO, AGRIPINA
TORRESCAMPOS, J
VASQUEZ, CORNEL
WOO, LUZ 216658 11/16/12 000082 SENIOR HEALTH PARTNERS CARRILLO, MARIA 25.00 356.25 216659 11/16/12 000082 SENIOR HEALTH PARTNERS 35.00 498.75 216660 456.00 11/16/12 000082 SENIOR HEALTH PARTNERS 32.00 216661 11/09/12 000082 SENIOR HEALTH PARTNERS 5.00 1,000.00 216662 11/16/12 000082 SENIOR HEALTH PARTNERS 33.00 470.25 216663 11/16/12 000082 SENIOR HEALTH PARTNERS 135.00 1,923.75 216664 11/16/12 000082 SENIOR HEALTH PARTNERS 21.00 299.25 216665 11/16/12 000082 SENIOR HEALTH PARTNERS 4.00 800.00 216666 11/16/12 000082 SENIOR HEALTH PARTNERS 76.00 1,083.00 216667 11/16/12 SENIOR HEALTH PARTNERS 12.00 171.00 000082 SENIOR HEALTH PARTNERS 216668 11/16/12 000082 16.00 227.84 216669 11/16/12 000082 SENIOR HEALTH PARTNERS 15.00 213.75 216670 11/16/12 SENIOR HEALTH PARTNERS 20.00 285.00 000082 216671 11/16/12 SENIOR HEALTH PARTNERS 8.00 114.00 000082 216672 11/16/12 000082 SENIOR HEALTH PARTNERS 16.00 228.00 342.00 216673 11/16/12 000082 SENIOR HEALTH PARTNERS 24.00 216674 11/09/12 000082 SENIOR HEALTH PARTNERS 16.00 228.00 216675 11/16/12 000082 SENIOR HEALTH PARTNERS WOO, LUZ 12.00 171.00 _____ _____ CUSTOMER 574.75 0.00 9,861.70

CATEGORY

574.75

0.00

9,861.70

			YSIDE CITYWIDE				PAGE 1 -	_	
SALES JR	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			S	ALES REGISTER			BILL WEEK END	ING 11/23	7/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURP	LUS
216676	11/16/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	56.25		820.13	I	
216677	11/16/12	000008	VISITING NURSE SERVICE	ACOSTA, ALBERTO	34.75		506.66	I	
216678	11/09/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	10.00		145.80	I	
216679	11/16/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
216680	11/09/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	10.00		145.80	I	
216681	11/16/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
216682	11/16/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	68.75		1,002.38	I	
216683	11/16/12	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	6.00		889.38	I	
216684	11/09/12	800000	VISITING NURSE SERVICE	AFZAL, AMIR	1.00		14.58	I	
				CUSTOMER	246.75	0.00	4,399.53		
				CATEGORY	246.75	0.00	4,399.53		

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 3
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	5	SALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	TT AMOUNT TYP SURPLUS
216685 11/16/12	000008 VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00	656.10 I
		CATEGORY	45.00 0.0	 00 656.10

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END		4 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP	SURPLUS
216686 11/09/12 216687 11/16/12 216688 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	AGUILAR-PROCE, AGUILAR-PROCE, AKBAR, NASEEM	14.00 49.00 16.00		204.12 714.42 233.28	I I I	
			CUSTOMER	79.00	0.00	1,151.82		
			CATEGORY	79.00	0.00	1,151.82		

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 5	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		S	ALES REGISTER			BILL WEEK ENI	DING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
216689 11/16/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	35.00		510.30	I	
			CATEGORY	35.00	0.00	510.30		

RUN DATE 11/20/12						PAGE 1 -	_	6
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		11 /02 /12
		S	ALES REGISTER			BILL WEEK END	LNG	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	ΓΥΡ	SURPLUS
216690 11/16/12	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	29.50		430.11	I	
			CATEGORY	29.50	0.00	430.11		

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 7	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
		:	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
INVOICE# DATE	COSI NO	COSTOMER NAME	KEFEKENCE	HOURS	IAA AMI	AMOUNT TIP SURPLUS	
216691 11/16/12	800000	VISITING NURSE SERVICE	ALVARADO, EUFEM	3.00		43.74 I	
			CATEGORY	3.00	0.00	43.74	

RUN DATE 11/20/12 -						PAGE 1 -	8
SALES JRNL # 0308	LOC 001		REG NY NY A L E S R E G I S T E R			VCP CHOICE LHCSA BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216692 11/16/12	800000	VISITING NURSE SERVICE	ALVAREZ, DALILA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	9	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	JLT	
			Ş	SALES REGISTER			BILL WEEK ENDIN	IG 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
216693	11/16/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	52.00		758.16 I	• •	
				CATEGORY	52.00	0.00	758.16		

	11/20/12 NL # 0308	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWI	IDE REG NY	NY			PAGE 1 VCP CHOICE L		10
	11000	100 001	SOMITED CITIVE		REGISTER			BILL WEEK EN		11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216694	10/26/12	800000	VISITING NURSE SE	ERVICE ANA	ANIA, GLYGERI	4.50		65.61	I	
216695	11/16/12	000008	VISITING NURSE SE	ERVICE ANA	ANIA, GLYGERI	16.00		233.28	I	
216696	11/16/12	800000	VISITING NURSE SE	ERVICE AND	DINO, ESTEBAN	12.00		174.96	I	
216697	11/16/12	000008	VISITING NURSE SE	ERVICE AND	DRADE, LOLA	84.00		1,224.72	I	
216698	11/16/12	000008	VISITING NURSE SE	ERVICE AND	DREWS, JOHNNI	56.00		816.48	I	
216699	11/02/12	000008	VISITING NURSE SE	ERVICE ANG	GRISANO, RUTH	4.00		58.32	I	
216700	11/16/12	800000	VISITING NURSE SE	ERVICE ANG	GRISANO, RUTH	28.00		408.24	I	
					CUSTOMER	204.50	0.00	2,981.61		
					CATEGORY	204.50	0.00	2,981.61		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 11 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS
216701 11/16/12 216702 11/16/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	20.00 61.00	291.60 I 889.38 I
		CUSTOMER	81.00 0.00	1,180.98
		CATEGORY	81.00 0.00	1,180.98

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216703 11/16/12 216704 11/16/12 216705 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ARGENTINA, CESS	24.00 8.00 46.00		349.92 I 116.64 I 670.68 I	
			CUSTOMER	78.00	0.00	1,137.24	
			CATEGORY	78.00	0.00	1,137.24	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	13 IG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216706 11/16/12	800000	VISITING NURSE SERVICE	ASADOURIAN, COR	30.00		437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 14 LTC NURSING HOMEW/O WAL BILL WEEK ENDING 11/23	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
216707 11/16/12 216708 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	56.00 4.00		816.48 I 58.32 I	
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216709 11/16/12	000008 VISITING NURSE SERVICE	CE BADILLO, JOVITA	12.00		174.96 I	
		CATEGORY	12.00	0.00	174.96	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
			SALES REGISTER			BILL WEEK EN	DING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216710 11/16/12	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	30.00		437.40	I
216711 11/16/12	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	48.00		699.84	I
			CUSTOMER	78.00	0.00	1,137.24	
			CATEGORY	78.00	0.00	1,137.24	

			YSIDE CITYWIDE				PAGE 1 -	17
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216712	11/16/12	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	50.00		729.00 I	
				CATEGORY	50.00	0.00	729.00	

]	RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 1	.8	
1	SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	/WEMC	O WALLS (LT	
				5	SALES REGISTER			BILL WEEK END	ING	11/23/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP	SURPLUS	
	216713	11/16/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	49.75		725.36	I		
					CATEGORY	49.75	0.00	725.36			

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	19
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK END	ING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	ГҮР	SURPLUS
INVOICE#	DAIE	COSI NO	COSTOMER NAME	REFERENCE	CAUUN	IAA AMI	AMOUNT	LIP	SURPLUS
216714	11/16/12	000008	VISITING NURSE SERVICE	BAZAN, VICTORIA	34.75		506.66	I	
				CATEGORY	34.75	0.00	506.66		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	_	20
			SALES REGISTER			BILL WEEK ENI		11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216715 11/16/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	56.00		816.48	I	
216716 11/16/12 216717 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BELLOROFONTE, M BERENBLIT, SARA	151.00 5.75		2,201.58 83.84	I	
			CUSTOMER	212.75	0.00	3,101.90		
			CATEGORY	212.75	0.00	3,101.90		

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	21
SALES JRNI	4 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216718 1	11/16/12	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	33.00		481.14 I	
				CATEGORY	33.00	0.00	481.14	

RUN DATE 11/20/3	12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	22
SALES JRNL # 030	08 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
		S	SALES REGISTER			BILL WEEK ENDING	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216719 11/16/3	12 000008	VISITING NURSE SERVICE	BHATT, JYOTI	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYW	IDE REGNY NY SALES REGISTER	n		PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	, -,
216720 11/16/12	000008 VISITING NURSE S	ERVICE BHAWNANI, BISHU	24.00		349.92 I	
		CATEGORY	24.00	0.00		

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDIN	24 G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216721 11/16/12	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216722 11/09/12	000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	8.00		116.64 I
216723 11/16/12	000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I
			CUSTOMER	48.00	0.00	699.84
			CATEGORY	48.00	0.00	699.84

RUN DATE 11/20/12 - S	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 26
SALES JRNL # 0308 L		REG NY NY		VCP CHOICE LHCSA
	S	ALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216724 11/16/12 0	000008 VISITING NURSE SERVICE	BLUNNIE, ELIZAB	20.00	291.60 I
		CATEGORY	20.00 0.00	 291.60

		NYSIDE CITYWIDE				-	27	
SALES JRNL # 0	308 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	<u> </u>	
			SALES KEGISIEK			BIDD WEEK ENDIN	3 11/23/12	
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
216725 11/16	/12 000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	21.50		313.47 I		
			CATEGORY	21.50	0.00	313.47		

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK EN	HCSA	28 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216726 11/16/12 216727 11/02/12 216728 11/16/12	800000 000008 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BOCANEGREA, MAR BOJORQUEZDECHA, BOJORQUEZDECHA,	12.00 5.50 30.00		174.96 80.19 437.40	I I I	
			CUSTOMER	47.50	0.00	692.55		
			CATEGORY	47.50	0.00	692.55		

			YSIDE CITYWIDE	DEC NY NY			11101	-	29
SALES JRNI	_ # U3U8	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK END	ING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216729 1	11/16/12	800000	VISITING NURSE SERVICE	BONILLA, ESPERA	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 30 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216730 11/02/12 216731 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	4.00 22.00		58.32 I 320.76 I	
			CUSTOMER	26.00	0.00	379.08	
			CATEGORY	26.00	0.00	379.08	

RUN DATE 11/20/12 -						PAGE 1 -	~ -
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEV	
		2	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
01.5500 11.415.410				05.00		264.50	
216732 11/16/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	

	SUP SUNNYSIDE CITYWIDE				PAGE 1 -	32
SALES JRNL # 0308 L		REG NY NY ALES REGISTER			ADU ADULT BILL WEEK ENDIN	a 11/02/10
	5	ALES REGISIER			BILL MEEK ENDIN	G 11/23/12
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216733 11/16/12 0	000008 VISITING NURSE SERVICE	BORGES, MARINA	8.50		123.94 I	
		CATEGORY	8.50	0.00	123.94	

RUN DATE 11/20/12 -						PAGE 1 -	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
216734 11/16/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
			CATEGORY	12.00	0.00		

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 34
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
216735 11/16/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30	I
			CATEGORY	35.00	0.00	510.30	

RUN DATE	11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	35
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
			S	SALES REGISTE	R		BILL WEEK ENI	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216736	11/16/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	70.00		1,020.60	I	
216737	11/16/12	800000	VISITING NURSE SERVICE	BRACERO, HELEN	82.50		1,202.86	I	
216738	11/16/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		131.22	I	
216739	11/16/12	800000	VISITING NURSE SERVICE	BURITICA, INES	25.00		364.50	I	
216740	11/16/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	56.00		816.48	I	
				CUSTOMER	242.50	0.00	3,535.66		
				CATEGORY	242.50	0.00	3,535.66		

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HO	ME W/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
216741	11/16/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	58.00		845.64	I
				CATEGORY	58.00	0.00	845.64	

			YSIDE CITYWIDE	DDG 1911			PAGE 1		37
SALES URI	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH BILL WEEK END		11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216742 216743	11/16/12 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	10.00 38.75		145.80 564.99	I T	
210713	11/10/12	000000	VIDITING NORDE BERVIOE	CUSTOMER	48.75	0.00	710.79		
				COSTOMER	40.75	0.00	710.79		
				CATEGORY	48.75	0.00	710.79		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	38 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216744 11/16/12	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	70.00		1,020.60 I	
			CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/20/12 -								39
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LE		11/23/12
								,,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216745 11/16/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.75		637.88	I	
216746 11/16/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	55.75		812.84	I	
			CUSTOMER	99.50	0.00	1,450.72		
			CODIONEIC	,,,,,	0.00	1,130.72		
			CATEGODY	00 50	0.00	1 450 72		
			CATEGORY	99.50	0.00	1,450.72		

	RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE	PAGE 1 - 40 LTC NURSING HOMEW/O WALLS (LT
ISTER	S	BILL WEEK ENDING 11/23/12
E HOURS TAX AMT	INVOICE# DATE CUST NO CUSTOMER NAME	AMOUNT TYP SURPLUS
LINA 41.75	216747 11/16/12 000008 VISITING NURSE SERVICE	608.72 I
		600 72

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	_	41
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				VCP CHOICE L		
			S	ALES RE	GISTER			BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE H	IOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216748	11/16/12	800000	VISITING NURSE SERVICE	CAPORAS	O, VINCE 8	31.50		1,188.27	I	
				C	ATEGORY 8	 81.50	0.00	1,188.27		

ı	RUN DATE 11/	20/12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 4	2
ı	SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/	O WALLS (LT
ı			5	SALES REGISTER			BILL WEEK END	ING	11/23/12
	INVOICE# D	PATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	216749 11/	16/12 000008	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	43 SA
		S	SALES REGISTER			BILL WEEK ENDIN	IG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216750 11/16/12	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	78.00		1,137.25	- -
216751 11/16/12 216752 11/16/12	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARDOZA, ANAIDA CARELA-REYES, M	1.00 25.00		14.58] 364.50]	• •
216753 11/16/12	000008	VISITING NURSE SERVICE	CARLOS, JULIA	20.00		291.60	- - -
			CUSTOMER	124.00	0.00	1,807.93	
			CATEGORY	124.00	0.00	1,807.93	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK END	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
216754 11/09/12 216755 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARRALERO, ROSA CARRALERO, ROSA	1.00		14.58 437.40	I I
			CUSTOMER	31.00	0.00	451.98	
			CATEGORY	31.00	0.00	 451.98	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	45
SALES JRN	rL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216756	11/16/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	53.00		772.74 I	
				CATEGORY	53.00	0.00	772.74	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRN	1T # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 11/23/12
T1770 T G 7 II	D.1.00	G11GE 110	GIIGHOVED MANE	2222224	******		3.40TPT	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216757	11/16/12	000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	9.00		131.22 I	
210737	11/10/12	000000	VIBITING NORDE BERVICE	CABIANEDA, 000E	2.00		151.22	•
				CATEGORY	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
		:	SALES REGISTER			BILL WEEK ENDING	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216758 11/16/12	000008	VISITING NURSE SERVICE	CEDALLOS CLEME	16.00		233.28 I	
216759 11/16/12	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	28.00		408.24 I	
216760 11/16/12	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	24.50		357.21 I	
			CUSTOMER	68.50	0.00	998.73	
			CATEGORY	68.50	0.00	998.73	

RUN DATE 11/20/1	2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	48
SALES JRNL # 030	8 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	
			SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216761 11/16/1	2 000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

	E 11/20/12 - RNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		49
SALES	KINL # 0300	LOC UUI		SALES REGISTER			BILL WEEK EN		11/23/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216762 216763	11/16/12 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		30.00 69.75		437.40 1,016.96	I T	
	,			CUSTOMER	99.75	0.00	1,454.36		
				CATEGORY	99.75	0.00	1,454.36		

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE PAGE SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE REG NY NY LTC NURSING	1 - 50 G HOMEW/O WALLS (LT
	ENDING 11/23/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT	T TYP SURPLUS
216764 11/16/12 000008 VISITING NURSE SERVICE CHIANETTA, JOSE 35.00 510.30	0 I
CATEGORY 35.00 0.00 510.3	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	51
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
		S	SALES REGISTE	R		BILL WEEK ENDIN	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216765 10/26/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	6.00		87.48 I	
216766 11/16/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
216767 11/16/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	48.00		699.84 I	
216768 11/16/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	31.00		451.98 I	
			CUSTOMER	115.00	0.00	1,676.70	
			CATEGORY	115.00	0.00	1,676.70	

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	52
SALES UNI # 0300	100 001		SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216769 11/16/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 53
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			S A L E S R E G I S T E R			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216770 11/16/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I
216771 11/16/12	800000	VISITING NURSE SERVICE	COLLER, JOSE	20.00		291.60	I
216772 11/16/12	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I
			CUSTOMER	82.00	0.00	1,195.56	
			CATEGORY	82.00	0.00	1,195.56	

			YSIDE CITYWIDE				-	54
SALES JRI	ML # 0308	LOC 001		REGNY NY SALES REGISTER			CCL CONGREGATE BILL WEEK ENDIN	
			'	SALES KEGISIEK			BILL MEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216773	11/16/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				CATEGORY	168.00	0.00	2,449.44	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 55	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
		5	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216774 11/16/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

- 1	RUN DATE 11/20/						PAGE 1 -	56
	SALES JRNL # 030	08 LOC 001		REG NY NY ALES REGISTER			VCP CHOICE LHCS	
			-					
	INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	216775 11/16/2	2 000008	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60	<u>.</u>
				CATEGORY	20.00	0.00	291.60	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R		PAGE 1 - 57 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216776 11/16/12	000008 VISITING NURSE SERVICE	COSTA, ARSENE	39.00	568.62 I
		CATEGORY	39.00 0.00	 568.62

		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	58
	,,			ALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216777	11/09/12	800000	VISITING NURSE SERVICE	COVALIU, SIMION	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 11/20/12	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	59
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADT	JLT
			SALES REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
216778 11/16/12	800000	VISITING NURSE SERVICE	COX, PETRA	20.00		291.60	I
			CATEGORY	20.00	0.00	291.60	

RUN DA	TE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	60
SALES	JRNL # 0308	LOC 001		REG NY NY			VCP CHOICE LH		
			:	SALES REGISTER			BILL WEEK END	ING	11/23/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216779	11/16/12	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	51.50		750.87	I	
				CATEGORY	51.50	0.00	750.87		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 61 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216780 10/19/12 216781 11/16/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	7.00 38.75	102.06 I 564.98 I
		CUSTOMER	45.75 0.00	667.04
		CATEGORY	45.75 0.00	667.04

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 - VCP CHOICE LHCS	62 A
			SALES R	EGIST	E R		BILL WEEK ENDING	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216782 11/16/12 216783 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	JUANA LIDIA	20.00 34.00		291.60 I 495.72 I	
210,03 11,10,12	00000	VIBITING NORDE BERVICE	CROZ,	CUSTOMER	51.00 54.00	0.00	787.32	
				CODIONER	31.00		707.32	
				CATEGORY	54.00	0.00	787.32	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 63
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK EN	DING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216784 11/16/12	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	25.00		364.50	I
216785 11/16/12	000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	55.25		805.55	I
			CUSTOMER	80.25	0.00	1,170.05	
			CATEGORY	80.25	0.00	1,170.05	
			CATEGORY	00.25	0.00	1,1/0.05	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	64	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA		
			Ş	SALES REGISTER			BILL WEEK END	ING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
216786	11/16/12	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	30.00		437.40	I		
				CATEGORY	30.00	0.00	437.40			

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 65
SALES JR	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216787	11/16/12	800000	VISITING NURSE SERVICE	DE LA HOZ, RUTH	1.00		14.58 I
				CATEGORY	1.00	0.00	 14.58

RUN DATE 11/20/12 -	SUP SUNNYSIDE CI	TYWIDE				PAGE 1 -	- 66
SALES JRNL # 0308	LOC 001 SUNNYS	IDE CITYWIDE REG	NY NY			VCP CHOICE LHO	SA
		SALE	S REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE# DATE	CUST NO CUSTOME	R NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
216788 11/16/12	000008 VISITIN	G NURSE SERVICE	DEJESUS, FELIX	20.00		291.60	I
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 - S	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 67
SALES JRNL # 0308 LO	LOC 001 SUNNYSIDE CITYWIDE R	EG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S A L	ES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216789 11/16/12 0	000008 VISITING NURSE SERVICE	DELACRUZ, SEFER	37.00	539.46 I
		CATEGORY	37.00 0.00	 539.46

RUN DATE 11/20/12 - S SALES JRNL # 0308 L	OC 001 SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER		PAGE 1 - 68 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE C	UST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216791 11/16/12 0	00008 VISITING NURSE SERVICE 00008 VISITING NURSE SERVICE 00008 VISITING NURSE SERVICE	DELOSSANTOS, MA DELPOZO, MIGUEL DELUCA, ANTIONE	30.00 12.00 24.00	437.40 I 174.96 I 349.92 I
		CUSTOMER	66.00 0.00	962.28
		CATEGORY	66.00 0.00	962.28

RUN DATE 11/20/12 -		YSIDE CITYWIDE				PAGE 1 - 69	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216793 11/09/12	000008	VISITING NURSE SERVICE	DERAMIREZ, MERC	6.00		87.48 I	
216794 11/16/12	800000	VISITING NURSE SERVICE	DERAMIREZ, MERC	12.00		174.96 I	
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	70 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216795 11/16/12 216796 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	8.75 56.50		127.58 I 823.77 I	
			CUSTOMER	65.25	0.00	951.35	
			CATEGORY	65.25	0.00	951.35	

RUN DATE 11/2	0/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	71
SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	E W/O WALLS LT
			SALES REGISTER			BILL WEEK ENDING	3 11/23/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
211,10202 211		000101111111111111111111111111111111111	TELL ETTELLOE	1100115		11100111 111	2011 202
216797 11/1	6/12 000008	VISITING NURSE SERVICE	DIAZ, HILDA	42.00		612.36 I	
			CATEGORY	42.00	0.00	612.36	

	11/20/12 ·	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYW	IIDE REG N	Y NY			PAGE 1 VCP CHOICE L		72
SALES UK.	NL # 0300	LOC UUI	SUNNISIDE CITIW	SALES				BILL WEEK EN		11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216798	11/16/12	000008	VISITING NURSE S	SERVICE	DIAZ, MARIA	27.25		397.31	I	
216799	11/16/12	800000	VISITING NURSE S	SERVICE 1	DIAZ, OLGA	52.00		758.16	I	
216800	11/16/12	800000	VISITING NURSE S	SERVICE 1	DIAZ, ROSA	42.00		612.36	I	
216801	11/16/12	800000	VISITING NURSE S	SERVICE 1	DILLUVIO, MATTI	74.00		1,078.92	I	
216802	11/16/12	800000	VISITING NURSE S	SERVICE 1	DOMINGUEZ, MARI	42.00		612.36	I	
216803	11/09/12	800000	VISITING NURSE S	SERVICE 1	DOMINGUEZ-REIN,	4.00		58.32	I	
216804	11/16/12	800000	VISITING NURSE S	SERVICE	DOMINGUEZ-REIN,	15.75		229.64	I	
					CUSTOMER	257.00	0.00	3,747.07		
					CATEGORY	257.00	0.00	3,747.07		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 73 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216805 11/16/12	000008 VISITING NURSE SERVICE	DUTAN, SELINDA	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 74
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216806 11/16/12	000008	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I
			CATEGORY	15.00	0.00	218.70

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	75
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A.
		S	SALES REGISTER			BILL WEEK ENDING	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216807 11/16/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	42.75		623.30 I	
			CATEGORY	42.75	0.00	623.30	

RUN DATE 11/20/12 -							76
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TO 11/02/10
		2	SALES REGISTER			BILL WEEK ENDIN	NG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
				15 00		010 50	_
216808 11/16/12	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70	L
			CATEGORY	15.00	0.00	218.70	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	77
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216809	11/16/12	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 11/20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 78	3
SALES JRNL # 0308 LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			CCL CONGREGATE CARE	PROGRAM
	S A L E	S REGISTER			BILL WEEK ENDING 1	1/23/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216810 11/16/12 000008	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 79
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			S	ALES REG	ISTER		BILL WEEK END	ING 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENC	CE HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216811	11/16/12	800000	VISITING NURSE SERVICE	ESPEJO, F	FLORENC 30.00		437.40	I
				САТ	 TEGORY 30.00	0.00	437.40	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	80
		\$	SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216812 11/09/12	000008	VISITING NURSE SERVICE	ESPIN, CESAR	16.00		233.28 I	
216813 11/16/12	000008	VISITING NURSE SERVICE		56.00		816.48 I	
216814 11/16/12	000008	VISITING NURSE SERVICE	ETTIN, RUTH	20.00		291.60 I	
			CUSTOMER	92.00	0.00	1,341.36	
			CATEGORY	92.00	0.00	1,341.36	

RUN DATE 11/20/12 - SU	UP SUNNYSIDE CITYWIDE			PAGE	1 -	81
SALES JRNL # 0308 LC		REG NY NY		VCP CHOICE		
	S A	ALES REGISTER		BILL WEEK	ENDING	11/23/12
INVOICE# DATE CU	UST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUN	T TYP	SURPLUS
216815 11/16/12 00	00008 VISITING NURSE SERVICE	EVERETT, SHIRLE	21.00	306.1	8 I	
		CATEGORY	21.00	0.00 306.1	 8	

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	82
SALES UNIL # 0300	100 001		ALES REGISTER			BILL WEEK ENDING	G 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216816 11/16/12	800000	VISITING NURSE SERVICE	FADEN, ROBIN	50.00		729.00 I	
			CATEGORY	50.00	0.00	729.00	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	- 8:	3	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LHO	CSA		
			S	SALES	REGISTER			BILL WEEK ENDI	ING :	11/23/12	
				_							
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT T	TYP	SURPLUS	
01.601.						4 00		50.00	_		
216817	11/16/12	800000	VISITING NURSE SERVICE	F'A	MBIATOU, PARA	4.00		58.32	I		
						4 00	0.00	F0 20			
					CATEGORY	4.00	0.00	58.32			

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 84
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE A	-
		S	SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216818 11/16/12	000008	VISITING NURSE SERVICE	FARO, JOSEPH	21.00		306.18	I
			CATEGORY	21.00	0.00	306.18	

RUI	N DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	85
SAI	LES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGATE C	ARE PROGRAM
				:	SALES R	EGISTE	R		BILL WEEK ENDING	11/23/12
TN/	JOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	ERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
01/	-010	11/16/10	00000	TITATETHA NUDAE ARRITAR	FARO	TITD GTNT A	15 00		210 70 7	
216	5819	11/16/12	800000	VISITING NURSE SERVICE	FARO,	VIRGINIA	15.00		218.70 I	
						CATEGORY	15.00	0.00	218.70	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	86 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216820 11/16/12	000008 VISITING NURSE SERVICE	FAROUGIAS, ANGE	9.00		131.22 I	
		CATEGORY	9.00	0.00	131.22	

			YSIDE CITYWIDE					PAGE 1	-	87	
SALES JRNL	# 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOA HOSPICE	_		
			5	ALES RE	GISTER			BILL WEEK EN	DING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
216821 13	1/16/12	800000	VISITING NURSE SERVICE	FAROUGI	AS, EFTH	20.00		291.60	I		
				C	ATEGORY	20.00	0.00	291.60			

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	38
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216822	11/16/12	800000	VISITING NURSE SERVICE	FAY, JULIA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	89	
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
216823	11/16/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	16.00		233.28 I		
				CATEGORY	16.00	0.00	233.28		

RUN DATE 11/20/12 - S' SALES JRNL # 0308 L		REG NY NY			PAGE 1 - ADU ADULT	- 90
DALLS ORNE # 0500 E		SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
216824 11/16/12 0	000008 VISITING NURSE SERVICE	FERMIN, ORQUIDI	7.75		113.00	I
		CATEGORY	7.75	0.00	113.00	

1	RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	91
5	SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	11/23/12
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
:	216825	11/16/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
					CATEGORY	15.00	0.00	218.70	

RUN DATE 11/20/12 -			DEG NV NV				92
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216826 11/16/12 216827 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	9.00 19.25		131.22 I 280.67 I	
			CUSTOMER	28.25	0.00	411.89	
			CATEGORY	28.25	0.00	411.89	

ı	RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	93
ı	SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
ı				5	SALES REGISTER			BILL WEEK ENDING	11/23/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	216828	11/16/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	15.00		218.70 I	
					CATEGORY	15.00	0.00	218.70	

RUN DATE 11/20/12 - SALES JRNL # 0308		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	94
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216829 11/16/12	800000	VISITING NURSE SERVICE	FIGUEREDO, JOSE	2.50		36.45 I	
			CATEGORY	2.50	0.00	36.45	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING H BILL WEEK END		O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216830 11/02/12 216831 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	8.00 52.75		116.64 769.10	I	
			CUSTOMER	60.75	0.00	885.74		
			CATEGORY	 60.75	0.00	885.74		

RUN DATE 11/2	20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216832 11/1	16/12 000008	VISITING NURSE SERVICE	FLEITMAN, KLARA	15.00		218.70 I	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	97 A
BINDED STAVE 0300	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FOLLETTO, ROSIN FONG, ALEFINA	35.00 8.00		510.30 I 116.64 I	
	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		510.30 I	
			CUSTOMER	78.00	0.00	1,137.24	
			CATEGORY	78.00	0.00	1,137.24	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 98 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216836 11/16/12 216837 11/16/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		46.00 35.00		670.68 I 510.30 I
		CUSTOMER	81.00	0.00	1,180.98
		CATEGORY	81.00	0.00	1,180.98

RUN DATE 11/20/12 -						PAGE 1 -	99
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			SALES REGISTER			BILL WEEK ENDING	3 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
216838 11/16/12	000008	VISITING NURSE SERVICE	GAID, ASILA	10.00		145.80 I	
216839 11/16/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	6.00		87.48 I	
			CUSTOMER	16.00	0.00	233.28	
				16.00			
			CATEGORY	16.00	0.00	233.28	

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 100
SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING E	HOMEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENI	DING 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216840 1	11/16/12	800000	VISITING NURSE SERVICE	GALLO, BENJAMIN	40.00		583.20	I
216841 1	11/16/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	16.00		233.28	I
216842	11/16/12	800000	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		437.40	I
				CUSTOMER	86.00	0.00	1,253.88	
				CATEGORY	86.00	0.00	1,253.88	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 1	01
		\$	SALES REGISTER			BILL WEEK ENI	DING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216843 11/16/12 216844 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00		291.60 87.48	I I	
		VIDITING NONDE DERVIOE	CUSTOMER	26.00	0.00	379.08		
			CODIONER	20.00		3,3.00		
			CATEGORY	26.00	0.00	379.08		

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 102	
SALES JRNL	4 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 11/23/1:	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
216845 1	11/16/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	_

	/20/12 - SUP S # 0308 LOC 0	SUNNYSIDE CITYWIDE 001 SUNNYSIDE CITYWID	E REG NY NY			PAGE 1 ADULT	- 103
			SALES REGIS	T E R		BILL WEEK END	ING 11/23/12
INVOICE#	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
216846 11	/16/12 00000	08 VISITING NURSE SER	VICE GERDES, WILL	12.00		174.96	I
			CATEGOR	RY 12.00	0.00	174.96	

RUN DATE 11/2	0/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 104	
SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
		5	SALES REGISTER			BILL WEEK ENDING 13	1/23/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
216847 11/1	.6/12 000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	47.75		696.21 I	
			CATEGORY	47.75	0.00	696.21	

RUN DA	TE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 105	· •
SALES	JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 1	.1/23/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216848	11/16/12	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	53.00		772.74 I	
				CATEGORY	53.00	0.00	772.74	

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 106
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA
		SALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216849 11/16/12	000008 VISITING NURSE SERVICE	GOMEZ, JOSEFINA	20.00	291.60 I
		CATEGORY	20.00 0.00	291.60

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 107
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
216850 11/16/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I
216851 11/16/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	32.75		477.50	I
			CUSTOMER	67.75	0.00	987.80	
			CATEGORY	67.75	0.00	987.80	

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 10 VCP CHOICE LHCSA BILL WEEK ENDING)8 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216852 11/16/12 216853 11/16/12 216854 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GONZALEZ, CARLO	8.00 12.00 35.00		116.64 I 174.96 I 510.30 I	
			CUSTOMER	55.00	0.00	801.90	
			CATEGORY	55.00	0.00	801.90	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 109 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216855 11/16/12 216856 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	25.00 21.00		364.50 I 306.18 I
			CUSTOMER	46.00	0.00	670.68
			CATEGORY	46.00	0.00	 670.68

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY 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
216857 11/16/12 216858 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · ·	12.00 40.00		174.96 583.20	I I
			CUSTOMER	52.00	0.00	758.16	
			CATEGORY	52.00	0.00	 758.16	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	111
INVOICE# DATE	GUGE NO	_	ALES REGISTER REFERENCE	HOUDG	may amm	BILL WEEK ENDING	
INVOICE# DATE 216859 11/16/12	O00008	VISITING NURSE SERVICE	GREENBAUM, MASA	HOURS 42.50	TAX AMT	AMOUNT TY: 619.66 I	
210033 11/10/12	000000	VIDITING NORDE BERVICE	ORBENDAUM, FIADA				
			CATEGORY	42.50	0.00	619.66	

RUN DATE 11/20/1	2 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 -	112
SALES JRNL # 030	8 LOC 001		REG NY NY			LAA LOMBARDI AID	
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216860 11/16/1	2 000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	49.00		714.42 I	
			CATEGORY	49.00	0.00		
			CAIEGORI	ェ ン・00	0.00	114.42	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK END		3 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216861 11/16/12 216862 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUEVARA, ELENA GUTIERREZ, ANGE	84.00 83.50		1,224.72 1,217.43	I	
			CUSTOMER	167.50	0.00	2,442.15		
			CATEGORY	167.50	0.00	2,442.15		

RUN DATE 11/20/12 -						PAGE 1 -	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
		2	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216863 11/16/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	115
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216864 11/16/12 216865 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		48.00 24.00		699.84 I 349.92 I	
			CUSTOMER	72.00	0.00	1,049.76	
			CATEGORY	72.00	0.00	1,049.76	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYSIDE CI LOC 001 SUNNYS	IDE CITYWIDE REG	NY NY S REGISTER			VCP CHOICE LH	- 116 CSA ING 11/23/12
INVOICE# DATE	CUST NO CUSTOME	R NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216866 11/16/12	000008 VISITIN	G NURSE SERVICE	HENDY, BERNICE	29.00		422.82	I
			CATEGORY	29.00	0.00	422.82	

RUN DATE 11/20/12 SALES JRNL # 0308			REG NY NY			PAGE 1 - 117 ADU ADULT	
SALES UNIL # USUO	TOC 001		ALES REGISTER			BILL WEEK ENDING 11/23/	12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	LUS
216867 11/09/12 216868 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HENRIQUEZ, MARI HENRIQUEZ, MARI	4.50 55.75		65.61 I 812.84 I	
			CUSTOMER	60.25	0.00	878.45	
			 CATEGORY	60.25	0.00	 878.45	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 118 VCP CHOICE LHCSA BILL WEEK ENDING 1	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216869 11/16/12	800000	VISITING NURSE SERVICE	HERNANDEZ, JUAN	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDING	119 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216870 11/16/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MARI	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	120
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	SA
		S	ALES REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
216871 11/16/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	36.00		524.88	I
			CATEGORY	36.00	0.00	524.88	

RUN DATE 11/20/12 -						PAGE 1 -	
SALES JRNL # 0308	LOC 001 SU.	JNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216872 11/16/12	000008 VIS	SITING NURSE SERVICE	HERRERA, ANGELA	32.00		466.56 I	
			CATEGORY	32.00	0.00	466.56	

			YSIDE CITYWIDE					.22
SALES JR	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
			i	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216873	11/09/12	000008	VISITING NURSE SERVICE	HERRERA, CLARA	8.00		116.64 I	
216874	11/16/12	800000	VISITING NURSE SERVICE	HERRERA, CLARA	20.00		291.60 I	
				CUSTOMER	28.00	0.00	408.24	
				COSTONER	20.00	0.00	100.21	
				CATEGORY	28.00	0.00	408.24	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	23
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	IOMEW,	O WALLS (LT
		\$	SALES REGISTER			BILL WEEK END	ING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216875 11/09/12	800000	VISITING NURSE SERVICE	HERRERA, HORACI	16.00		233.28	I	
216876 11/16/12	800000	VISITING NURSE SERVICE	HERRERA, HORACI	56.75		827.42	I	
216877 11/16/12	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		583.20	I	
			CUSTOMER	112.75	0.00	1,643.90		
			CATEGORY	112.75	0.00	1,643.90		

RUN DATE 11/20/1	2 - SUP SUNNYSIDE CITYWIDE				PAGE 1 -	124
SALES JRNL # 030	8 LOC 001 SUNNYSIDE CITYW	IDE REG NY NY			VCP CHOICE LHCS	SA
		SALES REGISTE	E R		BILL WEEK ENDIN	NG 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
			1.6.00			_
216878 11/16/1	2 000008 VISITING NURSE S	ERVICE HUSSAIN, AHMED	16.00		233.28	<u> </u>
		- CATEGORY	16.00	0.00	233.28	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 125	
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			Ş	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216879	11/16/12	000008	VISITING NURSE SERVICE	ICIANO, ALFREDO	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 126 LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216880 11/16/12	V 800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10 I
			CATEGORY	45.00	0.00	656.10

	11/20/12 - NL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 ADU ADULT	- 12	27	
			5	SALES	REGISTER			BILL WEEK END	DING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
216881	11/16/12	000008	VISITING NURSE SERVICE	IN	SERRA, CATHER	48.75		710.78	I		
					CATEGORY	48.75	0.00	710.78			

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 128	
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216882	11/16/12	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE 11/20/12						PAGE 1	100	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
			SALES REGISTER			BILL WEEK END	ING 11/23/	12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPL	JUS
216883 11/16/12	000008	VISITING NURSE SERVICE	JACKSON, REGINA	9.00		131.22	I	
216884 11/16/12	800000	VISITING NURSE SERVICE	JACSO, ERZSEBET	12.00		174.96	I	
				01 00		206 10		
			CUSTOMER	21.00	0.00	306.18		
			CATEGORY	21.00	0.00	306.18		

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 130
SALES JRNL # 0308		REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S	SALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216885 11/16/12	000008 VISITING NURSE SERVICE	JAKLITSCH, ELIZ	47.00	685.26 I
		CATEGORY	47.00 0.00	685.26

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 131 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216886 11/16/12 216887 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		35.00 13.00		510.30 I 189.54 I
			CUSTOMER	48.00	0.00	699.84
			CATEGORY	48.00	0.00	699.84

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	32
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216888	11/16/12	800000	VISITING NURSE SERVICE	JENSEN, HELGA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		33 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216889 11/16/12 216890 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	JEWAT, LUCILLE JHAVERI, RAMESH	44.00 26.00		641.52 379.08	I I	
			CUSTOMER	70.00	0.00	1,020.60		
			CATEGORY	70.00	0.00	1,020.60		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRNL	# 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	
			2	SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216891 11	1/16/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMI BILL WEEK ENDING	EW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
216892 11/16/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/20/12	2 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 136	
SALES JRNL # 0308	B LOC 001		REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING 11/23	/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
216893 11/16/12	000008	VISITING NURSE SERVICE	JIMENEZ, BETTY	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	137
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216894 11/16/12	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/1 SALES JRNL # 030		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LHOBILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
216895 11/16/1 216896 11/16/1 216897 11/16/1	.2 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SARD	33.00 12.00 56.00		481.14 174.96 816.48	I I I
			CUSTOMER	101.00	0.00	1,472.58	
			CATEGORY	101.00	0.00	1,472.58	

	DATE 11/20/12 S JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 139
SALE	0000 # 111710 65	TOC 001		SALES REGISTER			BILL WEEK END	ING 11/23/12
INVO	DICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
2168	398 11/16/12	800000	VISITING NURSE SERVICE	KERNAN, DONALD	5.00		72.90	I
				CATEGORY	5.00	0.00	72.90	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - HOA HOSPICE AD BILL WEEK ENDI	-
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
216899 11/16/12	000008 V	VISITING NURSE SERVICE	KHAN, MARGARET	18.75		273.38	I
			CATEGORY	18.75	0.00	273.38	

		11/20/12 - L # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
					SALES REGISTER			BILL WEEK END		
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS	;
4	216900	11/16/12	800000	VISITING NURSE SERVICE	KILIMLIAN, PEPR	84.00		1,224.72	I	
					CATEGORY	84.00	0.00	1,224.72		•

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 142 ADU ADULT	
INVOICE# DATE	CUST NO		SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING 11/23/12 AMOUNT TYP SURPLUS	
216901 11/16/12		VISITING NURSE SERVICE		40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 11/	/20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 143
SALES JRNL ‡	# 0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
		\$	SALES REGISTER			BILL WEEK ENDI	ING 11/23/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP SURPLUS
216902 11/	/16/12 000008	VISITING NURSE SERVICE	KOSTIKIAN, MARI	5.00		72.90	I
216903 11/	/16/12 000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	52.75		769.10	I
			CUSTOMER	57.75	0.00	842.00	
			CATEGORY	57.75	0.00	842.00	

RUN DATE 11/20/12 - SUP SUNN					PAGE 1 - 14	14
SALES JRNL # 0308 LOC 001					ADU ADULT	
	S A L E	S REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216904 11/16/12 000008	VISITING NURSE SERVICE	LANDAU, BERNARD	6.00		87.48 I	
		CATEGORY	6.00	0.00	87.48	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 145	
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 11/23	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	LUS
216905	11/16/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 146 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216906 11/16/12	000008 VISITING NURSE SERVICE	LASAK, MICHAEL	9.00	131.22 I
		CATEGORY	9.00 0.00	131.22

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY 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
216907 11/16/12 216908 10/19/12 216909 10/26/12 216910 11/16/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEE, KATHLEEN LEGASPI, CECILI LEGASPI, CECILI LEGASPI, CECILI	31.00 4.00 4.00 11.25		451.98 58.32 58.32 164.03	I I I
			CUSTOMER	50.25	0.00	732.65	
			CATEGORY	 50.25	0.00	732.65	

RUN DATE 11/2	20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	8
SALES JRNL #	0308 LOC 001		REG NY NY			ADU ADULT	
		S	BALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216911 11/1	16/12 000008	VISITING NURSE SERVICE	LENDOIRO, JUAN	19.00		277.02 I	
			CATEGORY	19.00	0.00	277.02	

RUN DATE 11/20/12 -						PAGE 1 -	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216912 11/16/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48 I	
216913 11/16/12	800000	VISITING NURSE SERVICE	LIGARDO, SOL M	40.00		583.20 I	
216914 11/16/12	800000	VISITING NURSE SERVICE	LIRIANO, FRANCI	9.00		131.22 I	
216915 11/16/12	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	20.00		291.60 I	
			CUSTOMER	125.00	0.00	1,822.50	
			CATEGORY	125.00	0.00	1,822.50	

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 150	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O	WALLS LT
		S	SALES REGISTER			BILL WEEK ENDING 11	./23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
216916 11/16/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	1.00		14.58 I	
			CATEGORY	1.00	0.00	 14.58	

RUN DATE 11/2	0/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 151
SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENI	DING 11/23/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216917 11/0	9/12 000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I
216918 11/1	.6/12 000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	40.00		583.20	I
216919 11/1	.6/12 000008	VISITING NURSE SERVICE	LOGAN, ADELE	35.75		521.24	I
			CUSTOMER	83.75	0.00	1,221.08	
			CATEGORY	83.75	0.00	1,221.08	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 152	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 11/2	3/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
216920 11/16/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	62.00		903.96 I	
			CATEGORY	62.00	0.00	903.96	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	, -,
216921 11/16/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

		11/20/12 · IL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	101
					SALES REGISTER			BILL WEEK ENDIN	
	DICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
2169	922	11/16/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	25.00		364.50	-
					CATEGORY	25.00	0.00	364.50	

RUN DATE 11/20/12 -	- SUP SUNNYSI	IDE CITYWIDE				PAGE 1	- 155
SALES JRNL # 0308	LOC 001 S	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENI	DING 11/23/12
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216923 11/16/12	000008 VI	ISITING NURSE SERVICE	LOPEZ, EVA	4.00		58.32	I
216924 11/16/12	000008 VI	SITING NURSE SERVICE	LUACES, MIMITA	9.00		131.22	I
			CUSTOMER	13.00	0.00	189.54	
			CATEGORY	13.00	0.00	189.54	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 156
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216925	11/16/12	800000	VISITING NURSE SERVICE	LUCES, LETICIA	20.00		291.60 I
				CATEGORY	20.00	0.00	 291.60

			YSIDE CITYWIDE	D				PAGE 1	- 15	57
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE		NY EGIST 1	E R		ADU ADULT BILL WEEK EN	DING	11/23/12
								DILL WELK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	11/09/12 11/16/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	YSABEL YSABEL	40.00 37.00		583.20 539.46	I I	
					CUSTOMER	77.00	0.00	1,122.66		
					CATEGORY	 77.00	0.00	1,122.66		

ı	RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 158	
ı	SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	GRAM
ı				:	SALES REGISTER			BILL WEEK ENDING 11/23	/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
ı	01.6000	11 /16 /10	000000			44 85		650 46 7	
ı	216928	11/16/12	000008	VISITING NURSE SERVICE	LYMN, ANGIE	44.75		652.46 I	
ı									
					CATEGORY	44.75	0.00	652.46	

RUN DATE 11/20/1	L2 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 159
SALES JRNL # 030	08 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTEI	R		BILL WEEK EN	DING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216929 11/09/1	L2 000008	VISITING NURSE SERVICE	MACCHIA, CATHY	5.00		72.90	I
216930 11/16/1	L2 000008	VISITING NURSE SERVICE	MACCHIA, CATHY	31.75		462.92	I
			CUSTOMER	36.75	0.00	535.82	
			CATEGORY	36.75	0.00	535.82	

RUN DATE 11/20)/12 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 16	60
SALES JRNL # (0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
		:	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216931 11/10	5/12 000008	VISITING NURSE SERVICE	MAGILLIGAN, LOR	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 161
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
			S	SALES REGISTER			BILL WEEK END	OING 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216932	11/16/12	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	84.00		1,224.72	I
216933	11/16/12	800000	VISITING NURSE SERVICE	MALDONADO, DOMI	17.75		258.80	I
216934	11/16/12	800000	VISITING NURSE SERVICE	MALDONADO, MARI	25.00		364.50	I
216935	11/16/12	800000	VISITING NURSE SERVICE	MANGAN, JOHN	12.00		174.96	I
216936	11/16/12	800000	VISITING NURSE SERVICE	MANNINO, FRANCE	5.00		874.80	I
				CUSTOMER	143.75	0.00	2,897.78	
				CATEGORY	143.75	0.00	2,897.78	

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 162
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	:	SALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216937 11/16/12	000008 VISITING NURSE SERVICE	MANOS, VASILIKE	36.00	524.88 I
		CATEGORY	36.00 0.00	524.88

RUN DATE 11/20/12 - SUP S	SUNNYSIDE CITYWIDE			PAGE	1 - 163	
SALES JRNL # 0308 LOC 0	001 SUNNYSIDE CITYWIDE F	REG NY NY		CCL (CONGREGATE CARE	PROGRAM
	S A I	LES REGISTER		BILL	WEEK ENDING 11	./23/12
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS I	'AX AMT	AMOUNT TYP S	URPLUS
216938 11/16/12 00000	08 VISITING NURSE SERVICE	MARINO, ANN	12.00		174.96 I	
		CATEGORY	12.00	0.00	 174.96	

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 164
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
	5	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216939 11/16/12	000008 VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I
		CATEGORY	43.00	0.00	626.94

RUN DATE 11/20/ SALES JRNL # 03		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
216940 11/16/ 216941 11/16/		VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTE, JOSE MARTINEZ, CAMIL	7.75 15.00		113.00 218.70	I I
			CUSTOMER	22.75	0.00	331.70	
			CATEGORY	22.75	0.00	331.70	

	11/20/12 - L # 0308			REGNY NY BALES REGISTER			PAGE 1 - CCL CONGREGATE C BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216942	11/16/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	67
SALES JRN	1T # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216943	11/16/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	30.00		437.40	I	
216944	11/09/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		174.96	I	
216945	11/16/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		174.96	I	
216946	11/16/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	39.75		1,221.08	I	
216947	11/16/12	800000	VISITING NURSE SERVICE	MATOS, ROSA	29.00		422.82	I	
				CUSTOMER	122.75	0.00	2,431.22		
				CATEGORY	122.75	0.00	2,431.22		

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 168
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
216948 11/16/12	800000	VISITING NURSE SERVICE	MAYZEL, FREYDA	40.00		583.20	I
216949 11/16/12	800000	VISITING NURSE SERVICE	MAZZONE, FRANCE	62.25		907.61	I
216950 11/16/12	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44	I
			CUSTOMER	270.25	0.00	3,940.25	
			CATEGORY	270.25	0.00	3,940.25	

RUN DATE 11/20/1							169
SALES JRNL # 030	8 LOC 001		REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	3 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
216951 11/16/1	2 000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 170 ADU ADULT	0
BALLES GIAVE # 0300	100 001		ALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216952 11/16/12	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	49.00		714.42 I	
			CATEGORY	49.00	0.00	714.42	

	11/20/12 NL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 171 VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING 1	1/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216953 216954	11/16/12 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MEJIA, DINORAH	28.75 16.00		419.18 I 233.28 I	
210954	11/10/12	000008	VISITING NORSE SERVICE	MEJIA, MARINA	10.00		233.26 1	
				CUSTOMER	44.75	0.00	652.46	
				CATEGORY	44.75	0.00	 652.46	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 172	
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	Γ
				SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216955	10/12/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	16.00		233.28 I	
216956	11/02/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	8.00		116.64 I	
216957	11/16/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	37.25		543.11 I	
				CUSTOMER	61.25	0.00	893.03	
				CATEGORY	61.25	0.00	893.03	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 173 ADU ADULT BILL WEEK ENDING 11/	23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
216958 11/16/12	800000	VISITING NURSE SERVICE	MENDEZ, ADA	36.00		524.88 I	
			CATEGORY	36.00	0.00	 524.88	

	11/20/12 - NL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LAD NURSING HOM BILL WEEK ENDING	E W/O WALLS LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
216959	11/16/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	9.50		138.51 I	
				CATEGORY	9.50	0.00	138.51	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 175 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216960 11/02/12 216961 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	7.00 39.00		102.06 I 568.62 I
			CUSTOMER	46.00	0.00	670.68
			CATEGORY	46.00	0.00	 670.68

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 176 ADU ADULT BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216962 11/16/12	000008 VISITING NURSE SERVI	CE MENYHERT, YAE	9.00		131.22 I	
		CATEGORY	9.00	0.00	131.22	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	!SA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
216963 11/16/12 216964 11/16/12 216965 11/16/12 216966 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MIRANDA, LUIS MONSERRAT, DORI MONTALVO, FIDEL MONTOYA, ROSALB	30.00 12.00 30.00 12.00		437.40 174.96 437.40 174.96	I I I
			CUSTOMER	84.00	0.00	1,224.72	
			CATEGORY	84.00	0.00	1,224.72	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 178 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216967 11/16/12	800000	VISITING NURSE SERVICE	MOORE, JOSEPH	12.00		174.96 I
			CATEGORY	12.00	0.00	174.96

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 179	
SALES JRNL # 0308	LOC 001		REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 11	/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
216968 11/16/12	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	34.50		503.01 I	
			CATEGORY	34.50	0.00	503.01	

١	RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 180	
١	SALES JRNL # 0308	LOC 001		REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
١			S	SALES REGISTER			BILL WEEK ENDING 11/23/12	
	INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	216969 11/16/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 11/20/12 SALES JRNL # 0308		REGNY NY SALES REGISTER		PAGE 1 - 181 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216970 11/16/12	000008 VISITING NURSE SERVICE	MORALES, CARMEN	20.00	291.60 I
		CATEGORY	20.00 0.00	 291.60

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 182	
SALES JRI	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE		NY			ADU ADULT		
				SALES R	EGISTER			BILL WEEK EN	DING 11/23/12	
		~~								
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	ERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
01.6071	11/16/10	00000	TITATETNA NEIDAE ARDITAR	373 037	GRODGE	46 50		677 07	-	
216971	11/16/12	000008	VISITING NURSE SERVICE	NAGY,	GEORGE	46.50		677.97	Ţ	
					CATEGORY	46.50	0.00	677.97		
					CAILGORI	40.50	0.00	377.97		

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 183	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
			5	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216972	11/16/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
					20.00		291.60	
				CATEGORY	∠∪.00	0.00	Z91.00	

RUN DATE 11/20/12 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 184	
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
	5	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216973 11/16/12	000008 VISITING NURSE SERVICE	NICKELL, JEAN	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 185
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216974 11/16/12	000008	VISITING NURSE SERVICE	NIDO, MICHAEL	49.00		714.42 I
			CATEGORY	49.00	0.00	 714.42

ı	RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 186	
ı	SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING 1	1/23/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	216975	11/16/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	61.50		896.67 I	
					CATEGORY	61.50	0.00	896.67	

RUN DATE 11/20/12 SALES JRNL # 0308		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
216976 11/09/12 216977 11/16/12 216978 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NIEVES, NANCY	10.00 50.00 20.00		145.80 729.00 291.60	[[[
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			188 HOMEW/O WALLS (LT IDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT	TYP SURPLUS
216979 11/16/12 216980 11/16/12	000008 VISITING NURSE SERVICE 0000008 VISITING NURSE SERVICE	, -	25.00 28.00	364.50 408.24	I I
		CUSTOMER	53.00	0.00 772.74	
		CATEGORY	53.00	 0.00 772.74	

RUN DATE 11/20/12 SALES JRNL # 0308			REG NY NY			PAGE 1 VCP CHOICE LE		
		\$	SALES REGISTER			BILL WEEK END	ING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
216981 11/16/12	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
216982 11/16/12		VISITING NURSE SERVICE	OCHOA, LUIS	43.00		626.94	I	
216983 11/16/12	800000	VISITING NURSE SERVICE	OLIVO, ANGELES	20.00		291.60	I	
			CUSTOMER	112.00	0.00	1,632.96		
			CATEGORY	112.00	0.00	1,632.96		

RUN DATE 11/20/12 - SALES JRNL # 0308		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 190
			ALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
216984 11/16/12	800000	VISITING NURSE SERVICE	OREJUELA, GLORI	5.00		72.90	I
			CATEGORY	5.00	0.00	72.90	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 19 VCP CHOICE LHCSA BILL WEEK ENDING	1 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
216985 11/16/12 216986 11/16/12 216987 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORNANO, BOLIVAR ORTEGA, CARLOS PANASKAROLIDIS,	20.00 22.00 15.00		291.60 I 320.76 I 218.70 I	
			CUSTOMER	57.00	0.00	831.06	
			CATEGORY	57.00	0.00	831.06	

RUN DATE 11/20/12 - SUP SU SALES JRNL # 0308 LOC 00					PAGE 1 - 192 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216988 11/16/12 000008	VISITING NURSE SERVICE	PAOLONI, MARY	11.75		171.32 I
		CATEGORY	 11.75	0.00	171.32

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 193 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216989 11/16/12 216990 11/16/12 216991 11/16/12 216992 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PAPAZIAN, MANNI PAPOUTSIS, MARY PAPP, TEREZIA PARETTI, MARIE	50.00 6.00 3.00 56.00		729.00 I 87.48 I 43.74 I 816.48 I
			CUSTOMER	115.00	0.00	1,676.70
			CATEGORY	115.00	0.00	1,676.70

RUN DATE 11/20/12 - SUP SALES JRNL # 0308 LOC		EG NY NY ES REGISTER		PAGE 1 - 194 HOA HOSPICE ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE CUST		REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
216993 11/16/12 0000	08 VISITING NURSE SERVICE	PARTAGAS, ANA	8.00	116.64 I
		CATEGORY	8.00 0.00	116.64

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 195 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
216994 11/16/12 216995 11/16/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	42.00 20.00		612.36 I 291.60 I
		CUSTOMER	62.00	0.00	903.96
		CATEGORY	62.00	0.00	903.96

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 196	
SALES JRNI	4 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
216996 1	11/16/12	800000	VISITING NURSE SERVICE	PEREA, LUIS	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

	11/20/12 - NL # 0308	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		97
SALES UK	INL # 0308	TOC 001		ALES REGISTER			BILL WEEK ENI		11/23/12
			٥				2122 112211 2111		11,23,12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
216007	11 /16 /10	000008	VICIALNO MIDOS GEDVICAS	DEDER MONGED C	40.00		714 40	_	
216997	11/16/12		VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	Τ.	
216998	11/09/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	8.00		116.64	I	
216999	11/16/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	34.00		495.72	I	
217000	11/02/12	000008	VISITING NURSE SERVICE	PEREZ, JOAQUIN	6.00		87.48	I	
217001	11/16/12	000008	VISITING NURSE SERVICE	PEREZ, JOAOUIN	30.00		437.40	I	
217002	11/16/12	000008	VISITING NURSE SERVICE	PHILIPPS, MARY	48.00		699.84	I	
				CUSTOMER	175.00	0.00	2,551.50		
				CATEGORY	175.00	0.00	2,551.50		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 198
		2	SALES REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217003 10/26/12	800000	VISITING NURSE SERVICE	PINAL MOREL, NO	5.00		72.90	Ī
217004 11/09/12 217005 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PINAL MOREL, NO PINAL MOREL, NO	5.00 12.00		72.90 174.96	I T
217003 11710712	000000	VIBILING NORSE BERVICE					
			CUSTOMER	22.00	0.00	320.76	
			CATEGORY	22.00	0.00	320.76	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 199 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217006 11/16/12 217007 11/16/12 217008 11/16/12 217009 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PIZARRO, BARBAR PLACIDO, GENARO PLACIDO, MERCED POGGI, EMERITA	6.00 25.00 42.00 30.00		87.48 I 364.50 I 612.36 I 437.40 I
			CUSTOMER	103.00	0.00	1,501.74
			CATEGORY	103.00	0.00	1,501.74

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	200 IG 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217010	11/16/12	800000	VISITING NURSE SERVICE	POLANCO, JUAN	20.00		291.60 1	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 - SALES JRNL # 0308		UNNYSIDE CITYWIDE	REGNY NY BALES REGISTER			PAGE 1 - : LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217011 11/16/12	000008 VIS	SITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 VCP CHOICE LHO BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
217012 11/16/12 217013 11/16/12 217014 11/16/12	800000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PUISELLO, CIRA PULLIZA, DIANNE QUINTERO, INES	41.00 8.00 24.00		597.78 116.65 349.92	I I
			CUSTOMER	73.00	0.00	1,064.35	
			CATEGORY	73.00	0.00	1,064.35	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 203
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217015 11/16/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	46.00		670.68 I
			CATEGORY	46.00	0.00	670.68

RUN DATE 11/20/12 -	- SUP SUNNYS	SIDE CITYWIDE				PAGE 1 - 204
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		S	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217016 11/16/12	000008 V	/ISITING NURSE SERVICE	QUIZHPI, MARIA	18.00		262.44 I
217017 11/09/12	000008 V	/ISITING NURSE SERVICE	RAJA, HANIFA	24.00		349.92 I
217018 11/16/12	000008 V	JISITING NURSE SERVICE	RAJA, HANIFA	23.00		335.35 I
			CUSTOMER	65.00	0.00	947.71
			CATEGORY	65.00	0.00	947.71

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	05
SALES JRNL	<u> </u>	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDE	S PEDIATRIC
			:	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217019 1	L1/16/12	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
					40.00			
				CATEGORY	40.00	0.00	583.20	

RUN DATE 11/2	0/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	206
SALES JRNL #	0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				MEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
111,10101 211			1121 21102	110 0110		11100111	ET SOIL EGS
217020 11/1	6/12 000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	43.00		626.94	I
			CATEGORY	43.00	0.00	626.94	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	207
SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDIN	G 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217021	11/16/12	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 208	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRA	MA
			S	SALES REGISTER			BILL WEEK ENDING 11/23/12	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
217022	11/16/12	800000	VISITING NURSE SERVICE	RAMOS, ISMAEL	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	-

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 209 VCP CHOICE LHCSA BILL WEEK ENDING 1	1/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217023 11/16/12 217024 11/09/12 217025 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMPHAL, INDRIA REINA, JOSE REINA, JOSE	20.00 4.00 20.00		291.60 I 58.32 I 291.60 I	
			CUSTOMER	44.00	0.00	641.52	
			CATEGORY	44.00	0.00	641.52	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 210 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
217026 11/16/12	000008 VISITING NURSE SERVICE	RENDON, EDUARDO	4.00	58.32 I
		CATEGORY	4.00 0.	 00

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 21 HCSA	11
		S	SALES REGISTER			BILL WEEK ENI	DING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217027 11/16/12 217028 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RICCA, MARIE RICE, SYDNEY	24.00		349.92 58.32	I	
21/020 11/10/12	000008	VISITING NORSE SERVICE	RICE, SIDNEI	4.00				
			CUSTOMER	28.00	0.00	408.24		
			CATEGORY	28.00	0.00	408.24		

RUN I	DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 212
SALE	S JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
2170	29 11/16/12	800000	VISITING NURSE SERVICE	RISCO, GUILEERM	47.75		696.20 I
				CATEGORY	47.75	0.00	696.20

RUN DATE 11/20/12	SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 2	213
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217030 11/16/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 214	1
SALES JRNI	և # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING 1	L1/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217031 1	11/16/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
							016 40	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217032 11/16/12 217033 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		30.00		437.40 I 291.60 I	
			CUSTOMER	50.00	0.00	729.00	
			CATEGORY	50.00	0.00	729.00	

RUN DATE 11/20/12 - SUP				PAGE 1 - :	·
SALES JRNL # 0308 LOC		NY REGISTER		LTC NURSING HOME BILL WEEK ENDING	•
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP	SURPLUS
217034 11/16/12 0000	008 VISITING NURSE SERVICE R	RIVERA, GRACIEL	16.00	233.28 I	
		CATEGORY	16.00		

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 217 ADU ADULT BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
217035 11/16/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER				218 MEW/O WALLS (LT NG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
217036 11/16/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		699.84	I
			CATEGORY	48.00	0.00	699.84	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYSIDE CITYW LOC 001 SUNNYSIDE	NIDE E CITYWIDE REG NY S A L E S				1 - 219 CE LHCSA K ENDING 1	
INVOICE# DATE	CUST NO CUSTOMER N	NAME	REFERENCE	HOURS TAX	AMT AMC	UNT TYP	SURPLUS
217037 11/16/12 217038 11/16/12			RODRIGUEZ, BIEN RODRIGUEZ, IRMA	6.00 40.75	- ·	.48 I .14 I	
			CUSTOMER	46.75	0.00 681	.62	
			CATEGORY	46.75	 0.00 681	 .62	

RUN	DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 220	
SALE	S JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
			:	SALES REGISTER			BILL WEEK ENDING 11/23/12	
INVC	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
2170	39 11/16/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 221 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217040 11/16/12 217041 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		24.00 6.00		349.92 I 87.48 I
			CUSTOMER	30.00	0.00	437.40
			CATEGORY	30.00	0.00	437.40

RUN DATE 11/20	/12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 22	22
SALES JRNL # 0	308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217042 11/16	/12 000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	223
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			5	SALES REGISTER			BILL WEEK ENDI	NG 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
217043	11/16/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42	I
				CATEGORY	49.00	0.00	714.42	

RUN DATE 11/20/12	- SUP SUNNYS	IDE CITYWIDE				PAGE 1 - :	224
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217044 11/16/12	000008 V	ISITING NURSE SERVICE	RODRIGUEZ, ROQU	34.00		495.72 I	
			CATEGORY	34.00	0.00	495.72	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	225 § 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
217045 11/16/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, RUTH	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 HOA HOSPICE A BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217046 11/09/12 217047 11/16/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	RODRIGUEZ, YLMA RODRIGUEZ, YLMA	12.00 15.00		174.96 218.70	I I
			CUSTOMER	27.00	0.00	393.66	
			CATEGORY	27.00	0.00	393.66	

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE	REG NY NY BALES REGISTER			PAGE 1 - 227 LTC NURSING HOMEW/O WALLS (BILL WEEK ENDING 11/23/12	LT
INVOICE# DATE	CUST NO CUSTOM	MER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
217048 11/09/12 217049 11/16/12		ING NURSE SERVICE	ROLON, JUANITA ROLON, JUANITA	8.00 47.50		116.64 I 692.55 I	
			CUSTOMER	55.50	0.00	809.19	
			CATEGORY	55.50	0.00	809.19	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 228	
SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 11/2	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
217050	11/16/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 11/20/12 -						PAGE 1	
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEI	2			OMEW/O WALLS (LT
		· ·	SALES REGISTER	ζ.		BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217051 11/16/12	000008	VISITING NURSE SERVICE	ROMO, FLOR	56.00		816.48	I
217052 11/02/12	800000	VISITING NURSE SERVICE	ROSA, ANA	8.00		116.64	I
217053 11/02/12	800000	VISITING NURSE SERVICE	ROSA, ANA	8.00		116.64	I
217054 11/16/12	800000	VISITING NURSE SERVICE	ROSA, ANA	8.00		116.64	I
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

	11/20/12 · NL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		30
				SALES REGISTER	₹		BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217055	11/16/12	000008	VISITING NURSE SERVIC	E ROSA, LUZ E	56.00		816.48	I	
217056	11/16/12	000008	VISITING NURSE SERVIC	E ROSA, MANOLO	16.00		233.28	I	
217057	11/16/12	000008	VISITING NURSE SERVIC	E ROSARIO, ELSA	35.00		510.30	I	
217058	11/16/12	800000	VISITING NURSE SERVIC	E ROSARIO, MARIA	13.25		193.19	I	
217059	11/02/12	800000	VISITING NURSE SERVIC	E ROSARIOBREU, EM	5.00		72.90	I	
217060	11/16/12	800000	VISITING NURSE SERVIC	E ROSARIOBREU, EM	25.25		368.15	I	
217061	11/16/12	800000	VISITING NURSE SERVIC	E RUEDA, INES	47.00		685.26	I	
				CUSTOMER	197.50	0.00	2,879.56		
				CATEGORY	197.50	0.00	2,879.56		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	DMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
217062 11/09/12 217063 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	12.00 25.25		174.96 368.15	I I
			CUSTOMER	37.25	0.00	543.11	
			CATEGORY	37.25	0.00	543.11	

	E 11/20/12 - RNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	232 G 11/23/12
INVOICE;	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
217064	11/16/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/20/12 -			556 351				- 2	33
SALES JRNL # 0308	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LE		11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217065 11/16/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	14.75		215.06	I	
217066 11/16/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	55.00		801.90	I	
			CUSTOMER	69.75	0.00	1,016.96		
			COBTORILL	03.73	0.00	1,010.00		
			GARRICODY	60.75	0.00	1,016.96		
			CATEGORY	69.75	0.00	1,016.96		

RUN DATE 1	1/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 23	34
SALES JRNL	# 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY N	=			CCL CONGREGA		
			S	SALES RE	GISTER			BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERI	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217067 13	1/16/12	800000	VISITING NURSE SERVICE	SALERNO), BARBAR	2.75		40.10	I	
				(CATEGORY	2.75	0.00	40.10		

ı	RUN DATE 11/20/12	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 235	5
ı	SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/) WALLS (LT
ı			5	SALES REGISTER			BILL WEEK ENDING	L1/23/12
	INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	217068 11/16/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE 11/20/12 -	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	236
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217069 11/16/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	56.50		823.78 I	
			CATEGORY	56.50	0.00	823.78	

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	137
SALES JRNI	և # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217070	11/16/12	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 1	1/20/12 - ST	UP SUNNY	SIDE CITYWIDE				PAGE 1 - 23	38
SALES JRNL	# 0308 LO	OC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE CU	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217071 1	1/16/12 00	80000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

ı	RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 239	
ı	SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	1
				S	SALES REGISTER			BILL WEEK ENDING 11/23/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	217072	11/16/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	32.00		466.56 I	
					CATEGORY	32.00	0.00	466.56	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 240)
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	1/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217073	11/16/12	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 11/20/12 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 241	
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT	
	S	SALES REGISTER		BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS	
217074 11/16/12	000008 VISITING NURSE SERVICE	SANDOVAL, FANNY	12.00	174.96 I	
		CATEGORY	12.00 0.0	0 174.96	

	11/20/12 - NL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 2	42
Bribbo ord	VE 0500	100 001		ALES REGISTER			BILL WEEK EN		11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217075	11/16/12	000008	VISITING NURSE SERVICE	SANTOS, LETY	14.00		204.12	I	
217076	11/16/12	800000	VISITING NURSE SERVICE	SCOTT, CATHERIN	55.25		805.55	I	
217077	11/16/12	800000	VISITING NURSE SERVICE	SCRO, WILLIAM	28.00		408.24	I	
217078	11/02/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	6.00		87.48	I	
217079	11/16/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I	
217080	11/09/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	10.00		145.80	I	
217081	11/16/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	68.25		995.09	I	
217082	11/16/12	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	15.50		225.99	I	
217083	10/26/12	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	8.00		116.64	I	
				CUSTOMER	241.00	0.00	3,513.79		
				CATEGORY	241.00	0.00	3,513.79		

RUN DATE 11/20/12 -						PAGE 1 - 24	3
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	11/02/10
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217084 11/09/12	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	14.00		204.12 I	
217085 11/16/12	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	24.00		349.92 I	
			CUSTOMER	38.00	0.00	554.04	
			CATEGORY	38.00	0.00	554.04	

	11/20/12 · NL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		44
			\$	SALES REGISTER			BILL WEEK ENI	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217086	11/16/12	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	8.00		116.64	I	
217087	11/16/12	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	15.00		218.70	I	
217088	11/16/12	000008	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80	I	
				CUSTOMER	33.00	0.00	481.14		
				CATEGORY	33.00	0.00	481.14		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217089 11/02/12 217090 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SILLS, JAMES SILLS, JAMES	6.00 42.00		87.48 612.36	I	
			CUSTOMER	48.00	0.00	699.84		
			CATEGORY	48.00	0.00	699.84		

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 24 VCP CHOICE LHCSA	16
BALLO CIUL # 0500	100 001		SALES REGISTER				11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217091 11/16/12 217092 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	*	30.00		437.40 I 43.74 I	
			CUSTOMER	33.00	0.00	481.14	
			CATEGORY	33.00	0.00	481.14	

RUN DATE 11/	/20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	17
SALES JRNL #	# 0308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAP	
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217093 11/	/16/12 000008	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
			 CATEGORY	12.00	0.00	 174.96	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE	R		PAGE 1 - 248 LTC NURSING HOMEW/O WALLS BILL WEEK ENDING 11/23/12	•
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
217094 11/16/12	000008 VISITING NURSE SERV	ICE SORIA, ROLANDO	30.00		437.40 I	
		CATEGORY	30.00	0.00	437.40	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 249 ADU ADULT BILL WEEK ENDING 1	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217095 11/16/12	800000	VISITING NURSE SERVICE	SOSA, ELSA	5.00		72.90 I	
			CATEGORY	5.00	0.00	72.90	

RUN DATE 11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25	0
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217096 11/16/12	800000	VISITING NURSE SERVICE	STAFILIAS, EVAN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 2	51
		\$	SALES REGISTER			BILL WEEK EN	DING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217097 11/16/12 217098 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, .=	60.00 56.00		874.80 816.48	I	
217030 11710712	000000	VIDITING NORDE BERVICE	CUSTOMER	116.00	0.00	1,691.28		
			COSTOMER	110.00	0.00	1,091.20		
			CATEGORY	116.00	0.00	1,691.28		

	DATE 11/20/12 S JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 2 HOA HOSPICE ADULT BILL WEEK ENDING	7
INVO	DICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
2170	99 11/16/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN		REG NY NY			PAGE 1 - 2 ADU ADULT	253
BILLED STATE III SSSS	200 001		ALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217100 11/16/12	800000	VISITING NURSE SERVICE	STEINBERG, ROSL	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

	11/20/12 - NL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		54
511225 010	,, 0500	200 001		SALES REGISTE	R		BILL WEEK EN		11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217101	11/16/12	000008	VISITING NURSE SERVI	CE STENOS, MOSHOUL	15.25		222.35	I	
217102	11/16/12	800000	VISITING NURSE SERVI	CE STERGIOU, GLORI	16.00		233.28	I	
217103	11/16/12	000008	VISITING NURSE SERVI	CE STICKELL, BLANC	32.00		466.56	I	
217104	11/16/12	000008	VISITING NURSE SERVI	CE STROBL, ALFRED	36.00		524.88	I	
217105	11/02/12	800000	VISITING NURSE SERVI	CE SUAREZ, MARINA	3.00		43.74	I	
217106	11/02/12	800000	VISITING NURSE SERVI	CE SUAREZ, MARINA	6.00		87.48	I	
217107	11/16/12	800000	VISITING NURSE SERVI	CE SUAREZ, MARINA	30.00		437.40	I	
				CUSTOMER	138.25	0.00	2,015.69		
				CATEGORY	138.25	0.00	2,015.69		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			2	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217108	11/16/12	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE	DEC MY MY				- 256	,
SALES JRI	NL # 0308	TOC. 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		1 /02 /10
			S A	ALES REGISTER			BILL WEEK EN	DING I	1/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217109	10/26/12	000008	VISITING NURSE SERVICE	TABOADA, DIMAS	4.00		58.32	I	
217110	11/02/12	000008	VISITING NURSE SERVICE	TABOADA, DIMAS	4.00		58.32	I	
217111	11/02/12	800000	VISITING NURSE SERVICE	TABOADA, DIMAS	8.00		116.64	I	
217112	11/16/12	800000	VISITING NURSE SERVICE	TABOADA, DIMAS	17.50		255.15	I	
217113	10/26/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	8.00		116.64	I	
217114	11/02/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	7.00		102.06	I	
217115	11/02/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	16.00		233.28	I	
217116	11/16/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	56.00		816.48	I	
				CUSTOMER	120.50	0.00	1,756.89		
				CATEGORY	120.50	0.00	1,756.89		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 257 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217117 11/16/12 217118 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TADDEO, LENA TAVERAS ARIAS,	56.00 28.25		816.48 I 411.89 I
			CUSTOMER	84.25	0.00	1,228.37
			CATEGORY	84.25	0.00	1,228.37

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 258 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217119 11/16/12 217120 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		11.50 20.00		167.68 I 291.60 I
			CUSTOMER	31.50	0.00	459.28
			CATEGORY	31.50	0.00	 459.28

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 259 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217121 11/16/12 217122 11/16/12 217123 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TERZIAN, ASDGHI	8.00 42.00 8.00		116.64 I 612.36 I 116.64 I
			CUSTOMER	58.00	0.00	845.64
			CATEGORY	58.00	0.00	845.64

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 20	60	
SALES JRN	1L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY 1	1X			VCP CHOICE L	HCSA		
			\$	ALES RI	EGISTER	-		BILL WEEK EN	DING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
217124	11/16/12	800000	VISITING NURSE SERVICE	TINOCO), INES	42.00		612.36	I		
					CATEGORY	42.00	0.00	612.36			

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
217125 11/16/12	000008	VISITING NURSE SERVICE	TOLENTINO, PASC	25.00		364.50	I
			CATEGORY	25.00	0.00	364.50	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY 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
217126 11/16/12 217127 10/12/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORO VEGA, LUZV TORO, PURA	24.00 12.00		349.92 174.96	I I
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

	11/20/12 - NL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY :	NY E G I S T E F	₹		PAGE 1 ADU ADULT BILL WEEK EN	- 20 DING		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
217128	11/16/12	000008	VISITING NURSE SERVICE	TORO,	PURA	84.00		1,224.72	I		
					 CATEGORY	84.00	0.00	1,224.72			

RUN DATE 11/20/12 - SALES JRNL # 0308			REG NY NY			PAGE 1 - 264 VCP CHOICE LHCSA	
SALES URINL # USUO	LOC UUI S	SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER				/23/12
INVOICE# DATE	CUST NO CU	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
217129 11/16/12 217130 11/16/12		ISITING NURSE SERVICE ISITING NURSE SERVICE	TORRES, EMELINA TORRES, LUZ M	40.00 83.25		583.20 I 1,213.79 I	
			CUSTOMER	123.25	0.00	1,796.99	
			CATEGORY	123.25	0.00	1,796.99	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	l R		PAGE 1 - 265 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217131 11/02/12 217132 11/16/12	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC		6.00 39.00		87.48 I 568.62 I
		CUSTOMER	45.00	0.00	656.10
		CATEGORY	45.00	0.00	 656.10

RUN DATE 11/20/12	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 266
SALES JRNL # 0308		REG NY NY		ADU ADULT
	S	BALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
217133 11/16/12	000008 VISITING NURSE SERVICE	TOUMA, MATTA	35.00	510.30 I
		CATEGORY	35.00 0.00	510.30

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	67
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217134 11/16/12	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	12.00		174.96 I	
217135 11/16/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	56.00		816.48 I	
			CUSTOMER	68.00	0.00	991.44	
			CATEGORY	68.00	0.00	991.44	

RUN DATE 11/20/12 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 268
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LAD NURSING HOME W/O WALLS LT
	S	ALES REGISTER		BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP SURPLUS
217136 11/16/12	000008 VISITING NURSE SERVICE	TSUAI, PING	20.00	291.60 I
		CATEGORY	20.00	0.00 291.60

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 20	69
			GALES REGISTER			BILL WEEK EN		11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217137 11/16/12 217138 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TZOUMAS, EFFIE VALENCIA, BERNA	63.00 15.00		918.54 218.70	I T	
21/130 11/10/12	000000	VIBILING NORDE BERVICE	·					
			CUSTOMER	78.00	0.00	1,137.24		
			CATEGORY	78.00	0.00	1,137.24		

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 27	70	
SALES JRNI	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				CCL CONGREGA'	re caf	RE PROGRAM	
			5	BALES RE	GISTER			BILL WEEK EN	DING	11/23/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
217139 1	11/16/12	800000	VISITING NURSE SERVICE	VALENCI	A, BERNA	10.00		145.80	I		
				C	ATEGORY	10.00	0.00	145.80			

RU	IN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2'	71
SA	ALES JRN	1L # 0308	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				:	SALES REGISTER			BILL WEEK ENDING	11/23/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
21	7140	11/16/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	30.00		437.40 I	
					CATEGORY	30.00	0.00	437.40	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	272
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217141	11/16/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	55.50		809.19 I	
				CATEGORY	55.50	0.00	809.19	

RUN DATE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 273
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		S	SALES REGISTER			BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217142 11/16/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	24.00		349.92 I
217143 11/16/12	800000	VISITING NURSE SERVICE	VALENTINO, EUGE	5.25		76.55 I
			CUSTOMER	29.25	0.00	426.47
			CATEGORY	29.25	0.00	426.47

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	274
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	•
		5	SALES REGISTER			BILL WEEK ENDIN	IG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217144 11/16/12	000008	VISITING NURSE SERVICE	VAROL, ELMAS	3.75		54.68	:
			CATEGORY	3.75	0.00	54.68	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 27	75
SALES JR	NL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217145	11/16/12	800000	VISITING NURSE SERVICE	VASQUEZ, ARTURO	46.00		670.68 I	
				CATEGORY	46.00	0.00	670.68	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 276 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217146 11/16/12 217147 11/16/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		23.50 15.00		342.63 I 218.70 I
			CUSTOMER	38.50	0.00	561.33
			CATEGORY	38.50	0.00	 561.33

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	277
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAE	ONLY
			S	SALES REGISTER			BILL WEEK ENDIN	rG 11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217148	11/16/12	000008	VISITING NURSE SERVICE	VASQUEZSOTO, AR	25.50		371.79 I	
				CATEGORY	25.50	0.00	371.79	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			1 - 278 HOMEW/O WALLS (LT NDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUNT	TYP SURPLUS
217149 10/26/12 217150 11/16/12	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	~ - ,	6.00 40.00	87.48 583.20	
		CUSTOMER	46.00	0.00 670.68	
		CATEGORY	46.00	 0.00	

RUN DATE 11/20/12 SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 279 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217151 11/16/12	800000	VISITING NURSE SERVICE	VEGA, BETTY	5.75		83.84 I
			CATEGORY	5.75	0.00	83.84

			YSIDE CITYWIDE				PAGE 1 -	
SALI	ES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCS	
			•	SALES KEGISIEK			BILL MEEK ENDIN	3 11/23/12
INV	DICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217	152 11/16/12	000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	18.75		273.38 I	
				CATEGORY	18.75	0.00	273.38	

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	281
		:	SALES REGISTER			BILL WEEK ENDIN	IG 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217153 11/16/12 217154 11/16/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 8.00		87.48 I 116.64 I	- - -
21/134 11/10/12	000008	VISITING NORSE SERVICE	·				
			CUSTOMER	14.00	0.00	204.12	
			CATEGORY	14.00	0.00	204.12	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 282 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
217155 11/16/12	000008 VISITING NURSE SERVICE	VENTURA, ROSA	49.00	714.42 I
		CATEGORY	49.00 0.00	714.42

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E	R		PAGE 1 VCP CHOICE LI BILL WEEK EN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217156 10/26/12 217157 11/09/12 217158 11/16/12 217159 11/09/12 217160 11/16/12 217161 11/09/12 217162 11/16/12	000008 000008 000008 000008 000008 000008	VISITING NURSE SERVICE	VERA, ROSARIO VERA, ROSARIO VERA, ROSARIO VERA, VICTOR VERA, VICTOR VERAS, JUANA VERAS, JUANA	4.00 8.00 20.00 8.00 13.00 16.00 56.00		58.32 116.64 291.60 116.64 189.56 233.28 816.48	I I I I I
			CUSTOMER	125.00	0.00	1,822.52	
			CATEGORY	125.00	0.00	1,822.52	

			YSIDE CITYWIDE				PAGE 1 - 284	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 11/23/1	L2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
217163	11/16/12	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 285 ADU ADULT BILL WEEK ENDING 11	/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
217164 11/16/12	800000	VISITING NURSE SERVICE	VILLACRES, MARI	9.00		131.22 I	
			CATEGORY	9.00	0.00	 131.22	

RUN DATE 11/20/12	2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	286
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217165 11/16/12	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 11/20/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	287
SALES JRNL # 0308 LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			CCL CONGREGATE CA	RE PROGRAM
	SALE	S REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217166 11/16/12 000008	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
		CATEGORY	4.00	0.00	 58.32	

RUN DATE 11	/20/12 -	SUP SUNNY	SIDE CITYWIDE				PAGE 1 -	288
SALES JRNL	# 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
015165 11	126120						405 40 -	
217167 11	/16/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40 I	
				CAREGODY	20.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

				YSIDE CITYWIDE					289
SA.	LES JRN	ML # 0308	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHC: BILL WEEK ENDII	
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
21	7168	11/16/12	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	70.00		1,020.60	Γ
					CATEGORY	70.00	0.00	1,020.60	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 290 ADU ADULT BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
217169 11/16/12	000008 VISITING NURSE SERVICE	VLAHOS, MARIE	16.00	233.28 I
		CATEGORY	16.00 0.00	233.28

ı	RUN DATE 1	1/20/12 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 -	291
ı	SALES JRNL	# 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
١				S	SALES REGISTER			BILL WEEK ENDING	11/23/12
ı									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١									
١	217170 13	1/16/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74 I	
١									
١									
ı					CATEGORY	3.00	0.00	43.74	

	ATE 11/20/12 · JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 29	2	
SALLES	UKNL # 0306	HOC 001		SALES REGISTER			BILL WEEK END	ING	11/23/12	
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
21717	1 11/16/12	800000	VISITING NURSE SERVICE	WALSH, MAUREEN	6.00		87.48	I		
				CATEGORY	6.00	0.00	87.48			

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 2 HOA HOSPICE ADULT BILL WEEK ENDING	
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217172	11/16/12	800000	VISITING NURSE SERVICE	WASHINGTON, JAM	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/20/12 - SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 294 VCP CHOICE LHCSA BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
217173 10/19/12 217174 11/09/12 217175 11/16/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	WEINHAUS, SUSAN	20.00 10.00 9.00		291.60 I 145.80 I 131.22 I	
			CUSTOMER	39.00	0.00	568.62	
			CATEGORY	39.00	0.00	568.62	

RUN DATE 11/20/12 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 295	
SALES JRNL # 0308	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT	
	S	SALES REGISTER		BILL WEEK ENDING 11/23/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM'	I AMOUNT TYP SURPLUS	
			00.00	001 60 -	
217176 11/16/12	000008 VISITING NURSE SERVICE	WILLIAMS, GEORG	20.00	291.60 I	
		GA EEGODY	20.00	0 001 60	
		CATEGORY	20.00 0.0	0 291.60	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 296	j
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 1	.1/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217177	11/16/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	11/20/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 – 297	
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PR	OGRAM
			S	SALES REGISTER			BILL WEEK ENDING 11/2	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	RPLUS
217178	11/16/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	198
SALES JRN	IL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217179	11/16/12	800000	VISITING NURSE SERVICE	ZAMBRANO, VICTO	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 1	11/20/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 29	99
SALES JRNI	և # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217180 1	11/16/12	000008	VISITING NURSE SERVICE	ZIVAN, GEOLINA	1.00		14.58 I	
				CATEGORY	1.00	0.00	 14.58	

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE

SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE REG NY NY

SALES REGISTER

BILL WEEK ENDING 11/23/12

011220 0144	0000	200 001		SALES REGISTER			BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE ACERNO, CLAIRE ALI, AMRUNISSA ALIX, PEDRO ALSTON, ZULINE ASH, MARIE BEGUM, JAMILA BERJASHEVIC, LI BUCARO, CONCETT C, ISABEL CARSWELL, LUELL CEPEDA, TOMASA COLAVITTI, JEAN COLEMAN, REGINA COMET, JULIA CUCALON, INES DELEON, JUANA DEZUNIGA, LEONO DIAZ 2, CARMEN DIAZ, ALICIA DONOSO, MARGARE DURAN, CARMEN EARLINGTON, ALB ECKMAN, LOIS ESPINOZA, MARIA EXPOSITO, ALFON FELICIANO, JOAN FERNANDEZ, ANA FERRARA, ANN FERRO, JOSEPHIN FRANCIS, VICTOR GARCIA, MARIA A GOMEZ, YOLANDA GONZALEZ CARME GREAVES, BARBAR GREENSPAN, ALIC HENLEY, LUVENIA HENRIQUEZ, TERE HERNANDEZ, LUZ HICKS, SYLVIA HUSTIU, SILVIA IRIMIA, SIMONA JACKSON, PATRIC JIMENEZ, EUGENI JOHNSON, DOROTH LEMOINE, RICARD MANGRAY, KARMAD MARTIN, RUTH MARTINEZ, EMMA	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217181	11/16/12	000010	GUILDNET	ACERNO, CLAIRE	25.00		378.00	I	
217182	11/16/12	000010	GUILDNET	ALI, AMRUNISSA	24.00		362.88	I	
217183	11/16/12	000010	GUILDNET	ALIX, PEDRO	7.00		1,375.92	I	
	11/16/12	000010	GUILDNET	ALSTON, ZULINE	48.00		725.76	I	
217185	11/16/12	000010	GUILDNET	ASH, MARIE	12.00		181.44	I	
	11/16/12	000010	GUILDNET	BEGUM, JAMILA	72.00		1,088.64	I	
217187	11/16/12	000010	GUILDNET	BERJASHEVIC, LI	12.00		181.44	I	
	11/16/12	000010	GUILDNET	BUCARO, CONCETT	43.00		650.16	I	
	11/16/12	000010	GUILDNET	C, ISABEL	35.00		529.20	I	
	11/16/12	000010	GUILDNET	CARSWELL, LUELL	70.00		1,058.40	I	
	11/16/12	000010	GUILDNET	CEPEDA, TOMASA	29.00		438.48	I	
	11/16/12	000010	GUILDNET	COLAVITTI, JEAN	56.00		846.72	I	
	11/16/12	000010	GUILDNET	COLEMAN, REGINA	29.00		438.48	I	
	11/16/12	000010	GUILDNET	COMET, JULIA	30.00		453.60	I	
	11/16/12	000010	GUILDNET	CUCALON, INES	43.50		657.72	I	
	11/16/12	000010	GUILDNET	DELEON, JUANA	30.00		453.60	I	
	11/16/12	000010	GUILDNET	DEZUNIGA, LEONO	15.75		238.14	I	
	11/16/12	000010	GUILDNET	DIAZ 2, CARMEN	42.00		635.04	I	
	11/16/12	000010	GUILDNET	DIAZ, ALICIA	45.00		680.40	I	
	11/16/12	000010	GUILDNET	DONOSO, MARGARE	22.50		340.20	I	
	11/16/12	000010	GUILDNE'I'	DURAN, CARMEN	32.50		491.40	I	
	11/16/12	000010	GUILDNE'I'	EARLINGTON, ALB	41.00		619.92	I	
	10/26/12	000010	GUILDNET	ECKMAN, LOIS	9.00		1,769.04	I	
	11/16/12	000010	GUILDNET	ESPINOZA, MARIA	45.00		680.40	I	
	11/16/12	000010	GUILDNET	EXPOSITO, ALFON	40.00		604.80	I	
	11/16/12	000010	GUILDNET	FELICIANO, JUAN	38.00		5/4.50	I I	
	11/16/12 11/16/12	000010	GUILIDNET	FERNANDEZ, ANA	24.00 E2.00		706 24	I	
	11/16/12	000010	CILLIDNET	FERRARA, ANN	70 00		1 050 40	I	
	11/16/12	000010	CILLIDNET	FERRO, UGSEPHIN	70.00		520 20	I	
	11/16/12	000010	CULLDNET	CAPCIA MARIA A	49 00		740 88	I	
	11/16/12	000010	CULLDNET	COMEZ VOLANDA	13 00		196 56	Ī	
	11/16/12	000010	CULLDNET	GONZALEZ MONTA	16 00		241 92	Ī	
	11/16/12	000010	CULLDNET	GONZALEZ MONTA	20.00		302 40	Ī	
	11/16/12	000010	CULLDNET	GREAVES BARBAR	8 00		120 96	Ī	
	11/16/12	000010	GUILDNET	GREENSPAN, ALIC	35.00		529.20	Ī	
	11/09/12	000010	GUILDNET	HENLEY, LUVENIA	106.00		1,602.72	I	
	11/16/12	000010	GUILDNET	HENRIOUEZ, TERE	44.00		665.28	Ī	
	11/16/12	000010	GUILDNET	HERNANDEZ, LUZ	24.00		362.88	Ī	
	11/16/12	000010	GUILDNET	HICKS, SYLVIA	43.50		657.72	I	
	11/16/12	000010	GUILDNET	HUSTIU, SILVIA	5.00		75.60	I	
	11/16/12	000010	GUILDNET	IRIMIA, SIMONA	56.00		846.72	I	
	11/16/12	000010	GUILDNET	JACKSON, PATRIC	25.00		378.00	I	
	11/02/12	000010	GUILDNET	JIMENEZ, EUGENI	134.00		2,026.08	I	
	11/16/12	000010	GUILDNET	JOHNSON, DOROTH	64.00		967.68	I	
	11/16/12	000010	GUILDNET	LEMOINE, RICARD	28.00		423.36	I	
217227	11/16/12	000010	GUILDNET	MANGRAY, KARMAD	40.00		604.80	I	
	11/16/12	000010	GUILDNET	MARTIN, RUTH	6.00		1,179.36	I	
217229	11/16/12	000010	GUILDNET	MARTINEZ, EMMA	36.00		544.32	I	

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 301 SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 11/23/12 CUST NO CUSTOMER NAME

REFERENCE

MARTINEZ, GLORI
10.00
00010 GUILDNET
MASSOL, PEDRO A
25.00
MASSOL, PEDRO A
25.00
00010 GUILDNET
MASSOL, PEDRO A
25.00
MOUNTAIN, JUIS
18.00
00010 GUILDNET
MCGUALI, MAURER
70.00
00010 GUILDNET
MCGUALI, MAURER
70.00
00010 GUILDNET
MOSCICKA, JADWI 24.00
00010 GUILDNET
MOSCICKA, JADWI 24.00
00010 GUILDNET
MUSCAT, CARMEN
25.00
000010 GUILDNET
MUSCAT, CARMEN
25.00
00010 GUILDNET
NUNBZ, RANGLINA
20.00
00010 GUILDNET
NUNBZ, RANGLINA
20.00
00010 GUILDNET
NUNBZ, REYNA
20.00
00010 GUILDNET
NUNBZ, REYNA
20.00
00010 GUILDNET
NUNBZ, REYNA
20.00
00010 GUILDNET
ORTIZ, MARCEDES
43.00
00010 GUILDNET
ORTIZ, MARCEDES
43.00
00010 GUILDNET
PAPHITIS, RICHA
40.00
00010 GUILDNET
PARIOULINET
PERS, MARIA
40.00
00010 GUILDNET
PERS, MARIA
40.00
00010 GUILDNET
PERS, MARIA
40.00
00010 GUILDNET
PERNA, WALEKA
40.00
00010 GUILDNET
PROANO, ALICIA
21.00
00010 GUILDNET
RESTULA, VINCEN
20.00
00010 GUI REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS INVOICE# DATE CUST NO CUSTOMER NAME 217230 11/16/12 151.20 I 378.00 I 217231 11/16/12 272.16 I 217232 11/16/12 1,058.40 217233 11/16/12 217234 11/09/12 967.68 217235 11/16/12 846.72 217236 11/16/12 362.88 217237 11/16/12 378.00 217238 11/16/12 181.44 217239 11/16/12 302.40 217240 11/16/12 302.40 217241 11/09/12 725.76 217242 11/16/12 302.40 217243 11/16/12 378.00 217244 11/16/12 952.56 217245 11/16/12 650.16 217246 11/16/12 604.80 217247 11/16/12 831.60 217248 11/16/12 604.80 217249 11/16/12 453.60 217250 11/16/12 952.56 217251 11/16/12 529.20 217252 11/16/12 338.52 217253 11/16/12 370.76 217254 11/16/12 192.78 217255 11/16/12 302.40 217256 11/16/12 740.88 217257 11/16/12 238.14 217258 11/16/12 362.88

952.56

241.80

451.36

117.18

801.36

710.64

241.92

302.40

635.04

362.88

374.22

181.44

846.72

120.96

302.40

181.44

362.88

982.80

362.88

721.98

217259 11/16/12

217260 11/16/12

217261 11/02/12

217262 11/16/12

217263 11/16/12

217264 11/09/12

217265 11/16/12

217266 11/16/12

217267 11/16/12

217268 11/09/12

217269 11/16/12

217270 11/16/12

217271 11/16/12

217277 11/16/12

11/16/12

11/16/12

11/16/12

11/16/12

11/16/12

217278 11/16/12 000010 GUILDNET

217272

217273

217274

217275

217276

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYS LOC 001	SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTI	E R		PAGE 3 GUI GUILDNET BILL WEEK EN		02 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217279 11/16/12 217280 11/16/12		GUILDNET GUILDNET		ARE, GLORIA UMAETA, FANNY	42.00 54.00		635.04 816.48	I	
				CUSTOMER	3,446.50	0.00	57,096.96		
				CATEGORY	3,446.50	0.00	57,096.96		

RUN DATE	E 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E			PAGE 1	- 3	03
SALES JF	SNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	_		HFS HEALTH F	IRST	11/02/10
				SALES REGISTE	R		BILL WEEK EN	JING	11/23/12
INVOICE;	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217281	11/16/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
217282	11/16/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	48.00		810.24	I	
217283	11/16/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
217284	11/16/12	000122	HEALTH FIRST	BOWERS, DIANE	50.00		844.00	I	
217285	11/16/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
217286	11/16/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
217287	11/09/12	000122	HEALTH FIRST	CEBALLOS, ANA	48.00		810.24	I	
217288	11/09/12	000122	HEALTH FIRST	CHARITAR, RAMKA	40.00		675.20	I	
217289	11/16/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
217290	11/16/12	000122	HEALTH FIRST	DELACRUZ, ANA	70.00		1,181.60	I	
217291	11/16/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	38.00		641.44	I	
217292	11/16/12	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
217293	11/16/12	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
217294	11/16/12	000122	HEALTH FIRST	FONTANES, PEDRO	35.00		590.80	I	
217295	11/16/12	000122	HEALTH FIRST	FRANCISCO, RICH	48.00		810.24	I	
217296	10/12/12	000122	HEALTH FIRST	FRIAS, BARBARA	5.00		84.40	I	
217297	11/09/12	000122	HEALTH FIRST	GARCIA, LEONARD	66.00		1,114.08	I	
217298	11/16/12	000122	HEALTH FIRST	KAUR, HARBANS	42.00		708.96	I	
217299	11/16/12	000122	HEALTH FIRST	LARA, TOMASA	48.00		810.24	I	
217300	11/16/12	000122	HEALTH FIRST	LAZALA, GLADYS	49.00		827.12	I	
217301	11/16/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	77.00		1,299.76	I	
217302	11/16/12	000122	HEALTH FIRST	MACARENA, SAHAR	84.00		1,417,92	I	
217303	11/16/12	000122	HEALTH FIRST	MARTIN, ARIANA	12.00		202.56	I	
217304	11/16/12	000122	HEALTH FIRST	PALAZZOLO, FLOR	84.00		1.417.92	I	
217305	11/16/12	000122	HEALTH FIRST	RIVERA. CHRISTO	21.00		354.48	Ī	
217306	11/16/12	000122	HEALTH FIRST	RIVERA EDDIE	21 00		354 48	Ī	
217307	11/16/12	000122	HEALTH FIRST	RODRIGHEZ MARG	20.00		337.60	Ī	
217308	11/16/12	000122	HEALTH FIRST	SALAZAR LIIZ MA	56.00		945 28	Ī	
217309	11/16/12	000122	HEALTH FIRST	SALHIIANA VOLAN	40.00		675 20	Ī	
217310	11/16/12	000122	HEALTH FIRST	SALHOANA, TOLAN	20.00		337 60	Ī	
217310	11/10/12	000122	HEALTH FIRST	OT POMATME CLA	40.00		675 20	Ī	
217311	11/16/12	000122	HEALIN FIRST	GIDTEL CEPTRID	78 00		1 316 64	I	
217312	11/16/12	000122	HEALTH FIRST	VASOUEZ OLGA	20.00		337.60	Ī	
217313	11/10/12	000122		VII.D Q 0 1 2 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1					
				REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN BOWERS, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DELACRUZ, ANA ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA GARCIA, LEONARD KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA PALAZZOLO, FLOR RIVERA, CHORISTO RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VASQUEZ, OLGA	1,405.00	0.00	23,716.40		
				CATEGORY	1,405.00	0.00	23,716.40		

RUN DATE	E 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE					PAGE 1	- 30	04
SALES JE	RNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG 1	NY NY			NHP NEIGHBORE	HOOD I	HEALTH
				SALE	S REGISTE	R		BILL WEEK ENI	DING	11/23/12
INVOICE#	‡ DATE	CUST NO								SURPLUS
017014	11/16/10	000120	NEIGHBORHOOD HEALTH POR IGHBORHOOD HEALTH PO	DOMEDEDO	ATIMED TIMADA	40.00		010 04	-	
217314	11/16/12	000120	NEIGHBURHOOD HEALIH P	ROVIDERS	AHMED, UMAKA	48.00		810.24	I	
217315	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	AKHTER, SELINA	45.00		759.60	I	
217316	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	CHUKWUJIORAH, T	28.00		472.64	I	
217317	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	DIAZ 1, CARMEN	28.00		472.64	I	
217318	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
217319	11/09/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	FLORES, MARITZA	60.00		1,012.80	I	
217320	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	HAMPTON, PRISCI	45.00		759.60	I	
217321	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	JONES, CYNTHIA	1.00		16.88	I	
217322	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	KHALIL, RASHAN	35.00		590.80	I	
217323	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	KHAN, FARUQUE	72.00		1,215.36	I	
217324	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	KROLL, KATHERIN	39.00		658.32	I	
217325	11/02/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	MORALES HERNAD	108.00		1,823.04	I	
217326	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	MOSKOWITZ, RONA	30.00		506.40	I	
217327	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	OCASIO, VIRGINI	30.00		506.40	I	
217328	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	RODRIGUEZ, JESS	25.00		422.00	I	
217329	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	RODRIGUEZ, MARI	20.00		337.60	I	
217330	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	SHEPPARD, ERMA	60.00		1,012.80	I	
217331	11/16/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	WELLS, WYNORIA	4.00		67.52	I	
217332	10/26/12	000120	NEIGHBORHOOD HEALTH P	ROVIDERS	MOSKOWITZ, RONA OCASIO, VIRGINI RODRIGUEZ, JESS RODRIGUEZ, MARI SHEPPARD, ERMA WELLS, WYNORIA WILSON, SHERYL	44.00		742.72	I	
					CUSTOMER	734.00	0.00	12,389.92		
					CATEGORY	734.00	0.00	12,389.92		

			YSIDE CITYWIDE				PAGE 1	- 30)5
SALES JRN	L # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHO	LIC/F	IDELIS
				SALES REGISTER			BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	11/16/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
217334	11/16/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	18.00		303.66	I	
217335	11/16/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	49.00		826.63	I	
217336	11/16/12	000126	NYS CATHOLIC/FIDELIS	ISKANDER, JACOU	48.00		809.76	I	
217337	11/16/12	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	18.00		303.66	I	
217338	11/16/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	18.00		303.66	I	
217339	11/16/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	13.00		219.31	I	
217340	11/16/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	40.00		674.80	I	
217341	11/16/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAOUEL	54.00		910.98	I	
				CUSTOMER	307.00	0.00	5,179.09		
							,		
				CATEGORY	307.00	0.00	5,179.09		
1									

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 306 UHC UNITED HEALTH BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
217342 11/16/12 217343 11/16/12 217344 11/16/12	000128 UNITED HEALTH CARE 000128 UNITED HEALTH CARE 000128 UNITED HEALTH CARE	CALDERON, MIGDA MILLAN, ARMIDA SAFOS, PATRA	70.00 53.00 56.00		1,201.20 I 909.48 I 960.96 I
		CUSTOMER	179.00	0.00	3,071.64
		CATEGORY	179.00	0.00	3,071.64

RUN DATE 11/20/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 307
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM HI	EALTH
			SALES REGISTER	3		BILL WEEK EN	DING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217345 11/16/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	25.75		360.50	I
217346 11/09/12	000114	EMBLEM HEALTH	COPE, WILLIE	108.00		1,512.00	I
217347 11/16/12	000114	EMBLEM HEALTH	COPELAND, ELISE	49.00		698.25	I
217348 11/16/12	000114	EMBLEM HEALTH	DE JESUS, TIBUR	84.00		1,197.00	I
217349 11/16/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00	I
217350 11/09/12	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	80.50		1,127.00	I
217351 11/16/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	49.00		686.00	I
217352 11/16/12		EMBLEM HEALTH	WEATHERS, VERDE	83.75		1,172.50	I
217353 11/16/12		EMBLEM HEALTH	WESTFIELD, BREN	40.00		560.00	I
, , ,							
			CUSTOMER	540.00	0.00	7,593.25	
			CATEGORY	540.00	0.00	7,593.25	

RUN DATE 11 SALES JRNL			REG NY NY LES REGISTER		PAGE 1 HIP HEALTH I BILL WEEK EN	- 308 NSURANCE PLAN DING 11/23/12
INVOICE#	DATE CUST 1	NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT	TYP SURPLUS
217355 11 217356 11 217357 11 217358 11	1/16/12 000136 1/16/12 000136 1/16/12 000136 1/16/12 000136 1/16/12 000136 1/16/12 000136	6 HEALTH INSURANCE PLAN OF I	NY CIPRIAN, JACQUE NY LOYOLA, MARIA NY ORR, LOUISE NY SHAH, HANSIKABE	15.00 20.00 40.00 35.00 5.00 20.00	253.20 337.60 675.20 590.80 84.40 337.60	I I I I
			CUSTOMER	135.00	.00 2,278.80	
			CATEGORY	135.00 C	.00 2,278.80	

RUN DATE 11/20	/12 - SUP SUN	NYSIDE CITYWIDE				PAGE 1	- 3	09
SALES JRNL # 0	308 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			MPH METROPLU	S HEA	LTH
			SALES REGISTER			BILL WEEK EN	DING	11/23/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
							_	
217360 11/16		METROPLUS HEALTH					I	
217361 11/09	/12 000130	METROPLUS HEALTH	ARIAS, NORA			1,372.00	I	
217362 11/16	/12 000130	METROPLUS HEALTH		70.00		1,200.50	I	
217363 11/16	/12 000130	METROPLUS HEALTH	DOBBINS, SANDRA	161.00		2,761.15	I	
217364 11/16	/12 000130	METROPLUS HEALTH	DURHAM, CYNTHIA			343.00	I	
217365 11/16	/12 000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
217366 11/16	/12 000130	METROPLUS HEALTH	MURDOCK, GERTRU			686.00	I	
217367 11/09	/12 000130	METROPLUS HEALTH	OSORIO, ELVIA	21.00		360.15	I	
217368 11/16	/12 000130	METROPLUS HEALTH	PERSAD, USHA			1,263.97	I	
217369 11/16		METROPLUS HEALTH	RAMPERSAID, ALI	23.00		394.45	I	
217370 11/16		METROPLUS HEALTH	RYALS, CHARLES	40.00		686.00	I	
217371 11/16		METROPLUS HEALTH		10.00		171.50	Ī	
217372 11/16		METROPLUS HEALTH	SHUMON, NUK-FNU			137.20	Ī	
217372 11/16		METROPLUS HEALTH	VALLE, BLASINA			686.00	Ī	
21/3/3 11/10	712 000130	HEIROTHOD HEADIN	VALUE, DEADINA					
			CUSTOMER	646.70	0.00	11,090.92		
			CATEGORY	646.70	0.00	11,090.92		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG I		3		PAGE 1 WEL WELCARE (BILL WEEK ENI	
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217374 11/16/12 217375 11/16/12 217376 11/02/12	000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH MARTINEZ, MARIA RAMIREZ, ALIDA	49.00 42.00 72.00		842.80 722.40 1,238.40	I I
				CUSTOMER	163.00	0.00	2,803.60	
				CATEGORY	163.00	0.00	2,803.60	

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE	DDG NV NV				- 311
SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			AMG AMERIGROU BILL WEEK ENI	
		•		DIDD WEEK BINI	JING 11/25/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217377 11/16/12 000132 AMERIGROUP	DENNISON, KELVI	28.00		472.64	I
217378 11/16/12 000132 AMERIGROUP	ESPERSON, CLAUD	4.00		67.52	I
217379 11/16/12 000132 AMERIGROUP	FERNANDEZ, NORK	41.00		692.08	I
217380 11/09/12 000132 AMERIGROUP	GUERRA, LORRAIN	80.00		1,350.40	I
217381 11/16/12 000132 AMERIGROUP	HARDING, EDNA	20.00		337.60	I
217382 11/16/12 000132 AMERIGROUP	MICHEL, VERULIA	36.00		607.68	I
217383 11/16/12 000132 AMERIGROUP	PRUITT, JOHNNY	8.00		135.04	I
217384 11/09/12 000132 AMERIGROUP	WALTERS, BYRON	25.00		422.00	I
217385 11/09/12 000132 AMERIGROUP	YOUNG, KALEILE	18.00		303.84	I
	CUSTOMER	260.00	0.00	4,388.80	
	CATEGORY	260.00	0.00	4,388.80	

RUN DATE 11/20/12 - SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 HCP HEALTHCAI BILL WEEK ENI		RTNERS
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217386 11/16/12 217387 11/16/12	000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA ZAMBRANO, ZOILA	63.00 16.00		1,063.44 270.08	I I	
			CUSTOMER	79.00	0.00	1,333.52		
			CATEGORY	79.00	0.00	1,333.52		

RUN DATE 11/20/12 -		YSIDE CITYWIDE				PAGE 1 - 313	3
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ICS INDEPENDENCE CA	
		S	SALES REGISTER			BILL WEEK ENDING	11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
217388 11/16/12	000172	INDEPENDENCE CARE SYSTE	EMS MUSHAYEV, BORIS	20.00		318.00 I	
			CATEGORY	20.00	0.00	318.00	

RUN DATE 11/20/1	.2 - SUP SUNI	NYSIDE CITYWIDE					PAGE 1	- 314
SALES JRNL # 030	8 LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCS VNSNY CHO	ICE SELECTHEALTH
			SALES	REGISTER			BILL WEEK END	ING 11/23/12
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
217389 11/16/1	.2 000170	VNSNY CHOICE SELECT	HEALTH K	ARASSAVIDES, A	35.00		600.60	I
					 25 00			
				CATEGORY	35.00	0.00	600.60	

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 315											
SALES JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE REG				PAR PRIVATE					
		SALE	S REGISTER			BILL WEEK ENI	DING 11/23/12				
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS				
217390 11/16/12	000002	SUNNYSIDE COMMUNITY SERVICES	ANGEL, LUCY	8.00		116.00	I				
217391 11/16/12	000002	SUNNYSIDE COMMUNITY SERVICES	ESCOBAR, MARIA	8.00		116.00	I				
217392 11/16/12	000002	SUNNYSIDE COMMUNITY SERVICES	ESPINOZA, LUPE	8.00		116.00	I				
217393 11/09/12	000002	SUNNYSIDE COMMUNITY SERVICES	RAYZMAN, SOLOMO	4.00		58.00	I				
217394 11/16/12	000002	SUNNYSIDE COMMUNITY SERVICES	RAYZMAN, SOLOMO	4.00		58.00	I				
217395 11/16/12	000002	SUNNYSIDE COMMUNITY SERVICES	RICKS, WALTER	8.00		116.00	I				
			CUSTOMER	40.00	0.00	580.00					
217396 11/16/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I				
217397 11/16/12	000049	DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE	20.00		290.00	I				
217398 11/16/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I				
			CATEGORY	88.00	0.00	1,304.00					
			CA'TEGORY	88.00	0.00	1,304.00					

RUN DATE 11/20/12 SALES JRNL # 0308		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 CAS CHILDREN' BILL WEEK ENI		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217399 11/16/12 217400 11/09/12 217401 11/09/12 217402 11/16/12 217403 11/16/12 217404 11/16/12	000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI SALAS, HELENA VARGAS, BRANDON VARGAS, JOHN	25.00 6.00 6.00 27.75 13.50		387.50 93.00 93.00 430.13 209.25 209.25	I I I I I	
			CUSTOMER	91.75	0.00	1,422.13		
			CATEGORY	91.75	0.00	1,422.13		

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0308 LOC 001 SUNNYSIDE CITYW:	IDE REGNY NY SALES REGISTER		PAGE 1 - 317 PAR PRIVATE BILL WEEK ENDING 11/23/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
217405 11/16/12 000098 MILDRED PANSE	PANSE, MILDRED	20.00	310.00 I
	 CATEGORY	20.00 0.00	310.00

RUN DATE 11/20/12 - SALES JRNL # 0308	SUP SUNNYSIDE CITYV LOC 001 SUNNYSIDE	NIDE E CITYWIDE REG NY S A L E S	NY REGISTER			PAGE 1 ELD ELDERSER' BILL WEEK EN		LTH
INVOICE# DATE	CUST NO CUSTOMER 1	IAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217406 11/16/12 217407 11/16/12	000101 ELDERSERVI 000101 ELDERSERVI		EAN, ELMIRA LACK, DOROTHY	25.00 20.00		356.25 285.00	I	
			CUSTOMER	45.00	0.00	641.25		
			CATEGORY	45.00	0.00	641.25		

RUN DATE 11/20/12 - SALES JRNL # 0308	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 319 PAR PRIVATE BILL WEEK ENDING 11/23/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
217408 11/16/12	000143 ETTORE COPPOLA	COPPOLA, ETTORE	23.50	364.25 I
		CATEGORY	23.50 0.00	364.25

RUN DATE 11/20/12 SALES JRNL # 0308		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E				PAGE 1 CCM COMPREHE BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217409 11/16/12 217410 11/16/12 217411 11/16/12	000150 000150 000150	COMPREHENSIVE CARE N COMPREHENSIVE CARE N COMPREHENSIVE CARE N	MANAGEMENT	BONES, ANA MELAMED, ESTER ROSARIO, CELEST	20.00 4.00 30.00		282.00 56.40 423.00	I I I	
				CUSTOMER	54.00	0.00	761.40		
				CATEGORY	54.00	0.00	761.40		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG I	NY NY			PAGE 1 PAR PRIVATE	- 3	21
				SALE	SREGISTER			BILL WEEK END	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217412	11/16/12	000155	ROSEMARY JIBAJA		JIBAJA, ROSEMAR	167.75		2,671.75	I	
217413	11/16/12	000179	DOROTHY TABICKMAN		TABICKMAN, DORT	12.00		186.00	I	
217414	11/16/12	000181	EDELMAN, MILDRED		EDELMAN, MILDRE	20.00		310.00	I	
217415	11/16/12	000183	STEPHEN EDEL		EDEL, CANDACE	80.50		1,271.75	I	
					CATEGORY	280.25	0.00	4,439.50		
							0.00	=, =5, .50		

RUN DA	TE 11/20/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	322
SALES	JRNL # 0308	LOC 001	SUNNYSIDE CITYWIDE					ннн ннн номе са	
				SALES	REGISTER			BILL WEEK ENDIN	IG 11/23/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
217416	11/16/12	000192	HHH LONG TERM HOME	HLTH CARE	TOVAR, ELENA	24.00		360.00 I	
					CATEGORY	24.00	0.00	360.00	

	E 11/20/12 -	- SUP SUNN LOC 001	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			PAGE 1 PAR PRIVATE	- 3	23
	"			S REGISTE	R		BILL WEEK EN	DING	11/23/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
217417	11/16/12	000193	ALZHEIMER'S ASSOCIATION, NYC	ESPINOZA, LUPE	12.00		186.00	I	
217418	11/16/12	000197	KLEA THEOHARIS	THEOHARIS, ARIS	18.00		279.00	I	
217419	11/16/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
217420	11/16/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
217421	10/26/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	4.00		62.00	I	
217422 217423	11/09/12 11/16/12	004784 004784	CAMILLERI, JOSEPH CAMILLERI, JOSEPH	CAMILLERI, JOSE CAMILLERI, JOSE	25.00 25.00		337.50 337.50	I	
				CUSTOMER	50.00	0.00	675.00		
217424	11/16/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
217425 217426	11/09/12 11/16/12	009605 009605	OLGA OBYMAKO OLGA OBYMAKO	OBYMAKO, OLGA OBYMAKO, OLGA	3.00 6.00		46.50 93.00	I I	
				- CUSTOMER	9.00	0.00	139.50		
217427	11/16/12	009752	PETER CAPORASO	CAPORASO, VINCE	12.00		204.00	I	
217428	11/16/12	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I	
217429	11/16/12	010529	STEPHEN WEISS	WEISS, STELLA	6.00		102.00	I	
217430	11/16/12	010530	DANA SITILDES	ANSELMI, PETER	24.00		378.00	I	
217431	11/16/12	011016	MICHAEL SIANO	SIANO, ANDREW	30.00		405.00	I	
217432	11/16/12	011060	ROBIN WARREN CHARLES	WARREN, CYNTHIA	114.00		1,824.00	I	
217433	11/02/12	011394	HELGA JENSEN	JENSEN, HELGA	13.00		201.50	I	
217434 217435	11/09/12 11/16/12	011394 011394	HELGA JENSEN HELGA JENSEN	JENSEN, HELGA JENSEN, HELGA	16.00 16.00		272.00 272.00	I	
				- CUSTOMER	45.00	0.00	745.50		
217436	11/16/12	011536	CARNEY ELIZABETH	CARNEY, ELIZABE	15.00		232.50	I	
217437	11/16/12	011542	LUCY SAMPOGNA	SAMPOGNA, LUCY	8.00		136.00	I	
217438	11/16/12	011630	JAMES BENZ	CAGAN, RUMANDO	8.00		124.00	I	
				CATEGORY	413.00	0.00	6,412.50		
				LOCATION	23,686.95 	0.00	365,889.99		
				COMPANY	23,686.95		365,889.99		

RUN DATE 11/20/12 - SUP SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 11/23/12

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

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