

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 1
SHP SENIOR HEALTH PARTNERS
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181958	1/27/12	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		52.40	I	
181959	1/27/12	000082	SENIOR HEALTH PARTNERS	BROOKS, NATALIE	23.75		311.13	I	
181960	1/27/12	000082	SENIOR HEALTH PARTNERS	CARRILLO, MARIA	35.00		458.50	I	
181961	1/27/12	000082	SENIOR HEALTH PARTNERS	COLON, RAYMUNDA	37.00		484.70	I	
181962	1/27/12	000082	SENIOR HEALTH PARTNERS	DABU, JUANITA	16.00		209.60	I	
181963	1/27/12	000082	SENIOR HEALTH PARTNERS	DABU, JUANITA	4.00		52.40	I	
181964	1/27/12	000082	SENIOR HEALTH PARTNERS	FENTON, JESSIE	8.00		104.80	I	
181965	1/27/12	000082	SENIOR HEALTH PARTNERS	FENTON, JESSIE	4.00		52.40	I	
181966	1/27/12	000082	SENIOR HEALTH PARTNERS	GHILTIOTTY, FLOR	32.00		419.20	I	
181967	1/27/12	000082	SENIOR HEALTH PARTNERS	GUTIERREZ, LUCI	25.00		327.50	I	
181968	1/27/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, KHAMAT	32.50		425.76	I	
181969	1/27/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	127.00		1,663.70	I	
181970	1/27/12	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	14.00		183.40	I	
181971	1/27/12	000082	SENIOR HEALTH PARTNERS	LEPORE, CLAIRE	5.00		65.50	I	
181972	1/27/12	000082	SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	76.00		995.60	I	
181973	1/27/12	000082	SENIOR HEALTH PARTNERS	PERALTA, RAMONA	8.00		104.80	I	
181974	1/27/12	000082	SENIOR HEALTH PARTNERS	SIERRA, MIRIAM	20.00		262.00	I	
181975	1/27/12	000082	SENIOR HEALTH PARTNERS	SIMON, LUPE	4.00		52.40	I	
181976	1/27/12	000082	SENIOR HEALTH PARTNERS	TORRESCAMPOS, J	40.00		524.00	I	
181977	1/20/12	000082	SENIOR HEALTH PARTNERS	VASQUEZ, CORNEL	12.00		157.20	I	
181978	1/27/12	000082	SENIOR HEALTH PARTNERS	VIDOT-LINARES,	40.00		524.00	I	
181979	1/27/12	000082	SENIOR HEALTH PARTNERS	WOO, LUZ	12.00		157.20	I	
181980	1/27/12	000082	SENIOR HEALTH PARTNERS	WOO, LUZ	4.00		52.40	I	
				CUSTOMER	583.25	0.00	7,640.59		
				CATEGORY	583.25	0.00	7,640.59		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 2
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181981	1/27/12	000008	VISITING NURSE SERVICE	ABBOTT, FAY	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 3
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181982	1/27/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	56.00		816.48	I	
181983	1/27/12	000008	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 4
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181984	1/27/12	000008	VISITING NURSE SERVICE	ACUNA, JOSE	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 5
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181985	1/27/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
181986	1/27/12	000008	VISITING NURSE SERVICE	ADAMES, RICARDO	34.75		506.66	I	
181987	1/27/12	000008	VISITING NURSE SERVICE	ADAMS, MYRIAM	68.75		1,002.38	I	
181988	1/27/12	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	20.00		291.60	I	
181989	1/27/12	000008	VISITING NURSE SERVICE	AFZAL, AMIR	4.00		58.32	I	
				CUSTOMER	152.50	0.00	2,223.46		
				CATEGORY	152.50	0.00	2,223.46		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 6
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181990	1/27/12	000008	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		656.10	I	
				CATEGORY	45.00	0.00	656.10		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 7
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181991	1/27/12	000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	24.00		349.92	I	
				CATEGORY	24.00	0.00	349.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 8
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181992	1/27/12	000008	VISITING NURSE SERVICE	AIOSA, MARIE	3.00		43.74	I	
181993	1/27/12	000008	VISITING NURSE SERVICE	AIOSA, MARIE	6.00		87.48	I	
					-----	-----	-----		-----
				CUSTOMER	9.00	0.00	131.22		
					-----	-----	-----		-----
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 9
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181994	1/27/12	000008	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60	I	
181995	1/27/12	000008	VISITING NURSE SERVICE	ALESSIU, AGRIPI	3.00		43.74	I	
181996	1/20/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	5.00		72.90	I	
181997	1/27/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	26.00		379.08	I	
181998	1/27/12	000008	VISITING NURSE SERVICE	ALMANZAR, REMIG	4.00		58.32	I	
				CUSTOMER	58.00	0.00	845.64		
				CATEGORY	58.00	0.00	845.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 10
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
181999	1/27/12	000008	VISITING NURSE SERVICE	ALVAREZ, NAZARE	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 11
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182000	1/27/12	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	56.00		816.48	I	
182001	1/27/12	000008	VISITING NURSE SERVICE	ANDREWS, JOHNNI	56.00		816.48	I	
				CUSTOMER	112.00	0.00	1,632.96		
				CATEGORY	112.00	0.00	1,632.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 12
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182002	1/27/12	000008	VISITING NURSE SERVICE	ANGRISANO, RUTH	11.75		171.32	I	
				CATEGORY	11.75	0.00	171.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 13
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182003	1/27/12	000008	VISITING NURSE SERVICE	ANGULO, ELCY	20.00		291.60	I	
182004	1/27/12	000008	VISITING NURSE SERVICE	ANUT, ALICE	61.00		889.38	I	
					-----	-----	-----		-----
				CUSTOMER	81.00	0.00	1,180.98		
					-----	-----	-----		-----
				CATEGORY	81.00	0.00	1,180.98		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 14
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182005	1/27/12	000008	VISITING NURSE SERVICE	ANZALONE, LAWRE	10.00		145.80	I	
				CATEGORY	10.00	0.00	145.80		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 15
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182006	1/27/12	000008	VISITING NURSE SERVICE	AOUN, ODETTE	19.50		284.31	I	
182007	1/27/12	000008	VISITING NURSE SERVICE	ARIAS, MAGDALEN	46.00		670.68	I	
182008	1/27/12	000008	VISITING NURSE SERVICE	ASGHAR, MUHAMMA	4.00		58.32	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	69.50	0.00	1,013.31		
				-----	-----	-----	-----	-----	-----
				CATEGORY	69.50	0.00	1,013.31		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 16
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182009	1/27/12	000008	VISITING NURSE SERVICE	ASH, MARIE	9.50		138.51	I	
				CATEGORY	9.50	0.00	138.51		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 17
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182010	1/27/12	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	42.00		612.36	I	
				CATEGORY	42.00	0.00	612.36		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 18
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182011	1/27/12	000008	VISITING NURSE SERVICE	AVILA, ENIDIA	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 19
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182012	1/27/12	000008	VISITING NURSE SERVICE	AZAD, ABUL	10.00		145.80	I	
				CATEGORY	10.00	0.00	145.80		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 20
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182013	1/27/12	000008	VISITING NURSE SERVICE	BADILLO, JOVITA	7.75		113.00	I	
182014	1/27/12	000008	VISITING NURSE SERVICE	BAEZ, JUAN	35.00		510.30	I	
				CUSTOMER	42.75	0.00	623.30		
				CATEGORY	42.75	0.00	623.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 21
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182015	1/27/12	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	30.00		437.40	I	
182016	1/27/12	000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	56.00		816.48	I	
				CUSTOMER	86.00	0.00	1,253.88		
				CATEGORY	86.00	0.00	1,253.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 22
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182017	1/27/12	000008	VISITING NURSE SERVICE	BARBOSA, CARMEN	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 23
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182018	1/27/12	000008	VISITING NURSE SERVICE	BARDEANU, VICTO	45.00		656.10	I	
182019	1/27/12	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	49.00		714.42	I	
				CUSTOMER	94.00	0.00	1,370.52		
				CATEGORY	94.00	0.00	1,370.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 24
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182020	1/27/12	000008	VISITING NURSE SERVICE	BECERRA, FELIPE	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 25
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182021	1/27/12	000008	VISITING NURSE SERVICE	BEGUM, IQBAL	4.00		58.32	I	
182022	1/27/12	000008	VISITING NURSE SERVICE	BELLOROFONTE, M	139.00		2,026.62	I	
				CUSTOMER	143.00	0.00	2,084.94		
				CATEGORY	143.00	0.00	2,084.94		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 26
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182023	1/27/12	000008	VISITING NURSE SERVICE	BERENBLIT, SARA	4.00		58.32	I	
182024	1/27/12	000008	VISITING NURSE SERVICE	BERSANI, CLAIRE	6.00		87.48	I	
				CUSTOMER	10.00	0.00	145.80		
				CATEGORY	10.00	0.00	145.80		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 27
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182025	1/20/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	10.00		145.80	I	
182026	1/27/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	25.00		364.50	I	
182027	1/27/12	000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	30.25		441.05	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	65.25	0.00	951.35		
				-----	-----	-----	-----	-----	-----
				CATEGORY	65.25	0.00	951.35		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 28
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182028	1/27/12	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	24.00		349.92	I	
182029	1/27/12	000008	VISITING NURSE SERVICE	BIANCO HOPKINS,	8.00		116.64	I	
				CUSTOMER	32.00	0.00	466.56		
				CATEGORY	32.00	0.00	466.56		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 29
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182030	1/27/12	000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 30
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182031	1/27/12	000008	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 31
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182032	1/27/12	000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	20.00		291.60	I	
182033	1/27/12	000008	VISITING NURSE SERVICE	BONILLA, ESPERA	49.00		714.42	I	
				CUSTOMER	69.00	0.00	1,006.02		
				CATEGORY	69.00	0.00	1,006.02		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 32
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182034	1/27/12	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50	I	
				CATEGORY	25.00	0.00	364.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 33
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182035	1/27/12	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	11.25		164.03	I	
				CATEGORY	11.25	0.00	164.03		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 34
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182036	1/27/12	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 35
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182037	1/27/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	63.00		918.54	I	
182038	1/27/12	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	11.00		160.38	I	
182039	1/27/12	000008	VISITING NURSE SERVICE	BURNS, MARGARET	47.50		692.55	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	121.50	0.00	1,771.47		
				-----	-----	-----	-----	-----	-----
				CATEGORY	121.50	0.00	1,771.47		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 36
LAD NURSING HOME W/O WALLS LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182040	1/27/12	000008	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 37
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182041	1/27/12	000008	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80	I	
182042	1/27/12	000008	VISITING NURSE SERVICE	CALABRO, JOSEPH	40.00		583.20	I	
182043	1/27/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.25		630.59	I	
182044	1/27/12	000008	VISITING NURSE SERVICE	CALDERON, VIRGI	12.00		174.96	I	
				CUSTOMER	105.25	0.00	1,534.55		
				CATEGORY	105.25	0.00	1,534.55		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 38
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182045	1/27/12	000008	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54	I	
				CATEGORY	63.00	0.00	918.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 39
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182046	1/27/12	000008	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 40
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182047	1/27/12	000008	VISITING NURSE SERVICE	CANDIDO, ELENA	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 41
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182048	1/20/12	000008	VISITING NURSE SERVICE	CANO, ADELINA	6.00		87.48	I	
182049	1/27/12	000008	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 42
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182050	1/27/12	000008	VISITING NURSE SERVICE	CANTO, THERESA	11.25		164.03	I	
				CATEGORY	11.25	0.00	164.03		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 43
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182051	1/27/12	000008	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,224.72	I	
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 44
LAD NURSING HOME W/O WALLS LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182052	1/27/12	000008	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 45
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182053	1/27/12	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	48.50		707.13	I	
182054	1/27/12	000008	VISITING NURSE SERVICE	CARELA-REYES, M	24.75		360.86	I	
182055	1/27/12	000008	VISITING NURSE SERVICE	CARRALERO, ROSA	36.00		524.88	I	
182056	1/27/12	000008	VISITING NURSE SERVICE	CARTAFALSA, NEL	68.00		991.44	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	177.25	0.00	2,584.31		
				-----	-----	-----	-----	-----	-----
				CATEGORY	177.25	0.00	2,584.31		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 46
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182057	1/27/12	000008	VISITING NURSE SERVICE	CARTAGENA, FRAN	55.75		812.84	I	
				CATEGORY	55.75	0.00	812.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 47
AUR ADULT REHAB ONLY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182058	1/27/12	000008	VISITING NURSE SERVICE	CARUS, SYLVIA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 48
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182059	1/27/12	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 49
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182060	1/27/12	000008	VISITING NURSE SERVICE	CELIO, MARION	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 50
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182061	1/20/12	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	6.00		87.48	I	
182062	1/27/12	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	24.00		349.92	I	
				CUSTOMER	30.00	0.00	437.40		
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 51
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182063	1/13/12	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	4.00		58.32	I	
182064	1/27/12	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	18.00		262.44	I	
				CUSTOMER	22.00	0.00	320.76		
				CATEGORY	22.00	0.00	320.76		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 52
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182065	1/27/12	000008	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 53
LAD NURSING HOME W/O WALLS LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182066	1/06/12	000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		145.80	I	
182067	1/27/12	000008	VISITING NURSE SERVICE	CHARLES, JOSE	20.00		291.60	I	
				CUSTOMER	30.00	0.00	437.40		
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 54
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182068	1/27/12	000008	VISITING NURSE SERVICE	CHAUCA, PEDRO	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 55
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182069	1/27/12	000008	VISITING NURSE SERVICE	CHINGA, ALBA	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 56
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182070	1/27/12	000008	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 57
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182071	1/27/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	49.00		714.42	I	
182072	1/27/12	000008	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
182073	1/27/12	000008	VISITING NURSE SERVICE	CHUCK, ENA	30.50		444.69	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	119.50	0.00	1,742.31		
				-----	-----	-----	-----	-----	-----
				CATEGORY	119.50	0.00	1,742.31		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 58
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182074	1/27/12	000008	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 59
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182075	1/27/12	000008	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 60
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182076	1/06/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	4.00		58.32	I	
182077	1/27/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I	
182078	1/27/12	000008	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I	
182079	1/27/12	000008	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I	
182080	1/27/12	000008	VISITING NURSE SERVICE	COLON, ISABEL	21.75		317.12	I	
				CUSTOMER	102.75	0.00	1,498.10		
				CATEGORY	102.75	0.00	1,498.10		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 61
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182081	1/27/12	000008	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44	I	
				CATEGORY	168.00	0.00	2,449.44		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 62
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182082	1/27/12	000008	VISITING NURSE SERVICE	CORREA, MARGARI	24.00		349.92	I	
				CATEGORY	24.00	0.00	349.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 63
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182083	1/27/12	000008	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 64
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182084	1/27/12	000008	VISITING NURSE SERVICE	COSTA, ARSENE	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 65
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182085	1/27/12	000008	VISITING NURSE SERVICE	COVALIU, SIMION	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 66
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182086	1/27/12	000008	VISITING NURSE SERVICE	COX, PETRA	19.00		277.02	I	
				CATEGORY	19.00	0.00	277.02		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 67
LAD NURSING HOME W/O WALLS LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182087	1/27/12	000008	VISITING NURSE SERVICE	CRUZ, HECTOR	35.50		517.60	I	
				CATEGORY	35.50	0.00	517.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 68
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182088	1/27/12	000008	VISITING NURSE SERVICE	CRUZ, JUANA	18.50		269.73	I	
				CATEGORY	18.50	0.00	269.73		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 69
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182089	1/27/12	000008	VISITING NURSE SERVICE	CUCCIARDI, EMAN	8.00		116.64	I	
				CATEGORY	8.00	0.00	116.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 70
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182090	1/27/12	000008	VISITING NURSE SERVICE	CURLEY, INGEBOR	25.00		364.50	I	
				CATEGORY	25.00	0.00	364.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 71
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182091	1/27/12	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	25.00		364.50	I	
				CATEGORY	25.00	0.00	364.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 72
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182092	1/27/12	000008	VISITING NURSE SERVICE	DANIELS, DEIRDR	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 73
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182093	1/27/12	000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 74
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182094	12/09/11	000008	VISITING NURSE SERVICE	DAVIS, LOUELLEN	6.00		87.48	I	
182095	1/27/12	000008	VISITING NURSE SERVICE	DAVIS, LOUELLEN	42.00		612.36	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 75
LAD NURSING HOME W/O WALLS LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182096	1/27/12	000008	VISITING NURSE SERVICE	DEL CARPIO, FEL	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 76
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182097	1/27/12	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	33.00		481.14	I	
182098	1/27/12	000008	VISITING NURSE SERVICE	DELAROSA, CORAL	35.00		510.30	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 77
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182099	1/27/12	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	29.50		430.11	I	
182100	1/27/12	000008	VISITING NURSE SERVICE	DELPOZO, MIGUEL	25.00		364.50	I	
				CUSTOMER	54.50	0.00	794.61		
				CATEGORY	54.50	0.00	794.61		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 78
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182101	1/27/12	000008	VISITING NURSE SERVICE	DELUCA, ANTIONE	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 79
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182102	1/27/12	000008	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 80
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182103	1/27/12	000008	VISITING NURSE SERVICE	DESENA, FRED	7.00		102.06	I	
				CATEGORY	7.00	0.00	102.06		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 81
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182104	1/27/12	000008	VISITING NURSE SERVICE	DEZUMARAN, REBE	44.25		645.17	I	
				CATEGORY	44.25	0.00	645.17		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 82
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182105	1/27/12	000008	VISITING NURSE SERVICE	DIAZ, HILDA	31.50		459.28	I	
				CATEGORY	31.50	0.00	459.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 83
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182106	1/27/12	000008	VISITING NURSE SERVICE	DIAZ, MARIA	28.00		408.24	I	
182107	1/27/12	000008	VISITING NURSE SERVICE	DIAZ, OLGA	42.00		612.36	I	
182108	1/27/12	000008	VISITING NURSE SERVICE	DIAZ, ROSA	36.00		524.88	I	
182109	1/27/12	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI	70.00		1,020.60	I	
					-----	-----	-----	-----	-----
					CUSTOMER	176.00	0.00	2,566.08	
					-----	-----	-----	-----	-----
					CATEGORY	176.00	0.00	2,566.08	

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 84
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182110	1/27/12	000008	VISITING NURSE SERVICE	DIRADURIAN, HAR	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 85
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182111	1/27/12	000008	VISITING NURSE SERVICE	DOMINGUEZ, MARI	42.00		612.36	I	
182112	1/27/12	000008	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60	I	
				CUSTOMER	62.00	0.00	903.96		
				CATEGORY	62.00	0.00	903.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 86
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182113	1/27/12	000008	VISITING NURSE SERVICE	DOMINICK, GINA	41.00		597.78	I	
				CATEGORY	41.00	0.00	597.78		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 87
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182114	1/27/12	000008	VISITING NURSE SERVICE	DUGLUS, MAY RUT	42.00		612.36	I	
				CATEGORY	42.00	0.00	612.36		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 88
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182115	1/27/12	000008	VISITING NURSE SERVICE	DUTAN, SELINDA	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 89
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182116	1/27/12	000008	VISITING NURSE SERVICE	DUVERGE, MARIA	13.00		189.54	I	
				CATEGORY	13.00	0.00	189.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 90
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182117	1/27/12	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	41.75		608.72	I	
				CATEGORY	41.75	0.00	608.72		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 91
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182118	1/27/12	000008	VISITING NURSE SERVICE	EDELMAN, MILDRE	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 92
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182119	1/27/12	000008	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 93
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182120	1/27/12	000008	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 94
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182121	1/27/12	000008	VISITING NURSE SERVICE	ESPEJO, GRACIEL	24.00		349.92	I	
				CATEGORY	24.00	0.00	349.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 95
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182122	1/27/12	000008	VISITING NURSE SERVICE	EVERETT, SHIRLE	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 96
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182123	1/27/12	000008	VISITING NURSE SERVICE	FADEN, ROBIN	47.50		692.56	I	
				CATEGORY	47.50	0.00	692.56		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 97
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182124	1/27/12	000008	VISITING NURSE SERVICE	FAMBIATOU, PARA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 98
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182125	1/27/12	000008	VISITING NURSE SERVICE	FAMBIATOU, PARA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 99
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182126	1/27/12	000008	VISITING NURSE SERVICE	FARO, VIRGINIA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 100
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182127	1/27/12	000008	VISITING NURSE SERVICE	FAY, JULIA	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 101
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182128	1/27/12	000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI	57.50		838.35	I	
				CATEGORY	57.50	0.00	838.35		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 102
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182129	1/27/12	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 103
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182130	1/27/12	000008	VISITING NURSE SERVICE	FERREIRO, JOSEP	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 104
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182131	1/27/12	000008	VISITING NURSE SERVICE	FIUMARA, ROSE	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 105
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182132	1/27/12	000008	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 106
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182133	1/13/12	000008	VISITING NURSE SERVICE	FOLLETT, ROSIN	7.00		102.06	I	
182134	1/27/12	000008	VISITING NURSE SERVICE	FOLLETT, ROSIN	32.00		466.56	I	
182135	1/27/12	000008	VISITING NURSE SERVICE	FORTEBOA, GUILL	35.00		510.30	I	
					-----	-----	-----		-----
				CUSTOMER	74.00	0.00	1,078.92		
					-----	-----	-----		-----
				CATEGORY	74.00	0.00	1,078.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 107
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182136	1/27/12	000008	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48	I	
182137	1/27/12	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	37.25		543.11	I	
182138	1/27/12	000008	VISITING NURSE SERVICE	FUNES, GEORGINA	30.00		437.40	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	123.25	0.00	1,796.99		
				-----	-----	-----	-----	-----	-----
				CATEGORY	123.25	0.00	1,796.99		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 108
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182139	1/27/12	000008	VISITING NURSE SERVICE	GAID, ASILA	30.00		437.40	I	
182140	1/27/12	000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	42.00		612.36	I	
182141	1/27/12	000008	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	81.00	0.00	1,180.98		
				-----	-----	-----	-----	-----	-----
				CATEGORY	81.00	0.00	1,180.98		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 109
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182142	1/27/12	000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	38.00		554.05	I	
182143	1/27/12	000008	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32	I	
					-----	-----	-----		-----
				CUSTOMER	42.00	0.00	612.37		
					-----	-----	-----		-----
				CATEGORY	42.00	0.00	612.37		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 110
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182144	1/27/12	000008	VISITING NURSE SERVICE	GARCIA, ADRIANO	29.75		433.76	I	
182145	1/27/12	000008	VISITING NURSE SERVICE	GARCIA, JOSEFIN	56.00		816.48	I	
				CUSTOMER	85.75	0.00	1,250.24		
				CATEGORY	85.75	0.00	1,250.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 111
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182146	1/27/12	000008	VISITING NURSE SERVICE	GARCIA, JUANA	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 112
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182147	1/27/12	000008	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		437.40	I	
182148	1/27/12	000008	VISITING NURSE SERVICE	GARY, MIKE	28.00		408.24	I	
182149	1/27/12	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	31.50		459.27	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	89.50	0.00	1,304.91		
				-----	-----	-----	-----	-----	-----
				CATEGORY	89.50	0.00	1,304.91		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 113
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182150	1/27/12	000008	VISITING NURSE SERVICE	GEORGE, MERCEDE	50.00		729.00	I	
				CATEGORY	50.00	0.00	729.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 114
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182151	1/27/12	000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	43.00		626.95	I	
				CATEGORY	43.00	0.00	626.95		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 115
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182152	1/27/12	000008	VISITING NURSE SERVICE	GIUNTA, MADELIN	8.00		116.64	I	
182153	1/27/12	000008	VISITING NURSE SERVICE	GLYPTIS, ARIADN	3.00		43.74	I	
				CUSTOMER	11.00	0.00	160.38		
				CATEGORY	11.00	0.00	160.38		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 116
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182154	1/27/12	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 117
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182155	1/27/12	000008	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		364.50	I	
				CATEGORY	25.00	0.00	364.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 118
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182156	1/27/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I	
182157	1/27/12	000008	VISITING NURSE SERVICE	GOMEZ, VICTORIA	28.00		408.24	I	
				CUSTOMER	63.00	0.00	918.54		
				CATEGORY	63.00	0.00	918.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 119
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182158	1/27/12	000008	VISITING NURSE SERVICE	GONZALEZ, CARLO	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 120
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182159	1/27/12	000008	VISITING NURSE SERVICE	GONZALEZ, DOLOR	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 121
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182160	1/27/12	000008	VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 122
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182161	1/27/12	000008	VISITING NURSE SERVICE	GONZALEZ, FLOR	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 123
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182162	1/27/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	24.00		349.92	I	
182163	1/27/12	000008	VISITING NURSE SERVICE	GRAVER, EDNA	40.00		583.20	I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 124
LAA LOMBARDI AIDS ADULT POPUL
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182164	1/27/12	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 125
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182165	1/27/12	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	79.00		1,151.82	I	
182166	1/27/12	000008	VISITING NURSE SERVICE	GUTIERREZ, ANGE	39.50		575.91	I	
				CUSTOMER	118.50	0.00	1,727.73		
				CATEGORY	118.50	0.00	1,727.73		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 126
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182167	1/27/12	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	24.00		349.92	I	
182168	1/27/12	000008	VISITING NURSE SERVICE	HALPERN, SIDNEY	15.00		218.70	I	
182169	1/27/12	000008	VISITING NURSE SERVICE	HENAO, BEATRIZ	12.75		185.90	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	51.75	0.00	754.52		
				-----	-----	-----	-----	-----	-----
				CATEGORY	51.75	0.00	754.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 127
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182170	1/27/12	000008	VISITING NURSE SERVICE	HENDY, BERNICE	14.75		215.06	I	
				CATEGORY	14.75	0.00	215.06		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 128
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182171	1/27/12	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	53.25		776.39	I	
				CATEGORY	53.25	0.00	776.39		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 129
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182172	1/27/12	000008	VISITING NURSE SERVICE	HERNANDEZ, MERC	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 130
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182173	1/27/12	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	31.00		451.98	I	
182174	1/27/12	000008	VISITING NURSE SERVICE	HERRERA, HORACI	36.00		524.88	I	
182175	1/27/12	000008	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		583.20	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	107.00	0.00	1,560.06		
				-----	-----	-----	-----	-----	-----
				CATEGORY	107.00	0.00	1,560.06		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 131
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182176	1/27/12	000008	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 132
LAA LOMBARDI AIDS ADULT POPUL
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182177	1/27/12	000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	29.00		422.82	I	
				CATEGORY	29.00	0.00	422.82		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 133
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182178	1/27/12	000008	VISITING NURSE SERVICE	INSERRA, CATHER	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 134
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182179	1/27/12	000008	VISITING NURSE SERVICE	IRUSTA, MARIA	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 135
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182180	1/27/12	000008	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40	I	
182181	1/27/12	000008	VISITING NURSE SERVICE	JAFFAI, ABDUL	6.00		87.48	I	
				CUSTOMER	36.00	0.00	524.88		
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 136
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182182	1/27/12	000008	VISITING NURSE SERVICE	JAGDE, MARIA	30.00		437.40	I	
182183	1/27/12	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	24.00		349.92	I	
				CUSTOMER	54.00	0.00	787.32		
				CATEGORY	54.00	0.00	787.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 137
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182184	1/27/12	000008	VISITING NURSE SERVICE	JARA, DELIA	10.00		145.80	I	
				CATEGORY	10.00	0.00	145.80		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 138
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182185	1/27/12	000008	VISITING NURSE SERVICE	JASKOWSKI, GEN	7.50		109.35	I	
				CATEGORY	7.50	0.00	109.35		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 139
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182186	1/27/12	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE	76.50		1,115.37	I	
				CATEGORY	76.50	0.00	1,115.37		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 140
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182187	1/27/12	000008	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 141
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182188	1/20/12	000008	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	6.00		87.48	I	
182189	1/27/12	000008	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	24.75		360.86	I	
				CUSTOMER	30.75	0.00	448.34		
				CATEGORY	30.75	0.00	448.34		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 142
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182190	1/27/12	000008	VISITING NURSE SERVICE	JIMENEZ, BETTY	1.00		14.58	I	
182191	1/27/12	000008	VISITING NURSE SERVICE	JOHNSON, DOROTH	20.00		291.60	I	
				CUSTOMER	21.00	0.00	306.18		
				CATEGORY	21.00	0.00	306.18		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 143
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182192	1/27/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	24.75		360.86	I	
182193	1/27/12	000008	VISITING NURSE SERVICE	JORRIN, NILIO	39.00		568.62	I	
				CUSTOMER	63.75	0.00	929.48		
				CATEGORY	63.75	0.00	929.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 144
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182194	1/27/12	000008	VISITING NURSE SERVICE	KAKOULLIS, FAY	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 145
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182195	1/27/12	000008	VISITING NURSE SERVICE	KAUR, SARD	11.75		171.32	I	
182196	1/27/12	000008	VISITING NURSE SERVICE	KAUR, SHARAN	49.50		721.72	I	
					-----	-----	-----		-----
				CUSTOMER	61.25	0.00	893.04		
					-----	-----	-----		-----
				CATEGORY	61.25	0.00	893.04		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 146
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182197	1/27/12	000008	VISITING NURSE SERVICE	KAVOURIAS, MARI	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 147
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182198	1/27/12	000008	VISITING NURSE SERVICE	KEARNEY, LORRAI	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 148
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182199	1/27/12	000008	VISITING NURSE SERVICE	KONSTANTINAKOS,	67.00		976.86	I	
				CATEGORY	67.00	0.00	976.86		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 149
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182200	1/27/12	000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 150
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182201	1/27/12	000008	VISITING NURSE SERVICE	LANDETA, FERNAN	11.75		171.32	I	
				CATEGORY	11.75	0.00	171.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 151
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182202	1/27/12	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 152
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182203	1/27/12	000008	VISITING NURSE SERVICE	LEE, GOCK HAN	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 153
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182204	1/27/12	000008	VISITING NURSE SERVICE	LEE, HEE	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 154
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182205	1/20/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	4.00		58.32	I	
182206	1/27/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	24.00		349.92	I	
				CUSTOMER	28.00	0.00	408.24		
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 155
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182207	1/27/12	000008	VISITING NURSE SERVICE	LEFF, MARTIN	3.00		43.74	I	
				CATEGORY	3.00	0.00	43.74		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 156
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182208	1/27/12	000008	VISITING NURSE SERVICE	LEGASPI, CECILI	19.00		277.02	I	
				CATEGORY	19.00	0.00	277.02		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 157
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182209	1/27/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 158
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182210	1/27/12	000008	VISITING NURSE SERVICE	LINARES, MYRIAM	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 159
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182211	1/27/12	000008	VISITING NURSE SERVICE	LIRIANO, FRANCI	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 160
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182212	1/27/12	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	28.25		411.89	I	
				CATEGORY	28.25	0.00	411.89		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 161
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182213	1/20/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	16.00		233.28	I	
182214	1/27/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	48.00		699.84	I	
182215	1/27/12	000008	VISITING NURSE SERVICE	LOGAN, ADELE	40.75		594.14	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	104.75	0.00	1,527.26		
				-----	-----	-----	-----	-----	-----
				CATEGORY	104.75	0.00	1,527.26		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 162
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182216	1/27/12	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	60.75		885.75	I	
182217	1/27/12	000008	VISITING NURSE SERVICE	LOOR, MAURA	11.50		167.67	I	
182218	1/27/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	34.75		506.66	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	107.00	0.00	1,560.08		
				-----	-----	-----	-----	-----	-----
				CATEGORY	107.00	0.00	1,560.08		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 163
AUR ADULT REHAB ONLY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182219	1/27/12	000008	VISITING NURSE SERVICE	LOPEZ, GRACIELA	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 164
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182220	1/27/12	000008	VISITING NURSE SERVICE	LOPEZ, MARIA	39.50		575.91	I	
				CATEGORY	39.50	0.00	575.91		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 165
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182221	1/27/12	000008	VISITING NURSE SERVICE	LOPEZDELCASTIL,	70.00		1,020.60	I	
182222	1/27/12	000008	VISITING NURSE SERVICE	LORIA, DIANA	24.00		349.92	I	
				CUSTOMER	94.00	0.00	1,370.52		
				CATEGORY	94.00	0.00	1,370.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 166
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182223	1/27/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	20.00		291.60	I	
182224	1/27/12	000008	VISITING NURSE SERVICE	LYMN, ANGIE	30.00		437.40	I	
					-----	-----	-----		-----
				CUSTOMER	50.00	0.00	729.00		
					-----	-----	-----		-----
				CATEGORY	50.00	0.00	729.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 167
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182225	1/27/12	000008	VISITING NURSE SERVICE	MACCHIA, CATHY	35.50		517.59	I	
182226	1/27/12	000008	VISITING NURSE SERVICE	MACIEWSKI, FRAN	1.00		14.58	I	
				CUSTOMER	36.50	0.00	532.17		
				CATEGORY	36.50	0.00	532.17		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 168
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182227	1/27/12	000008	VISITING NURSE SERVICE	MAGILLIGAN, LOR	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 169
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182228	1/27/12	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	84.00		1,224.72	I	
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 170
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182229	1/27/12	000008	VISITING NURSE SERVICE	MALIA, AGNES	8.75		127.58	I	
				CATEGORY	8.75	0.00	127.58		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 171
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182230	1/27/12	000008	VISITING NURSE SERVICE	MANGAN, JOHN	20.00		291.60	I	
182231	1/27/12	000008	VISITING NURSE SERVICE	MANNINO, FRANCE	77.00		1,122.66	I	
				CUSTOMER	97.00	0.00	1,414.26		
				CATEGORY	97.00	0.00	1,414.26		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 172
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182232	1/27/12	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	42.00		612.36	I	
182233	1/27/12	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	21.00		306.18	I	
				CUSTOMER	63.00	0.00	918.54		
				CATEGORY	63.00	0.00	918.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 173
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182234	1/27/12	000008	VISITING NURSE SERVICE	MANTILLA, CLEME	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 174
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182235	1/27/12	000008	VISITING NURSE SERVICE	MARINO, ANN	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 175
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182236	1/27/12	000008	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50	I	
				CATEGORY	25.00	0.00	364.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 176
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182237	1/27/12	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94	I	
				CATEGORY	43.00	0.00	626.94		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 177
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182238	1/27/12	000008	VISITING NURSE SERVICE	MARTIN, ELAUCAD	12.00		174.96	I	
182239	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, CAMIL	15.00		218.70	I	
				CUSTOMER	27.00	0.00	393.66		
				CATEGORY	27.00	0.00	393.66		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 178
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182240	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 179
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182241	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	30.00		437.40	I	
182242	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARTA	29.50		430.12	I	
182243	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, ROSA	84.00		1,224.72	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	143.50	0.00	2,092.24		
				-----	-----	-----	-----	-----	-----
				CATEGORY	143.50	0.00	2,092.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 180
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182244	1/27/12	000008	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04	I	
				CATEGORY	38.00	0.00	554.04		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 181
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182245	1/27/12	000008	VISITING NURSE SERVICE	MASI, RAFFAELE	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 182
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182246	1/27/12	000008	VISITING NURSE SERVICE	MATOS, ROSA	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 183
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182247	1/27/12	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54	I	
182248	1/27/12	000008	VISITING NURSE SERVICE	MCBRAYER, SYLVI	156.00		2,274.48	I	
				CUSTOMER	219.00	0.00	3,193.02		
				CATEGORY	219.00	0.00	3,193.02		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 184
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182249	1/27/12	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 185
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182250	1/27/12	000008	VISITING NURSE SERVICE	MCPARTLAN, CATH	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 186
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182251	1/27/12	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	14.00		204.12	I	
182252	1/27/12	000008	VISITING NURSE SERVICE	MEJIA, MARINA	24.00		349.92	I	
				CUSTOMER	38.00	0.00	554.04		
				CATEGORY	38.00	0.00	554.04		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 187
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182253	1/27/12	000008	VISITING NURSE SERVICE	MEJIA, ROSA	37.00		539.47	I	
				CATEGORY	37.00	0.00	539.47		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 188
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182254	1/27/12	000008	VISITING NURSE SERVICE	MELILLO, GRACE	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 189
LAA LOMBARDI AIDS ADULT POPUL
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182255	1/27/12	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	15.75		229.64	I	
				CATEGORY	15.75	0.00	229.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 190
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182256	1/27/12	000008	VISITING NURSE SERVICE	MENDOLIA, ANTOI	71.50		1,042.47	I	
				CATEGORY	71.50	0.00	1,042.47		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 191
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182257	1/27/12	000008	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		568.62	I	
				CATEGORY	39.00	0.00	568.62		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 192
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182258	1/27/12	000008	VISITING NURSE SERVICE	MENDOZA, VALENT	15.75		229.64	I	
				CATEGORY	15.75	0.00	229.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 193
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182259	1/27/12	000008	VISITING NURSE SERVICE	MILEO, MARY	19.50		284.31	I	
182260	1/27/12	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	6.00		87.48	I	
				CUSTOMER	25.50	0.00	371.79		
				CATEGORY	25.50	0.00	371.79		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 194
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182261	1/27/12	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	4.00		58.32	I	
182262	1/27/12	000008	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40	I	
				CUSTOMER	34.00	0.00	495.72		
				CATEGORY	34.00	0.00	495.72		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 195
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182263	1/27/12	000008	VISITING NURSE SERVICE	MOODY, CORRINE	4.00		58.32	I	
182264	1/27/12	000008	VISITING NURSE SERVICE	MOORE, JOSEPH	9.00		131.22	I	
					-----	-----	-----		-----
				CUSTOMER	13.00	0.00	189.54		
					-----	-----	-----		-----
				CATEGORY	13.00	0.00	189.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 196
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182265	1/27/12	000008	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 197
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182266	1/27/12	000008	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36	I	
				CATEGORY	42.00	0.00	612.36		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 198
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182267	1/27/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	82.50		1,202.85	I	
				CATEGORY	82.50	0.00	1,202.85		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 199
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182268	1/27/12	000008	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36	I	
182269	1/20/12	000008	VISITING NURSE SERVICE	NARANJO, HENRY	4.00		58.32	I	
182270	1/27/12	000008	VISITING NURSE SERVICE	NARANJO, HENRY	1.00		14.58	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	47.00	0.00	685.26		
				-----	-----	-----	-----	-----	-----
				CATEGORY	47.00	0.00	685.26		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 200
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182271	1/27/12	000008	VISITING NURSE SERVICE	NAVARRO, MARIA	22.50		328.05	I	
				CATEGORY	22.50	0.00	328.05		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 201
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182272	1/27/12	000008	VISITING NURSE SERVICE	NELLINI, MARY	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 202
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182273	1/27/12	000008	VISITING NURSE SERVICE	NIDO, MICHAEL	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 203
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182274	1/27/12	000008	VISITING NURSE SERVICE	NIETO RAMOS, JO	63.00		918.54	I	
				CATEGORY	63.00	0.00	918.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 204
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182275	1/27/12	000008	VISITING NURSE SERVICE	NIEVES, NANCY	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 205
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182276	1/27/12	000008	VISITING NURSE SERVICE	NIGRO, CATHERIN	8.00		116.64	I	
				CATEGORY	8.00	0.00	116.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 206
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182277	1/27/12	000008	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 207
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182278	1/27/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	29.00		422.82	I	
182279	1/27/12	000008	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		495.72	I	
				CUSTOMER	63.00	0.00	918.54		
				CATEGORY	63.00	0.00	918.54		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 208
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182280	1/27/12	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
182281	1/13/12	000008	VISITING NURSE SERVICE	OCHOA, LUIS	7.00		102.06	I	
182282	1/27/12	000008	VISITING NURSE SERVICE	OCHOA, LUIS	43.00		626.94	I	
182283	1/20/12	000008	VISITING NURSE SERVICE	ORTEGA, CARLOS	6.00		87.48	I	
182284	1/27/12	000008	VISITING NURSE SERVICE	ORTEGA, CARLOS	11.00		160.38	I	
182285	1/27/12	000008	VISITING NURSE SERVICE	ORTIZ, LILIA	30.00		437.40	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	146.00	0.00	2,128.68		
				-----	-----	-----	-----	-----	-----
				CATEGORY	146.00	0.00	2,128.68		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 209
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182286	1/27/12	000008	VISITING NURSE SERVICE	ORTIZ, TULA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 210
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182287	1/27/12	000008	VISITING NURSE SERVICE	OSPINA, ANA	8.00		116.64	I	
182288	1/27/12	000008	VISITING NURSE SERVICE	PANASKAROLIDIS,	26.25		382.73	I	
182289	1/27/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I	
182290	1/27/12	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	5.75		83.84	I	
182291	1/27/12	000008	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
182292	1/20/12	000008	VISITING NURSE SERVICE	PARETTI, MARIE	8.00		116.64	I	
182293	1/27/12	000008	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	157.00	0.00	2,289.07		
				-----	-----	-----	-----	-----	-----
				CATEGORY	157.00	0.00	2,289.07		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 211
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182294	1/27/12	000008	VISITING NURSE SERVICE	PARK, SUNG	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 212
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182295	1/27/12	000008	VISITING NURSE SERVICE	PARTAGAS, ANA	17.00		247.86	I	
				CATEGORY	17.00	0.00	247.86		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 213
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182296	1/27/12	000008	VISITING NURSE SERVICE	PENA, VICTORIA	40.25		586.85	I	
182297	1/27/12	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	20.00		291.60	I	
				CUSTOMER	60.25	0.00	878.45		
				CATEGORY	60.25	0.00	878.45		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 214
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182298	1/27/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 215
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182299	1/27/12	000008	VISITING NURSE SERVICE	PEREZ, DOMINGA	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 216
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182300	1/27/12	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 217
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182301	1/27/12	000008	VISITING NURSE SERVICE	PEREZ, JOAQUIN	6.00		87.48	I	
182302	1/27/12	000008	VISITING NURSE SERVICE	PERSAUD, RITA	49.00		714.42	I	
				CUSTOMER	55.00	0.00	801.90		
				CATEGORY	55.00	0.00	801.90		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 218
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182303	1/27/12	000008	VISITING NURSE SERVICE	PHILIPPS, MARY	48.00		699.84	I	
182304	1/27/12	000008	VISITING NURSE SERVICE	PIZARRO, BARBAR	3.00		43.74	I	
182305	1/27/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	25.00		364.50	I	
182306	1/27/12	000008	VISITING NURSE SERVICE	PLACIDO, MERCED	29.25		426.47	I	
182307	1/27/12	000008	VISITING NURSE SERVICE	POGGI, EMERITA	35.75		521.24	I	
				CUSTOMER	141.00	0.00	2,055.79		
				CATEGORY	141.00	0.00	2,055.79		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 219
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182308	1/27/12	000008	VISITING NURSE SERVICE	POLISHOOK, FRAN	5.75		83.84	I	
				CATEGORY	5.75	0.00	83.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 220
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182309	1/27/12	000008	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 221
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182310	1/27/12	000008	VISITING NURSE SERVICE	PUISELLO, CIRA	28.75		419.18	I	
182311	1/27/12	000008	VISITING NURSE SERVICE	PULLIZA, DIANNE	31.00		451.98	I	
				CUSTOMER	59.75	0.00	871.16		
				CATEGORY	59.75	0.00	871.16		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 222
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182312	1/27/12	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 223
LAP LOMBARDI AIDES PEDIATRIC
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182313	1/27/12	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 224
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182314	1/27/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	43.00		626.94	I	
182315	1/27/12	000008	VISITING NURSE SERVICE	RAMLALL, LILOWT	25.00		364.50	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 225
AUR ADULT REHAB ONLY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182316	1/27/12	000008	VISITING NURSE SERVICE	RAMOS, JENNIFER	44.75		652.46	I	
				CATEGORY	44.75	0.00	652.46		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 226
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182317	1/27/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96	I	
182318	1/27/12	000008	VISITING NURSE SERVICE	RANDAZZO, ROSAL	16.00		233.28	I	
				CUSTOMER	28.00	0.00	408.24		
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 227
AMH ADULT MENTAL HEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182319	1/27/12	000008	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 228
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182320	1/27/12	000008	VISITING NURSE SERVICE	REINA, JOSE	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 229
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182321	1/27/12	000008	VISITING NURSE SERVICE	RICOTTA, SAVERI	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 230
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182322	1/27/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, OL	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 231
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182323	1/27/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	48.00		699.84	I	
				CATEGORY	48.00	0.00	699.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 232
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182324	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, CARMEN	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 233
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182325	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, ERESMIN	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 234
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182326	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 235
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182327	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 236
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182328	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, LEONOR	6.00		87.48	I	
182329	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, RAQUEL	24.00		349.92	I	
				CUSTOMER	30.00	0.00	437.40		
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 237
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182330	1/27/12	000008	VISITING NURSE SERVICE	RIVERA, WANDA	52.50		765.45	I	
182331	1/27/12	000008	VISITING NURSE SERVICE	ROBERTS, SARAH	12.00		174.96	I	
				CUSTOMER	64.50	0.00	940.41		
				CATEGORY	64.50	0.00	940.41		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 238
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182332	1/27/12	000008	VISITING NURSE SERVICE	ROBINSON, MARGA	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 239
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182333	1/27/12	000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 240
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182334	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, FERM	14.50		211.41	I	
				CATEGORY	14.50	0.00	211.41		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 241
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182335	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 242
AUR ADULT REHAB ONLY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182336	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ISAB	10.00		145.80	I	
				CATEGORY	10.00	0.00	145.80		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 243
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182337	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72	I	
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 244
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182338	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	5.00		72.90	I	
				CATEGORY	5.00	0.00	72.90		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 245
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182339	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 246
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182340	1/27/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	40.00		583.20	I	
182341	1/27/12	000008	VISITING NURSE SERVICE	ROLON, JUANITA	21.00		306.18	I	
				CUSTOMER	61.00	0.00	889.38		
				CATEGORY	61.00	0.00	889.38		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 247
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182342	1/27/12	000008	VISITING NURSE SERVICE	ROMERO, HERNAN	21.00		306.18	I	
				CATEGORY	21.00	0.00	306.18		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 248
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182343	1/27/12	000008	VISITING NURSE SERVICE	ROMERO, SANTHY	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 249
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182344	1/27/12	000008	VISITING NURSE SERVICE	ROMO, FLOR	56.00		816.48	I	
182345	1/27/12	000008	VISITING NURSE SERVICE	ROSA, ANA	40.00		583.20	I	
					-----	-----	-----		-----
				CUSTOMER	96.00	0.00	1,399.68		
					-----	-----	-----		-----
				CATEGORY	96.00	0.00	1,399.68		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 250
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182346	1/27/12	000008	VISITING NURSE SERVICE	ROSA, LUZ E	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 251
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182347	1/27/12	000008	VISITING NURSE SERVICE	ROSA, MANOLO	12.00		174.96	I	
182348	1/27/12	000008	VISITING NURSE SERVICE	ROSARIO, ELSA	30.00		437.40	I	
182349	1/27/12	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	14.75		215.06	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	56.75	0.00	827.42		
				-----	-----	-----	-----	-----	-----
				CATEGORY	56.75	0.00	827.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 252
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182350	1/27/12	000008	VISITING NURSE SERVICE	ROSEN, BESSIE	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 253
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182351	1/27/12	000008	VISITING NURSE SERVICE	RUEDA, INES	46.75		681.62	I	
				CATEGORY	46.75	0.00	681.62		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 254
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182352	1/27/12	000008	VISITING NURSE SERVICE	RUFFEN, SANDRA	31.75		462.92	I	
				CATEGORY	31.75	0.00	462.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 255
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182353	1/13/12	000008	VISITING NURSE SERVICE	RUSO, MONICA	6.00		87.48	I	
182354	1/27/12	000008	VISITING NURSE SERVICE	RUSO, MONICA	70.00		1,020.60	I	
				CUSTOMER	76.00	0.00	1,108.08		
				CATEGORY	76.00	0.00	1,108.08		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 256
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182355	1/27/12	000008	VISITING NURSE SERVICE	SAAVEDRA, STELL	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 257
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182356	1/27/12	000008	VISITING NURSE SERVICE	SAKELL, CHRYSAN	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 258
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182357	1/27/12	000008	VISITING NURSE SERVICE	SALADIN, MARIA	77.00		1,122.66	I	
				CATEGORY	77.00	0.00	1,122.66		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 259
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182358	1/27/12	000008	VISITING NURSE SERVICE	SALCEDO, JOSE	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 260
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182359	1/27/12	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88	I	
				CATEGORY	36.00	0.00	524.88		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 261
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182360	1/27/12	000008	VISITING NURSE SERVICE	SALVUCCI, YOLAN	16.00		233.28	I	
182361	1/27/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	20.00		291.60	I	
182362	1/27/12	000008	VISITING NURSE SERVICE	SANCHEZ, LIDIA	47.00		685.26	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	83.00	0.00	1,210.14		
				-----	-----	-----	-----	-----	-----
				CATEGORY	83.00	0.00	1,210.14		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 262
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182363	1/27/12	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 263
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182364	1/27/12	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	20.00		291.60	I	
182365	1/27/12	000008	VISITING NURSE SERVICE	SEGOVIA, BEATRI	42.00		612.36	I	
				CUSTOMER	62.00	0.00	903.96		
				CATEGORY	62.00	0.00	903.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 264
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182366	1/27/12	000008	VISITING NURSE SERVICE	SEO, INJA	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 265
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182367	1/27/12	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	55.50		809.20	I	
182368	1/27/12	000008	VISITING NURSE SERVICE	SERRANO, AGUEDA	56.00		816.48	I	
				CUSTOMER	111.50	0.00	1,625.68		
				CATEGORY	111.50	0.00	1,625.68		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 266
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182369	1/27/12	000008	VISITING NURSE SERVICE	SEXTON, MARY	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 267
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182370	1/27/12	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	42.00		612.36	I	
182371	1/27/12	000008	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	4.00		58.32	I	
				CUSTOMER	46.00	0.00	670.68		
				CATEGORY	46.00	0.00	670.68		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 268
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182372	1/27/12	000008	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36	I	
				CATEGORY	42.00	0.00	612.36		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 269
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182373	1/27/12	000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40	I	
182374	1/27/12	000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70	I	
				CUSTOMER	45.00	0.00	656.10		
				CATEGORY	45.00	0.00	656.10		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 270
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182375	1/27/12	000008	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90	I	
				CATEGORY	5.00	0.00	72.90		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 271
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182376	1/27/12	000008	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 272
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182377	1/27/12	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 273
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182378	12/30/11	000008	VISITING NURSE SERVICE	STAMBOULIDIS, V	6.50		94.77	I	
182379	1/27/12	000008	VISITING NURSE SERVICE	STAMBOULIDIS, V	55.25		805.55	I	
				CUSTOMER	61.75	0.00	900.32		
				CATEGORY	61.75	0.00	900.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 274
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182380	1/27/12	000008	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18	I	
				CATEGORY	21.00	0.00	306.18		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 275
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182381	1/27/12	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	6.00		87.48	I	
182382	1/27/12	000008	VISITING NURSE SERVICE	STICKELL, BLANC	20.50		298.89	I	
				CUSTOMER	26.50	0.00	386.37		
				CATEGORY	26.50	0.00	386.37		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 276
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182383	1/27/12	000008	VISITING NURSE SERVICE	STICKELL, BLANC	14.00		204.12	I	
182384	1/27/12	000008	VISITING NURSE SERVICE	STROBL, ALFRED	30.00		437.40	I	
				CUSTOMER	44.00	0.00	641.52		
				CATEGORY	44.00	0.00	641.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 277
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182385	1/27/12	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	24.00		349.92	I	
				CATEGORY	24.00	0.00	349.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 278
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182386	1/27/12	000008	VISITING NURSE SERVICE	TABICKMAN, DORO	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 279
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182387	1/27/12	000008	VISITING NURSE SERVICE	TABOADA, ELIZAB	54.25		790.98	I	
				CATEGORY	54.25	0.00	790.98		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 280
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182388	1/27/12	000008	VISITING NURSE SERVICE	TADDEO, LENA	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 281
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182389	1/27/12	000008	VISITING NURSE SERVICE	TAVANO, SILVIA	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 282
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182390	1/27/12	000008	VISITING NURSE SERVICE	TAVERAS ARIAS,	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 283
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182391	1/27/12	000008	VISITING NURSE SERVICE	TAWADROUS, ANWA	5.00		72.90	I	
182392	1/27/12	000008	VISITING NURSE SERVICE	TEJADA, BALDOME	16.00		233.28	I	
				CUSTOMER	21.00	0.00	306.18		
				CATEGORY	21.00	0.00	306.18		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 284
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182393	1/27/12	000008	VISITING NURSE SERVICE	TEMBELIS, DAPHN	15.00		218.70	I	
				CATEGORY	15.00	0.00	218.70		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 285
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182394	1/27/12	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	35.00		510.30	I	
				CATEGORY	35.00	0.00	510.30		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 286
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182395	1/27/12	000008	VISITING NURSE SERVICE	TISHCOFF, HERTA	6.00		87.48	I	
182396	1/27/12	000008	VISITING NURSE SERVICE	TORO VEGA, LUZV	15.50		226.00	I	
				CUSTOMER	21.50	0.00	313.48		
				CATEGORY	21.50	0.00	313.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 287
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182397	1/27/12	000008	VISITING NURSE SERVICE	TORO, PURA	84.00		1,224.72	I	
182398	1/27/12	000008	VISITING NURSE SERVICE	TORRES, LUZ M	69.50		1,013.31	I	
				CUSTOMER	153.50	0.00	2,238.03		
				CATEGORY	153.50	0.00	2,238.03		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 288
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182399	1/13/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	6.00		87.48	I	
182400	1/27/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		612.36	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 289
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182401	1/27/12	000008	VISITING NURSE SERVICE	TROVATO, MILLIE	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 290
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182402	1/27/12	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	15.75		229.64	I	
182403	1/27/12	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	55.75		812.84	I	
				CUSTOMER	71.50	0.00	1,042.48		
				CATEGORY	71.50	0.00	1,042.48		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 291
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182404	1/27/12	000008	VISITING NURSE SERVICE	TSUAI, PING	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 292
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182405	1/27/12	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	53.50		780.03	I	
182406	1/27/12	000008	VISITING NURSE SERVICE	UGURLUYAN, KARA	7.00		1,224.72	I	
				CUSTOMER	60.50	0.00	2,004.75		
				CATEGORY	60.50	0.00	2,004.75		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 293
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182407	1/27/12	000008	VISITING NURSE SERVICE	URBINA, ANA	34.75		506.66	I	
				CATEGORY	34.75	0.00	506.66		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 294
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182408	1/27/12	000008	VISITING NURSE SERVICE	URENA, MARIA	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 295
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182409	1/27/12	000008	VISITING NURSE SERVICE	VALENCIANO-ROJ,	35.50		517.59	I	
				CATEGORY	35.50	0.00	517.59		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 296
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182410	1/27/12	000008	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64	I	
				CATEGORY	8.00	0.00	116.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 297
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182411	1/27/12	000008	VISITING NURSE SERVICE	VAROL, ELMAS	4.00		58.32	I	
182412	1/27/12	000008	VISITING NURSE SERVICE	VAROL, MUSTAFA	4.00		58.32	I	
				CUSTOMER	8.00	0.00	116.64		
				CATEGORY	8.00	0.00	116.64		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 298
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182413	1/27/12	000008	VISITING NURSE SERVICE	VASCO, ANGELA	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 299
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182414	1/27/12	000008	VISITING NURSE SERVICE	VASQUEZ, ARTURO	45.25		659.75	I	
				CATEGORY	45.25	0.00	659.75		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 300
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182415	1/27/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		481.14	I	
182416	1/27/12	000008	VISITING NURSE SERVICE	VASQUEZ, RAPHAEL	21.00		306.18	I	
182417	1/27/12	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	94.00	0.00	1,370.52		
				-----	-----	-----	-----	-----	-----
				CATEGORY	94.00	0.00	1,370.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 301
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182418	1/27/12	000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	15.50		225.99	I	
				CATEGORY	15.50	0.00	225.99		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 302
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182419	1/27/12	000008	VISITING NURSE SERVICE	VENTURA, ROSA	44.50		648.81	I	
				CATEGORY	44.50	0.00	648.81		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 303
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182420	1/27/12	000008	VISITING NURSE SERVICE	VERAS, JUANA	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 304
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182421	1/27/12	000008	VISITING NURSE SERVICE	VICEDO, FREDELI	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 305
HOA HOSPICE ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182422	1/27/12	000008	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60	I	
				CATEGORY	20.00	0.00	291.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 306
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182423	1/27/12	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	22.00		320.76	I	
				CATEGORY	22.00	0.00	320.76		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 307
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182424	1/27/12	000008	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 308
LTC NURSING HOMEW/O WALLS (LT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182425	1/27/12	000008	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40	I	
				CATEGORY	30.00	0.00	437.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 309
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182426	1/27/12	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	66.50		969.57	I	
182427	1/27/12	000008	VISITING NURSE SERVICE	WALLE, ILEANA	20.00		291.60	I	
				CUSTOMER	86.50	0.00	1,261.17		
				CATEGORY	86.50	0.00	1,261.17		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 310
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182428	1/27/12	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	30.00		437.40	I	
182429	1/27/12	000008	VISITING NURSE SERVICE	WOLOWSKI, ROBER	1.00		14.58	I	
				CUSTOMER	31.00	0.00	451.98		
				CATEGORY	31.00	0.00	451.98		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 311
VCP CHOICE LHCSA
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182430	1/27/12	000008	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 312
CCL CONGREGATE CARE PROGRAM
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182431	1/27/12	000008	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96	I	
				CATEGORY	12.00	0.00	174.96		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 313
ADU ADULT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182432	1/27/12	000008	VISITING NURSE SERVICE	ZAMBRANO, CRUZM	28.00		408.24	I	
182433	1/27/12	000008	VISITING NURSE SERVICE	ZAMBRANO, VICTO	21.00		306.18	I	
				CUSTOMER	49.00	0.00	714.42		
				CATEGORY	49.00	0.00	714.42		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
 SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
 S A L E S R E G I S T E R

PAGE 1 - 314
 GUI GUILDNET
 BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182434	1/27/12	000010	GUILDNET	ACERNO, CLAIRE	15.00		199.20	I	
182435	1/27/12	000010	GUILDNET	ALI, AMRUNISSA	20.00		265.60	I	
182436	1/27/12	000010	GUILDNET	AMABILE, ANTOIN			1,260.00	I	
182437	1/27/12	000010	GUILDNET	AYALA, ENRIQUE	53.50		925.64	I	
182438	1/27/12	000010	GUILDNET	BEGUM, JAMILA	71.50		949.52	I	
182439	1/27/12	000010	GUILDNET	BUCARO, CONCETT	44.00		584.32	I	
182440	1/27/12	000010	GUILDNET	CEPEDA, TOMASA	30.00		398.40	I	
182441	1/27/12	000010	GUILDNET	COLAVITTI, JEAN	56.00		743.68	I	
182442	1/27/12	000010	GUILDNET	DIAZ, ALICIA	45.00		597.60	I	
182443	1/27/12	000010	GUILDNET	DONOSO, MARGARE	24.00		318.72	I	
182444	1/27/12	000010	GUILDNET	EARLINGTON, ALB	40.00		531.20	I	
182445	1/27/12	000010	GUILDNET	ECKMAN, LOIS	7.00		1,260.00	I	
182446	1/27/12	000010	GUILDNET	ESCOBAR, DOMING	30.00		398.40	I	
182447	1/27/12	000010	GUILDNET	ESPINOZA, MARIA	43.50		577.68	I	
182448	1/27/12	000010	GUILDNET	EXPOSITO, ALFON	38.00		504.64	I	
182449	1/27/12	000010	GUILDNET	FELICIANO, JOAN	38.00		504.64	I	
182450	1/13/12	000010	GUILDNET	FERNANDEZ, ANA	32.00		424.96	I	
182451	1/27/12	000010	GUILDNET	FERRO, JOSEPHIN	70.00		929.60	I	
182452	12/16/11	000010	GUILDNET	GREENSPAN, ALIC	38.00		504.64	I	
182453	1/27/12	000010	GUILDNET	HUSTIU, SILVIA	3.00		39.84	I	
182454	1/27/12	000010	GUILDNET	JIMENEZ, EUGENI	78.50		1,042.48	I	
182455	1/27/12	000010	GUILDNET	JOHNSON, DOROTH	62.75		833.32	I	
182456	1/27/12	000010	GUILDNET	LATVIS, CHARLES	7.00		1,260.00	I	
182457	1/27/12	000010	GUILDNET	MANGRAY, KARMAD	50.00		664.00	I	
182458	1/27/12	000010	GUILDNET	MARTINEZ, EMMA	36.00		478.08	I	
182459	1/27/12	000010	GUILDNET	MARTINEZ, GLORI	27.00		358.56	I	
182460	1/27/12	000010	GUILDNET	MICHEL, DOROTHY	56.00		743.68	I	
182461	1/27/12	000010	GUILDNET	MOSCICKA, JADWI	24.00		318.72	I	
182462	1/27/12	000010	GUILDNET	MUSCAT, CARMEN	25.00		332.00	I	
182463	1/27/12	000010	GUILDNET	NETTLES, DONNA	11.75		156.04	I	
182464	1/27/12	000010	GUILDNET	NEWBOLD, RAMONA	25.00		332.00	I	
182465	1/27/12	000010	GUILDNET	NISHIMURA, ALBE	66.00		876.48	I	
182466	1/27/12	000010	GUILDNET	NUNEZ, ANGELINA	26.00		345.28	I	
182467	1/06/12	000010	GUILDNET	NUNEZ, ANGELINA	1.00		85.00	I	
182468	1/20/12	000010	GUILDNET	NUNEZ, IRIS	1.00		13.28	I	
182469	1/27/12	000010	GUILDNET	ORTIZ, LAURA	62.75		833.32	I	
182470	1/27/12	000010	GUILDNET	PAPHITIS, RICHA	40.00		531.20	I	
182471	1/27/12	000010	GUILDNET	PAZIOULIS, GEOR	42.00		557.76	I	
182472	1/27/12	000010	GUILDNET	PAZIOULIS, KLEO	30.00		398.40	I	
182473	1/27/12	000010	GUILDNET	PENA, WALESKA	56.00		743.68	I	
182474	1/27/12	000010	GUILDNET	PEREZ, MARIA	12.00		159.36	I	
182475	1/27/12	000010	GUILDNET	PICHARDO, MARIA	63.00		836.64	I	
182476	1/27/12	000010	GUILDNET	PROANO, ALICIA	15.00		199.20	I	
182477	1/27/12	000010	GUILDNET	PROANO, BRUNO	29.00		385.12	I	
182478	1/27/12	000010	GUILDNET	PRYCE, CLYDIA	16.00		212.48	I	
182479	1/27/12	000010	GUILDNET	RESTULA, VINCEN	20.00		265.60	I	
182480	1/27/12	000010	GUILDNET	RIVAS, GERTRUDI	12.00		159.36	I	
182481	1/27/12	000010	GUILDNET	RODRIGUEZ, HOLG	63.00		836.64	I	
182482	1/27/12	000010	GUILDNET	ROJAS, ANGEL	15.00		199.20	I	

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 2 - 315
GUI GUILDNET
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182483	1/27/12	000010	GUILDNET	ROJAS, HAYDEE	20.00		265.60	I	
182484	1/27/12	000010	GUILDNET	RUBIANO, MARIA	16.00		212.48	I	
182485	1/27/12	000010	GUILDNET	SALJANIN, DILJA	61.00		810.08	I	
182486	1/20/12	000010	GUILDNET	SANCHEZ, ELIZAB	47.00		624.16	I	
182487	1/27/12	000010	GUILDNET	SHELTON, AGUEDA	28.00		371.84	I	
182488	12/23/11	000010	GUILDNET	SOMRAJ, UMILLA	5.00		66.40	I	
182489	1/27/12	000010	GUILDNET	TOROSSIAN, PARI	27.75		368.52	I	
182490	1/27/12	000010	GUILDNET	VILLACRES, LUZ	8.00		106.24	I	
182491	1/27/12	000010	GUILDNET	VLAHOS, MARIE	70.00		929.60	I	
182492	1/27/12	000010	GUILDNET	WEISZ, KLARA	7.00		92.96	I	
182493	1/27/12	000010	GUILDNET	WEST, BALDWIN	20.00		265.60	I	
182494	1/27/12	000010	GUILDNET	WHITLEY, MYRNA	20.00		265.60	I	
182495	1/27/12	000010	GUILDNET	YI, CARLOS	24.00		318.72	I	
182496	1/27/12	000010	GUILDNET	YIANTSELIS, VIR	7.00		1,260.00	I	
182497	1/27/12	000010	GUILDNET	ZARE, GLORIA	50.50		670.64	I	
182498	1/27/12	000010	GUILDNET	ZUMAETA, FANNY	64.00		849.92	I	
				CUSTOMER	2,153.50	0.00	33,553.52		
				CATEGORY	2,153.50	0.00	33,553.52		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 316
HFS HEALTH FIRST
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182499	1/27/12	000122	HEALTH FIRST	AUER, BARBARA	20.00		337.60	I	
182500	12/09/11	000122	HEALTH FIRST	BEGUM, MANWARA	36.00		607.68	I	
182501	1/27/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
182502	1/20/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	46.00		776.48	I	
182503	1/27/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
182504	1/27/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
182505	1/27/12	000122	HEALTH FIRST	CEBALLOS, ANA	32.00		540.16	I	
182506	1/27/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
182507	1/27/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
182508	1/27/12	000122	HEALTH FIRST	DORNELLAS, STEL	24.00		405.12	I	
182509	1/27/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	24.00		405.12	I	
182510	1/27/12	000122	HEALTH FIRST	ESTEVEZ, JOSE	63.00		1,063.44	I	
182511	1/27/12	000122	HEALTH FIRST	FERGERSON, TINA	35.00		590.80	I	
182512	1/27/12	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
182513	1/27/12	000122	HEALTH FIRST	FONTANES, PEDRO	28.00		472.64	I	
182514	1/27/12	000122	HEALTH FIRST	FRANCISCO, RICH	47.00		793.36	I	
182515	1/27/12	000122	HEALTH FIRST	HENRY, BRENDA	12.00		202.56	I	
182516	1/27/12	000122	HEALTH FIRST	HERRING, CHARLE	8.00		135.04	I	
182517	1/27/12	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	I	
182518	1/27/12	000122	HEALTH FIRST	LARA, TOMASA	28.00		472.64	I	
182519	1/27/12	000122	HEALTH FIRST	LAZALA, GLADYS	72.00		1,215.36	I	
182520	1/27/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	22.00		371.36	I	
182521	1/27/12	000122	HEALTH FIRST	MACARENA, SAHAR	63.00		1,063.44	I	
182522	1/27/12	000122	HEALTH FIRST	MARTIN, ARIANA	12.00		202.56	I	
182523	1/27/12	000122	HEALTH FIRST	RIVERA, CHRISTO	21.00		354.48	I	
182524	1/27/12	000122	HEALTH FIRST	RIVERA, EDDIE	21.00		354.48	I	
182525	1/27/12	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
182526	1/27/12	000122	HEALTH FIRST	RUIZ JR, SAMUEL	17.00		286.96	I	
182527	1/27/12	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
182528	1/27/12	000122	HEALTH FIRST	SALHUANA, YOLAN	20.00		337.60	I	
182529	1/27/12	000122	HEALTH FIRST	SPIVEY, PATRICI	12.00		202.56	I	
182530	1/27/12	000122	HEALTH FIRST	ST ROMAINE, CLA	66.00		1,114.08	I	
182531	1/27/12	000122	HEALTH FIRST	SURIEL, GERTRUD	4.00		67.52	I	
182532	1/20/12	000122	HEALTH FIRST	TEJADA, PAULA	48.00		810.24	I	
182533	1/27/12	000122	HEALTH FIRST	WILLIAMS, RODNE	24.00		405.12	I	
				CUSTOMER	1,149.00	0.00	19,395.12		
				CATEGORY	1,149.00	0.00	19,395.12		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 317
NHP NEIGHBORHOOD HEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182534	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	AHMED, UMARA	56.00		945.28	I	
182535	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	AKHTAR, SELINA	36.00		607.68	I	
182536	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	ARDITTO, PATRIC	30.00		506.40	I	
182537	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	BRATHWAITE, DON	35.00		590.80	I	
182538	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
182539	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
182540	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
182541	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
182542	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	45.00		759.60	I	
182543	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHALIL, RASHAN	29.00		489.52	I	
182544	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHAN, FARUQUE	30.00		506.40	I	
182545	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHERIN	35.00		590.80	I	
182546	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
182547	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	35.00		590.80	I	
182548	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	21.00		354.48	I	
182549	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
182550	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	56.00		945.28	I	
182551	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SANCHEZ, CHRIST	9.00		151.92	I	
182552	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
182553	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
182554	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
182555	1/27/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	28.00		472.64	I	
				CUSTOMER	777.00	0.00	13,115.76		
				CATEGORY	777.00	0.00	13,115.76		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 318
FID NY CATHOLIC/FIDELIS
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182556	1/27/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	63.00		1,063.44	I	
182557	1/27/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	40.00		675.20	I	
182558	1/27/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	28.00		472.64	I	
182559	1/06/12	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	29.00		489.52	I	
182560	1/27/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.92	I	
182561	1/27/12	000126	NYS CATHOLIC/FIDELIS	MULLOKONDOVA, S	15.00		253.20	I	
182562	1/13/12	000126	NYS CATHOLIC/FIDELIS	OLIVAPUIG, CARM	4.00		67.52	I	
182563	1/27/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,063.44	I	
182564	1/27/12	000126	NYS CATHOLIC/FIDELIS	PEREZ, MARIA E	16.00		270.08	I	
182565	1/27/12	000126	NYS CATHOLIC/FIDELIS	ROMERO AYALA, A	32.00		540.16	I	
182566	1/27/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	37.00		624.56	I	
182567	1/13/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	38.00		641.44	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	449.00	0.00	7,579.12		
				-----	-----	-----	-----	-----	-----
				CATEGORY	449.00	0.00	7,579.12		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 319
UHC UNITED HEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182568	1/27/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	49.00		840.84	I	
182569	1/27/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	38.00		652.08	I	
182570	1/27/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	56.00		960.96	I	
182571	1/27/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I	
182572	1/27/12	000128	UNITED HEALTH CARE	SANTOS, MILAGRO	20.00		343.20	I	
182573	1/27/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I	
182574	1/27/12	000128	UNITED HEALTH CARE	ZANE, GEORGE	15.00		257.40	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	262.00	0.00	4,495.92		
				-----	-----	-----	-----	-----	-----
				CATEGORY	262.00	0.00	4,495.92		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 320
EHP EMBLEM HEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182575	1/27/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
182576	1/27/12	000114	EMBLEM HEALTH	COPELAND, ELISE	21.25		302.81	I	
182577	1/20/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	31.50		441.00	I	
182578	1/27/12	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,176.00	I	
182579	1/27/12	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		168.00	I	
182580	1/27/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	288.75	0.00	4,047.81		
				-----	-----	-----	-----	-----	-----
				CATEGORY	288.75	0.00	4,047.81		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 321
HIP HEALTH INSURANCE PLAN
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182581	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL	14.00		236.32	I	
182582	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	BORLAZA, FRANCI	84.00		1,417.92	I	
182583	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	CIPRIAN, JACQUE	7.75		130.82	I	
182584	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	DE JESUS, TIBUR	63.00		1,063.44	I	
182585	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	GOMES, AGUSTINA	54.00		911.52	I	
182586	1/13/12	000136	HEALTH INSURANCE PLAN OF NY	LOYOLA, MARIA	59.75		1,008.58	I	
182587	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	ORR, LOUISE	30.00		506.40	I	
182588	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	PARADISE, ANITA	24.00		405.12	I	
182589	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	SHAH, HANSIKABE	4.00		67.52	I	
182590	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	TOWLES, ADA	16.00		270.08	I	
182591	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	WILLIAMS, DIANE	20.00		337.60	I	
182592	1/27/12	000136	HEALTH INSURANCE PLAN OF NY	ZAMBRANO, ZOILA	8.00		135.04	I	
				CUSTOMER	384.50	0.00	6,490.36		
				CATEGORY	384.50	0.00	6,490.36		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 322
HPS HEALTH PLUS
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182593	1/27/12	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	24.00		408.00	I	
182594	1/27/12	000138	HEALTH PLUS PHSP, INC	VAZQUEZ, ARCADI	12.00		204.00	I	
182595	1/27/12	000138	HEALTH PLUS PHSP, INC	VEGA, GLORIA	33.00		561.00	I	
182596	1/27/12	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	25.00		425.00	I	
182597	1/27/12	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	18.00		306.00	I	
				CUSTOMER	112.00	0.00	1,904.00		
				CATEGORY	112.00	0.00	1,904.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 323
AFF AFFINITY HEALTH PLUS
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182598	1/27/12	000142	AFFINITY HEALTH PLUS	HERNANDEZ, ANTO	3.25		78.00	I	
182599	1/27/12	000142	AFFINITY HEALTH PLUS	PURNELL, ROSE M	28.00		672.00	I	
182600	1/27/12	000142	AFFINITY HEALTH PLUS	VAMVAKAS, SOPHI	33.00		792.00	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	64.25	0.00	1,542.00		
				-----	-----	-----	-----	-----	-----
				CATEGORY	64.25	0.00	1,542.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 324
MPH METROPLUS HEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182601	1/13/12	000130	METROPLUS HEALTH	ABBAS, SENOWARA	96.00		1,646.40	I	
182602	1/27/12	000130	METROPLUS HEALTH	ANDERSON, BETH	42.00		720.30	I	
182603	1/27/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I	
182604	1/27/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	29.00		497.35	I	
182605	1/27/12	000130	METROPLUS HEALTH	BESANT, NAOMI	25.00		428.75	I	
182606	1/27/12	000130	METROPLUS HEALTH	BRACERO, HELEN	56.00		960.40	I	
182607	1/27/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS	77.00		1,320.55	I	
182608	1/27/12	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25	I	
182609	1/27/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	69.00		1,183.35	I	
182610	1/27/12	000130	METROPLUS HEALTH	CYNTHIA, CYNTHI	12.00		205.80	I	
182611	1/27/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	121.00		2,075.15	I	
182612	1/27/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
182613	1/27/12	000130	METROPLUS HEALTH	GALAS, TERESA	37.00		634.55	I	
182614	1/27/12	000130	METROPLUS HEALTH	MANIACI, VINCEN	84.00		1,440.60	I	
182615	1/27/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	33.00		565.95	I	
182616	1/27/12	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I	
182617	1/27/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA	40.00		686.00	I	
182618	1/27/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	12.00		205.80	I	
182619	1/20/12	000130	METROPLUS HEALTH	SANTORO, MATTHE	48.00		823.20	I	
182620	1/27/12	000130	METROPLUS HEALTH	VALLE, BLASINA	44.00		754.60	I	
				CUSTOMER	999.00	0.00	17,132.85		
				CATEGORY	999.00	0.00	17,132.85		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 325
WEL WELCARE OF NY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182621	1/27/12	000124	WELCARE OF NEW YORK, INC.	GENAO, DANIELA	55.00		946.00	I	
182622	1/27/12	000124	WELCARE OF NEW YORK, INC.	MARTINEZ, MARIA	42.00		722.40	I	
182623	1/27/12	000124	WELCARE OF NEW YORK, INC.	RAMIREZ, ALIDA	62.50		1,075.00	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	159.50	0.00	2,743.40		
				-----	-----	-----	-----	-----	-----
				CATEGORY	159.50	0.00	2,743.40		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 326
NPS NY PRESBYTERIAN SELECT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182624	1/27/12	000134	NY-PRESBYTERIAN SYSTEM SELECT	KARASSAVIDIS, A	35.00		600.60	I	
				CATEGORY	35.00	0.00	600.60		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 327
AMG AMERIGROUP
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182625	1/13/12	000132	AMERIGROUP	FERNANDEZ, NORK	52.00		877.24	I	
182626	1/27/12	000132	AMERIGROUP	GUERRA, LORRAIN	70.00		1,180.90	I	
182627	1/27/12	000132	AMERIGROUP	PRUITT, JOHNNY	8.00		134.96	I	
				-----	-----	-----	-----	-----	-----
				CUSTOMER	130.00	0.00	2,193.10		
				-----	-----	-----	-----	-----	-----
				CATEGORY	130.00	0.00	2,193.10		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 328
PAR PRIVATE
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182628	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	BURY, GLADYS	4.00		58.00	I	
182629	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	BUTLER, MARY	4.00		58.00	I	
182630	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	MAZZA, ROLAND	4.00		58.00	I	
182631	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, MARIA	4.00		58.00	I	
182632	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, TIRSO	4.00		58.00	I	
182633	1/27/12	000002	SUNNYSIDE COMMUNITY SERVICES	SAK, FIRDEVS	5.75		83.38	I	
				CUSTOMER	25.75	0.00	373.38		
182634	1/27/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I	
182635	1/27/12	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	25.00		344.75	I	
182636	1/27/12	000049	ELIZABETH SETON PEDIATRIC CTR	MORSHELINA, NAS	9.00		124.11	I	
				CUSTOMER	34.00	0.00	468.86		
182637	1/27/12	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
182638	1/27/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	94.75	0.00	2,614.24		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 329
CAS CHILDREN'S AID SOCIETY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182639	1/27/12	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	25.00		387.50	I	
182640	1/27/12	000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	4.00		62.00	I	
182641	1/27/12	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	4.00		62.00	I	
182642	1/27/12	000088	CHILDREN'S AID SOCIETY	JOHNSON, CAMRYN	20.00		310.00	I	
182643	1/27/12	000088	CHILDREN'S AID SOCIETY	REDDICK, LORENZ	16.00		248.00	I	
182644	1/13/12	000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	3.00		46.50	I	
182645	1/20/12	000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	3.00		46.50	I	
182646	1/27/12	000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	16.00		248.00	I	
182647	1/27/12	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	24.00		372.00	I	
				-----	-----	-----	-----		
				CUSTOMER	115.00	0.00	1,782.50		
				-----	-----	-----	-----		
				CATEGORY	115.00	0.00	1,782.50		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 330
GHC GIRLING HEALTH CARE OF NY
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182648	12/09/11	000090	GIRLING HEALTH CARE OF NY	ALEKSANDROVA, S	6.00		78.00	I	
182649	1/13/12	000090	GIRLING HEALTH CARE OF NY	ALEKSANDROVA, S	12.00		156.00	I	
182650	1/20/12	000090	GIRLING HEALTH CARE OF NY	ALEKSANDROVA, S	6.00		78.00	I	
182651	1/13/12	000090	GIRLING HEALTH CARE OF NY	GOVERDOVSKIY, N	2.00		26.00	I	
				CUSTOMER	26.00	0.00	338.00		
				CATEGORY	26.00	0.00	338.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 331
PAR PRIVATE
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182652	1/27/12	000098	MILDRED PANSE	PANSE, MILDRED	16.00		248.00	I	
				CATEGORY	16.00	0.00	248.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 332
ELD ELDERSERVEHEALTH
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182653	1/27/12	000101	ELDERSERVEHEALTH	BEAN, ELMIRA	16.00		216.00	I	
182654	1/27/12	000101	ELDERSERVEHEALTH	BLACK, DOROTHY	16.00		216.00	I	
				CUSTOMER	32.00	0.00	432.00		
				CATEGORY	32.00	0.00	432.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 333
PAR PRIVATE
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182655	1/27/12	000143	ETTORE COPPOLA	COPPOLA, ETTORE	15.50		245.50	I	
182656	1/13/12	000145	LARRY EISENBERG	BERGER, TESS	1.00		17.00	I	
182657	1/27/12	000145	LARRY EISENBERG	BERGER, TESS	53.00		848.50	I	
				CUSTOMER	54.00	0.00	865.50		
				CATEGORY	69.50	0.00	1,111.00		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 334
CCM COMPREHENSIVE CARE MGMT
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182658	1/27/12	000150	COMPREHENSIVE CARE MANAGEMENT	ROSARIO, CELEST	36.00		472.32	I	
				CATEGORY	36.00	0.00	472.32		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 335
PAR PRIVATE
BILL WEEK ENDING 2/03/12

INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
182659	1/27/12	000151	MICHAEL SIANO	SIANO, ANDREW	20.00		270.00	I	
182660	1/20/12	000153	PATRICIA RUECKHER	RUECKHER, PATRI	3.00		46.50	I	
182661	1/27/12	000153	PATRICIA RUECKHER	RUECKHER, PATRI	15.00		232.50	I	
			CUSTOMER		18.00	0.00	279.00		
182662	1/27/12	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I	
182663	1/27/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
182664	1/27/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		322.00	I	
182665	1/27/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I	
182666	1/27/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00		337.50	I	
182667	1/27/12	006337	STEPHEN EDEL	EDEL, CANDACE	32.50		515.75	I	
182668	1/27/12	007521	DOROTHY GILBERT	GILBERT, DOROTH	30.00		465.00	I	
182669	1/27/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I	
182670	1/27/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I	
182671	1/27/12	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	6.00		99.00	I	
182672	1/27/12	009036	MR. FERNANDO RIVERA	RIVERA, ALCIRA	9.00		139.50	I	
182673	1/27/12	009226	ALZHEIMER'S ASSOCIATION	CARDENAS, GUSTA	8.00		124.00	I	
182674	1/27/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
182675	1/27/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	9.00		139.50	I	
182676	1/27/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	6.00		93.00	I	
182677	1/27/12	997760	MARASA, ANTONIO	MARASA, ANTONIO	9.00		121.50	I	
			CATEGORY		418.50	0.00	6,516.75		
			LOCATION		21,622.00	0.00	330,512.12		
			COMPANY		21,622.00	0.00	330,512.12		

RUN DATE 02/01/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0266 LOC 001 SUNNYSIDE CITYWIDE

REG NY NY
S A L E S R E G I S T E R

PAGE 1 - 336
PAR PRIVATE
BILL WEEK ENDING 2/03/12

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

THIS PAGE INTENTIONALLY BLANK