RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 9/28/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS SENIOR HEALTH PARTNERS
SIMON, LUPE
SENIOR HEALTH PARTNERS
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SIMON, LUPE
SENIOR HEALTH PARTNERS
SENIOR H 210038 9/21/12 000082 28.50 I 210039 9/21/12 000082 57.00 I 570.00 I 210040 9/21/12 000082 210041 9/21/12 000082 199.50 210042 9/21/12 000082 498.75 210043 498.75 9/21/12 000082 28.50 210044 5/25/12 000082 210045 6/08/12 000082 14.25 210046 8/03/12 000082 71.25 210047 8/17/12 000082 14.25 210048 9/21/12 000082 456.00 210049 9/21/12 000082 1,400.00 210050 9/21/12 000082 285.00 210051 9/14/12 000082 527.25 210052 9/21/12 000082 1,923.76 210053 9/21/12 470.25 000082 210054 9/21/12 28.50 000082 210055 9/21/12 000082 1,083.00 210056 285.00 9/21/12 000082 210057 9/21/12 000082 356.25 210058 9/21/12 000082 114.00 210059 9/21/12 000082 570.00 210060 9/21/12 000082 114.00 210061 9/21/12 57.00 I 000082 _____ _____ CUSTOMER 586.00 0.00 9,650.76

CATEGORY

586.00 0.00

9,650.76

		- SUP SUNN	YSIDE CITYWIDE	REG NY NY			PAGE 1		2
SALES JRN	ь # 0300	TOC 001	SUNNYSIDE CITYWIDE S A	REGNY NY ALES REGISTER			VCP CHOICE LH BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210062	9/21/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	8.00		116.64	I	
210063	9/14/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
210064	9/21/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
210065	9/21/12	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	33.50		488.44	I	
210066	9/21/12	800000	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
210067	9/21/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
210068	9/21/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	69.25		1,009.67	I	
210069	9/21/12	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	55.25		805.55	I	
210070	9/21/12	800000	VISITING NURSE SERVICE	AFZAL, AMIR	4.00		58.32	I	
				CUSTOMER	254.00	0.00	3,703.34		
				CATEGORY	254.00	0.00	3,703.34		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	3
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210071	9/07/12	000008	VISITING NURSE SERVICE	AGUILAR, ZORAID	7.00		102.06	I	
210072	9/21/12	800000	VISITING NURSE SERVICE	•	45.00		656.10	I	
				CUSTOMER	52.00	0.00	758.16		
				CATEGORY	52.00	0.00	758.16		

		- SUP SUNN LOC 001		REG NY NY			PAGE 1 - ADU ADULT	4
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210073	9/14/12	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	7.00		102.06 I	
				CATEGORY	7.00	0.00	102.06	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	5
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
				SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210074	9/14/12	000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	7.00		102.06 I	
210075	9/21/12	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	34.75		506.66 I	
210076	9/21/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60 I	
				CUSTOMER	61.75	0.00	900.32	
				CATEGORY	61.75	0.00	900.32	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
210077	9/21/12	800000	VISITING NURSE SERVICE	ALBANO, JEANNIN	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY S A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOMEV BILL WEEK ENDING	·
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210078	9/21/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	35.00		510.30 I	
				 CATEGORY	35.00	0.00	510.30	

RUN DATE		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	8
DILLEO CIUV	I 0500	100 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210079	9/21/12	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	24.50		357.21 I	
				CATEGORY	24.50	0.00	357.21	

			YSIDE CITYWIDE				PAGE 1 -	9
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	9/28/12
				SALES REGISIER			BILL MEEK ENDING	9/20/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210080	9/21/12	000008	VISITING NURSE SERVICE	ALMANZAR, REMIG	1.00		14.58 I	
210081	9/21/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	23.25		338.99 I	
				GUGEOMED.			252 57	
				CUSTOMER	24.25	0.00	353.57	
				CATEGORY	24.25	0.00	353.57	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 1	0
SALES OWN	ш # 0500	HOC 001		SALES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP	SURPLUS
210082 210083	9/14/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	3.00 9.00		43.74 131.22	I I	
				CUSTOMER	12.00	0.00	174.96		
				CATEGORY	12.00	0.00	174.96		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	
				SALES REGISTER			BILL WEEK ENDIN	IG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210084	9/21/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	53.25		776.40 I	
				CATEGORY	53.25	0.00	776.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	_	L2
SALES URN	ш # 0300	TOC 001		REGNI NI BALES REGISTER	2		BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210085	9/21/12	000008	VISITING NURSE SERVICE	ANANIA, GLYGERI	20.00		291.60	I	
210086	9/21/12	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	20.00		291.60	I	
210087	9/21/12	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	83.25		1,213.80	I	
210088	9/21/12	000008	VISITING NURSE SERVICE	ANDREWS, JOHNNI	56.00		816.48	I	
210089	9/21/12	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	28.00		408.24	I	
				CUSTOMER	207.25	0.00	3,021.72		
				CATEGORY	207.25	0.00	3,021.72		

RUN DATE 09	9/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	3
SALES JRNL	# 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING F	HOMEW/	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210090	9/21/12	000008	VISITING NURSE SERVICE	ANGULO, ELCY	16.00		233.28	I	
210091	9/21/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	61.00		889.38	I	
				CUSTOMER	77.00	0.00	1,122.66		
				CATEGORY	77.00	0.00	1,122.66		

RUN DATE SALES JRN	,		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	14
SALES UKN	ш # 0300	LOC 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210092	9/14/12	000008	VISITING NURSE SERVICE	AOUN, ODETTE	6.00		87.48	I
210093	9/21/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	22.25		324.41	
210094	9/21/12	800000	VISITING NURSE SERVICE	ARGENTINA, CESS	8.00		116.64	
210095	9/21/12	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	46.00		670.68 I	[
				CUSTOMER	82.25	0.00	1,199.21	
				CATEGORY	82.25	0.00	1,199.21	

			YSIDE CITYWIDE	DEC NY NY			11100	- 15
SALES JRNI	ь # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENI	OING 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
210096 210097	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		16.00 12.00		233.28 174.96	I I
				CUSTOMER	28.00	0.00	408.24	
				CATEGORY	28.00	0.00	408.24	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
			\$	SALES REGISTER			BILL WEEK END	OING 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
210098	9/07/12	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	7.00		102.06	I
210099	9/14/12	800000	VISITING NURSE SERVICE	ASHLEY, CLYDE	8.00		116.64	I
210100	9/21/12	800000	VISITING NURSE SERVICE	ASHLEY, CLYDE	54.00		787.32	I
							1 005 00	
				CUSTOMER	69.00	0.00	1,006.02	
				CATEGORY	69.00	0.00	1,006.02	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.7
DALLO OIUV	ш т озоо	100 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210101	9/21/12	800000	VISITING NURSE SERVICE	AVILES, LEONARD	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

				YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOMEW	18 V/O WALLS (LT
					SALES REGISTER			BILL WEEK ENDING	9/28/12
INV	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210	0102	9/21/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	16.00		233.28 I	
					CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	19
BALLS OIL	н 0500	HOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210103 210104	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	12.00 35.00		174.96 I 510.30 I	
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00	685.26	

RUN DATE SALES JRN	,	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	20 MEW/O WALLS (LT NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	P SURPLUS
210105 210106 210107 210108	9/21/12 9/21/12 9/21/12 9/21/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BALLAS, VIOLA BAQUERIZO, ANNA BARDEANU, VICTO BATTLE, JEANETT	30.00 55.00 44.75 50.50		437.40 801.90 652.46 736.30	[[[
				CUSTOMER	180.25	0.00	2,628.06	
				CATEGORY	180.25	0.00	2,628.06	

	PAGE 1 - 21
	ADU ADULT BILL WEEK ENDING 9/28/12
EFERENCE HOURS TAX	AMT AMOUNT TYP SURPLUS
ZAN, VICTORIA 42.00	612.36 I
CERRA, FELIPE 56.00	816.48 I
CIISTOMER 98 00 0	.00 1,428.84
00010111111	1,120.01
CATEGORY 98.00 0	.00 1,428.84
R A	REGISTER REFERENCE HOURS TAX AZAN, VICTORIA 42.00 ECERRA, FELIPE 56.00 CUSTOMER 98.00 0

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		22
SALES OWN	ш # 0300	HOC 001		SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210111 210112	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	150.50 3.00		2,194.29 43.74	I I	
				CUSTOMER	153.50	0.00	2,238.03		
				 CATEGORY	153.50	0.00	2,238.03		

			YSIDE CITYWIDE				PAGE 1 - 2	3
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	•
			2	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210113	9/07/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	6.00		87.48 I	
210114	9/14/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	19.00		277.02 I	
210115	9/21/12	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	33.00		481.14 I	
				CUSTOMER	58.00	0.00	845.64	
				CATEGORY	58.00	0.00	845.64	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	24
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210116	9/21/12	800000	VISITING NURSE SERVICE	BHATT, JYOTI	35.50		517.59 I	
				CATEGORY	35.50	0.00	 517.59	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 25	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT	
				SALES REGISTER			BILL WEEK ENDI	ING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS	
010115	0 / 0 1 / 1 0				05 00		264 50	_	
210117	9/21/12	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	25.00		364.50	I	
				GA EEGODY	25 00	0.00	264 50		
				CATEGORY	25.00	0.00	364.50		

RUN DATE 0			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	-	26
	., 0500	200 001		SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	9/21/12	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	48.75			I	
	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BIANCO HOPKINS, BIERD, MARIA	16.00 9.00		233.28 131.22	I T	
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		VIDITING NONDE DENVIOL	·					
				CUSTOMER	73.75	0.00	1,075.28		
				CATEGORY	73.75	0.00	1,075.28		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	17
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210121	9/21/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	28	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A	
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
ı										
ı	210122	9/21/12	000008	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	22.00		320.76 I		
ı										
ı										
ı					CATEGORY	22.00	0.00	320.76		

RUN DATE 09/26/12						PAGE 1	-	29
SALES JRNL # 0300) LOC 001		REG NY NY	_		ADU ADULT		0 /00 /10
		2	SALES REGISTER	Κ.		BILL WEEK END)ING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210123 9/21/12	2 000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	12.00		174.96	I	
210124 8/31/12	2 000008	VISITING NURSE SERVICE	BOJORQUEZDECHA,	12.00		174.96	I	
210125 9/21/12	2 000008	VISITING NURSE SERVICE	BOJORQUEZDECHA,	36.00		524.88	I	
210126 9/21/12	000008	VISITING NURSE SERVICE	BONILLA, ESPERA	49.25		718.07	I	
			CUSTOMER	109.25	0.00	1,592.87		
			CATEGORY	109.25	0.00	1,592.87		

			NYSIDE CITYWIDE					30
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210127	9/21/12	000008	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	31
	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW,	O WALLS (LT
				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	210128	9/21/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	20.00		291.60 I	
ı									
1					CATEGORY	20.00	0.00	291.60	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	32
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
ı									
ı	210129	9/21/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
ı									
ı									
ı					CATEGORY	12.00	0.00	174.96	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 33	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
				SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210130	9/21/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30 I	
				CAMEGODY	35 00	0.00	F10 20	
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 -	34
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	-
				SALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210131	9/21/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	36.00		524.88	I
210132	9/07/12	800000	VISITING NURSE SERVICE	BRACERO, HELEN	12.00		174.96	I
				CUSTOMER	48.00	0.00	699.84	
				CODICIENT	10.00	0.00	033.01	
				CATEGORY	48.00	0.00	699.84	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210133	9/14/12	000008	VISITING NURSE SERVICE	BRACERO, HELEN	12.00		174.96	I
210134	9/21/12	000008	VISITING NURSE SERVICE	BRACERO, HELEN	36.00		524.88	I
210135	9/14/12	800000	VISITING NURSE SERVICE	BRENES, POLDA	2.00		29.16	I
210136	9/21/12	800000	VISITING NURSE SERVICE	BRENES, POLDA	4.00		58.32	I
				CUSTOMER	54.00	0.00	787.32	
				CATEGORY	54.00	0.00	787.32	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 36	
ı	SALES JRN	L # 0300	LOC 001		REG NY NY			VCP CHOICE LHC		
ı				:	SALES REGISTER			BILL WEEK ENDI	ING 9/28/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
ı	INVOICE#	DAIE	COSI NO	COSTOMER NAME	REF ERENCE	CAUUA	IAN AMI	AMOUNT	IP SURPLUS	
	210137	9/21/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		131.22	I	
ı										
ı					CA EFFCORY	0.00	0.00	121 00		
ı					CATEGORY	9.00	0.00	131.22		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	37
SALES OIL	н 0300	ПОС 001		ALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210138 210139	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BURITICA, INES BURKS, MAMIE	12.00 1.00		174.96 I 14.58 I	
				CUSTOMER	13.00	0.00	189.54	
				CATEGORY	13.00	0.00	189.54	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	38	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A	
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
ı										
ı	210140	9/21/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	56.00		816.48 I		
ı										
ı										
ı					CATEGORY	56.00	0.00	816.48		

R	UN DATE (09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	39
S	ALES JRNI	և # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
				:	SALES REGISTER			BILL WEEK ENDING	9/28/12
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
2	10141	9/21/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	58.00		845.64 I	
					CATEGORY	58.00	0.00	845.64	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	40	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A	
ı				Ş	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
ı										
ı	210142	9/21/12	800000	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80 I		
ı										
ı										
ı					CATEGORY	10.00	0.00	145.80		

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	41
011220 01411	_	200 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210143 210144	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 60.50		218.70 I 882.10 I	
				CUSTOMER	75.50	0.00	1,100.80	
				CATEGORY	75.50	0.00	1,100.80	

RUN DATE 09		SUP SUNNY	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		42
SALES UKILL	# 0300 1	LOC 001		SALES REGISTER			BILL WEEK ENI		9/28/12
INVOICE#	DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
		800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		38.25 55.75		557.69 812.84	I	
				CUSTOMER	94.00	0.00	1,370.53		
				CATEGORY	94.00	0.00	1,370.53		

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	43
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210147	9/21/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.25		616.01 I	
				 CATEGORY	42.25	0.00	616.01	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44
SALES JRN	L # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210148	9/21/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	83.75		1,221.08 I	
				CATEGORY	83.75	0.00	1,221.08	

RUN DA	ATE 09/26/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 45	
SALES	JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210149	9/21/12	000008	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		46
SALES URN	ш # 0300	TOC 001		ALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210150	9/14/12	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	11.00		160.38	I	
210151	9/21/12	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	76.25		1,111.73	I	
210152	9/14/12	000008	VISITING NURSE SERVICE	CARDOZA, ANAIDA	12.00		174.96	I	
210153	9/21/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	17.50		255.16	I	
210154	9/14/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
210155	9/21/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	25.00		364.50	I	
				CUSTOMER	146.75	0.00	2,139.63		
				CATEGORY	146.75	0.00	2,139.63		

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 47	
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210156	9/21/12	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	39.50		575.92 I	
				CATEGORY	39.50	0.00	 575.92	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	48
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	E W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
210157	9/21/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 4	19	
SALES JRN	L # 0300	LOC 001		REG NY NY			ADU ADULT		
			2	SALES REGISTER			BILL WEEK ENDING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
210158	9/21/12	800000	VISITING NURSE SERVICE	CARUSO, GIUSEPP	12.00		174.96 I		
				CATEGORY	12.00	0.00	174.96		

RUN DATE 09/: SALES JRNL #	26/12 - SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	50
SALES URNL #	0300 LOC 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	21/12 000008 21/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CEBALLOS, CLEME CERNILLI, MARIA	20.00		291.60 408.24	I
210160 9/.	21/12 000006	VISITING NORSE SERVICE	CERNILLI, MARIA	20.00		400.24	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	51
				SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210161	9/21/12	000008	VISITING NURSE SERVICE	CESPEDES, CRIST	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	52
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210162	9/21/12	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	53	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA	
			5	SALES REGISTER			BILL WEEK ENDI	NG 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
210163	9/21/12	000008	VISITING NURSE SERVICE	CHARLES PIERRE,	28.00		408.24	I	
				CATEGORY	28.00	0.00	408.24		

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
	210164	9/21/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	16.00		233.28 I	
ı									
ı					CATEGORY	16.00	0.00	233.28	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	55
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210165	9/21/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210166	9/21/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	20.75		302.54 I	
				CATEGORY	20.75	0.00	302.54	

			YSIDE CITYWIDE					57
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	0/20/12
			۵	ALES REGISTER			BILL MEEK ENDING	9/20/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210167	9/21/12	000008	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	58	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA		
			i	SALES REGISTER			BILL WEEK ENI	DING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
210168	9/21/12	000008	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I		
210169	9/21/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	37.00		539.46	I		
				CUSTOMER	77.00	0.00	1,122.66			
				CATEGORY	77.00	0.00	1,122.66			

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210170	9/21/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	60 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210171	9/21/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		58.32 I	
				CATEGORY	4.00	0.00		

			YSIDE CITYWIDE						51
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H		,
			i	SALES REGISTER			BILL WEEK END	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210172	9/21/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I	
210173	9/21/12	800000	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I	
210174	9/21/12	800000	VISITING NURSE SERVICE	COLON, ANTONIA	36.75		535.82	I	
				CUSTOMER	71.75	0.00	1,046.12		
				CATEGORY	71.75	0.00	1,046.12		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 62	
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE P	ROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 9/	28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
210175	9/21/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				 CATEGORY	168.00	0.00	2,449.44	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	63
SALES JRN	1T # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210176	9/21/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64
	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
					SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	210177	9/21/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE 09/2	6/12 - SUP SUN	YSIDE CITYWIDE				PAGE 1 -	65
SALES JRNL #	0300 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
		:	SALES REGISTE:	R		BILL WEEK ENDIN	G 9/28/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210178 9/1	4/12 000008	VISITING NURSE SERVICE	COSTA, ARSENE	8.00		116.64 I	
210179 9/2	1/12 000008	VISITING NURSE SERVICE	COSTA, ARSENE	53.75		783.68 I	
			CUSTOMER	61.75	0.00	900.32	
			CARRICODY	61.75	0.00	900.32	
			CATEGORY	01./5	0.00	900.32	

		- SUP SUNN LOC 001		REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	66 G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	,
210180	9/21/12	800000	VISITING NURSE SERVICE	COVALIU, SIMION	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADULT	67
SALES UKN	ц # 0300	100 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210181	9/21/12	800000	VISITING NURSE SERVICE	COX, PETRA	19.00		277.02 I	
				CATEGORY	19.00	0.00	277.02	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	68
SALES JRN	rL # 0300	LOC 001		REG NY NY			VCP CHOICE LHCS	
			5	SALES REGISTER			BILL WEEK ENDING	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
210182	9/21/12	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	60.50		882.09 I	
				CATEGORY	60.50	0.00	882.09	

ı	RUN DATE (09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
ı	SALES JRNI	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210183	9/21/12	000008	VISITING NURSE SERVICE	CRUZ, HECTOR	37.75		550.41 I	
ı									
ı									
ı					CATEGORY	37.75	0.00	550.41	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	70
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210184	9/21/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	18.75		273.38 I	
				CATEGORY	18.75	0.00	273.38	

			YSIDE CITYWIDE					71
SALES	JRNL # 0300	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	9/28/12
			'				DILL WEEK ENDING	J/ 20/ 12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210185	9/21/12	800000	VISITING NURSE SERVICE	CRUZ, LIDIA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	2
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING H	HOME W	/O WALLS LT
				S A L E S R E G I S T E R			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210186	9/21/12	800000	VISITING NURSE SERVICE	CURCIO, ANTONIA	16.00		233.28	I	
				CATEGORY	16.00	0.00	233.28		

			YSIDE CITYWIDE				-	73
SALES JRN	ш # 0300	TOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210187	9/21/12	800000	VISITING NURSE SERVICE	DABROWSKI, ALEK	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 09/26/1	.2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1	- 7	74
SALES JRNL # 030	0 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
		:	SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210188 9/07/1	.2 000008	VISITING NURSE SERVICE	DAMICO, ANGELA	5.00		72.90	I	
210189 9/14/1	.2 000008	VISITING NURSE SERVICE	DAMICO, ANGELA	5.00		72.90	I	
210190 9/21/1	.2 000008	VISITING NURSE SERVICE	DAMICO, ANGELA	25.00		364.50	I	
210191 9/21/1	.2 000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	55.75		812.84	I	
			CUSTOMER	90.75	0.00	1,323.14		
			CATEGORY	90.75	0.00	1,323.14		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	75
SALES JRN	IL # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210192	9/21/12	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210193	9/21/12	800000	VISITING NURSE SERVICE	DE LAHOZ, RUTH	14.00		204.12 I	
				CATEGORY	14.00	0.00	204.12	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	
	_	200 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
210194	9/21/12	800000	VISITING NURSE SERVICE	DE LAHOZ, RUTH	3.00		43.74	I
210195 210196	9/21/12 9/21/12	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	DEBAZALAR, ANTO DEJESUS, FELIX	18.00 25.00		262.44 364.50	I
				CUSTOMER	46.00	0.00	670.68	
				CATEGORY	46.00	0.00	670.68	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	78
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210197	9/21/12	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	37.00		539.46 I	
				CATEGORY	37.00	0.00	539.46	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYW	VIDE REG NY	NY			PAGE 1 VCP CHOICE L		79
SALES OWN	т # 0300	100 001	SOUNTSIDE CITIW	SALES	REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210198	9/21/12	000008	VISITING NURSE S	SERVICE DE	ELOSSANTOS, MA	30.00		437.40	I	
210199	9/14/12	000008	VISITING NURSE S	SERVICE DE	ELPOZO, MIGUEL	8.00		116.64	I	
210200	9/21/12	000008	VISITING NURSE S	SERVICE DE	ELPOZO, MIGUEL	28.00		408.24	I	
210201	8/31/12	000008	VISITING NURSE S	SERVICE DE	ELUCA, ANTIONE	4.00		58.32	I	
210202	9/21/12	000008	VISITING NURSE S	SERVICE DE	ELUCA, ANTIONE	24.00		349.92	I	
210203	9/21/12	000008	VISITING NURSE S	SERVICE DE	EY, KRISHNA	9.00		131.22	I	
210204	9/21/12	800000	VISITING NURSE S	SERVICE DE	EZUMARAN, REBE	57.00		831.06	I	
					CUSTOMER	160.00	0.00	2,332.80		
					CATEGORY	160.00	0.00	2,332.80		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	80
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDING	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210205	9/21/12	000008	VISITING NURSE SERVICE	DIAZ, HILDA	42.00		612.36 I	
210203	J/21/12	000000	VIBITING NORBE BERVICE	DIAZ, HILDA	12.00		012.50 1	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	– 8	1
SALES URN	ш # 0300	LOC 001		REGNI NI SALES REGISTER			BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210206	9/21/12	000008	VISITING NURSE SERVICE	DIAZ, MARIA	35.00		510.30	Т	
210207	9/21/12	000008	VISITING NURSE SERVICE	DIAZ, OLGA	52.00		758.16	Ī	
210208	9/21/12	800000	VISITING NURSE SERVICE	DIAZ, ROSA	42.00		612.36	I	
210209	9/21/12	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	74.00		1,078.92	I	
210210	9/21/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	41.75		608.72	I	
210211	9/21/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60	I	
				CUSTOMER	264.75	0.00	3,860.06		
				CATEGORY	264.75	0.00	3,860.06		

	09/26/12 - NL # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	82
SALES UK	ип # 0300	LOC 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210212	9/21/12	800000	VISITING NURSE SERVICE	DUNNING, JENNIF	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE	DEC MY NY				83
SALES JRN	L # 0300	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEV BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210213	9/21/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	37.00		539.46 I	
				CATEGORY	37.00	0.00	539.46	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	34
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210214	9/21/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	12.00		174.96 I	
				CATEGORY	12.00	0.00		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	85
SALES JRN	IL # 0300	LOC 001		REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210215	9/21/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	40.00		583.20	I	
				CATEGORY	40.00	0.00	583.20		

R	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	86	
S	SALES JRN	և # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
					SALES REGISTER			BILL WEEK ENDING	9/28/12	
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
2	210216	9/21/12	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70 I		
					CATEGORY	15.00	0.00	218.70		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 87	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE I	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 9/	′28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
210217	9/21/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 88	3
SALES JRN	1L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210218	9/21/12	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	89
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210219	9/21/12	800000	VISITING NURSE SERVICE	ESPIN, CESAR	60.50		882.09 I	
				CATEGORY	60.50	0.00	882.09	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	_	0
DALLO OIGI	ш н озоо	100 001		SALES REGISTER			BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
210220 210221	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	9.00 21.00		131.22 306.18	I I	
				CUSTOMER	30.00	0.00	437.40		
				CATEGORY	30.00	0.00	437.40		

			YSIDE CITYWIDE	DEG NW NW			PAGE 1 -	91
SALES JRN	IL # 0300	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210222	9/21/12	800000	VISITING NURSE SERVICE	FADEN, ROBIN	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

ı	RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	92
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	210223	9/21/12	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	4.00		58.32 I	
					CATEGORY	4.00	0.00	 58.32	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADULT	93 Г
	- "			SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210224	9/21/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	94
SALES URN	т # 0300	LOC UUI		ALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210225	9/21/12	000008	VISITING NURSE SERVICE	FAROUGIAS, ANGE	7.75		113.00	I
210226	9/14/12	000008	VISITING NURSE SERVICE	FAROUGIAS, EFTH	4.00		58.32	I
210227	9/21/12	800000	VISITING NURSE SERVICE	FAROUGIAS, EFTH	16.00		233.28	I
210228	9/21/12	800000	VISITING NURSE SERVICE	FAY, JULIA	25.50		371.79	I
210229	9/21/12	800000	VISITING NURSE SERVICE	FEENEY, JOHN	5.75		83.84	I
				CUSTOMER	59.00	0.00	860.23	
				CATEGORY	59.00	0.00	860.23	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	. –	95	
SALES JRN	և # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE I			
			S	SALES REGISTER			BILL WEEK EN	IDING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
210230	9/21/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	55.25		805.55	I		
				CATEGORY	55.25	0.00	805.55			

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	NL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210231	9/21/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9	7
SALES JRN	r⊾ # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210232	9/21/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	98
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210233	9/21/12	000008	VISITING NURSE SERVICE	FERRER, MARIE	7.00		102.06 I	
210234	9/21/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	15.00		218.70 I	
							200.76	
				CUSTOMER	22.00	0.00	320.76	
				CATEGORY	22.00	0.00	320.76	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	-	9
DALLO CIUI	SALES REGISTER						BILL WEEK ENI		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210235 210236 210237	9/21/12 9/21/12 9/21/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	FOLLETTO, ROSIN FONG, ALEFINA FONTEBOA, GUILL	33.00 12.00 35.00		481.14 174.96 510.30	I I I	
	-,,			CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	100
SALES JRN	1L # 0300	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTE	R		BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210238	9/21/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				- CATEGORY		0.00	816.48	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10	1
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210239	9/21/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	46.75		681.62 I	
				CATEGORY	46.75	0.00	681.62	

			YSIDE CITYWIDE					- 10	
SALES JRNL	# 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	9/21/12 9/21/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	38.00 35.00		554.04 510.30	I	
210241	J/ Z1/1Z	000000	VISITING NORSE SERVICE						
				CUSTOMER	73.00	0.00	1,064.34		
				CATEGORY	73.00	0.00	1,064.34		

			YSIDE CITYWIDE						- 10)3
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	-	NY EGISTE	D		VCP CHOICE L BILL WEEK EN		9/28/12
			•	зацьз к.	EGISIE	K		DILL MEEK EN	DING	9/20/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210242	9/14/12	800000	VISITING NURSE SERVICE	- ,	ASILA	35.00		510.30	I	
210243	9/21/12	800000	VISITING NURSE SERVICE	GAID,	ASILA	35.00		510.30	Τ	
					CUSTOMER	70.00	0.00	1,020.60		
					0001011210	, , , , ,	0.00	1,020.00		
					CATEGORY	70.00	0.00	1,020.60		

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 10 ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210244	9/07/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.05
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210245	9/21/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 09/2 SALES JRNL #	6/12 - SUP SUNN 0300 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 10 LTC NURSING HOMEW/ BILL WEEK ENDING	
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/12 000008 1/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	40.00		583.20 I 116.64 I	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 09 SALES JRNL	9/26/12 - SUP SUN # 0300 LOC 001		REG NY NY			PAGE 1 - ADU ADULT	107
		S	SALES REGISTER			BILL WEEK ENDIN	NG 9/28/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	9/21/12 000008	VISITING NURSE SERVICE	GARCIA, CARMEN	6.00		87.48	[
210249	9/21/12 000008	VISITING NURSE SERVICE	GARCIA, CARMEN	5.00		72.90	L
			CUSTOMER	11.00	0.00	160.38	
						1.60.00	
			CATEGORY	11.00	0.00	160.38	

			YSIDE CITYWIDE				PAGE 1 - 1	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING HOMEV BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210250	9/21/12	800000	VISITING NURSE SERVICE	GARCIA, OLGA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

			YSIDE CITYWIDE	DEC MY NV			PAGE 1 - 10	9
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210251	9/21/12	800000	VISITING NURSE SERVICE	GARCIA, URANIA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	10	
	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW		
				:	SALES REGISTER			BILL WEEK ENDING	9/28/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	210252	9/21/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	40.00		583.20 I		
					CATEGORY	40.00	0.00	583.20		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.11
SALES JRN	rL # 0300	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210253	9/21/12	800000	VISITING NURSE SERVICE	GENAO MOSQUE, A	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 112	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 9/28	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURF	LUS
210254	9/21/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 113	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (L	T
				SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210255	9/21/12	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	47.25		688.91 I	
				CATEGORY	47.25	0.00	688.91	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 114	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			:	SALES REGISTER			BILL WEEK ENDING 9	/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
210256	9/21/12	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	55.50		809.19 I	
				CATEGORY	55.50	0.00	809.19	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	L5
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210257	9/21/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

			YSIDE CITYWIDE					- 116
SALES J	RNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	ING 9/28/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
210258	9/21/12	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	28.00		408.24	I
				 CATEGORY	28.00	0.00	408.24	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.17
	_ " " " " " " " " " " " " " " " " " " "			SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210259	9/21/12	800000	VISITING NURSE SERVICE	GOMEZ, YINIVA	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 118	8
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210260	9/21/12	800000	VISITING NURSE SERVICE	GONGORA, MARUJA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	119
SALES UKNI	ь # 0300	LOC UUI		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210261	9/21/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

- 1				YSIDE CITYWIDE				PAGE 1 - 3	120
	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	210262	9/21/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	30.00		437.40 I	
					CATEGORY	30.00	0.00	437.40	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	21
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210263	9/21/12	000008	VISITING NURSE SERVICE	GONZALEZ, ELBA	24.00		349.93 I	
210264	9/21/12	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	21.00		306.18 I	
				CUSTOMER	45.00	0.00	656.11	
				COSTONER	43.00	0.00	030.11	
				CATEGORY	45.00	0.00	656.11	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 12 HCSA	22
			S	SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210265	9/14/12	800000	VISITING NURSE SERVICE	GOYES, ELBA	8.00		116.64	I	
210266 210267	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GOYES, ELBA GRAVER, EDNA	28.00 38.00		408.24 554.04	I	
210207	J, 21, 12	00000	VIBILING NORDE BERVICE						
				CUSTOMER	74.00	0.00	1,078.92		
				CATEGORY	74.00	0.00	1,078.92		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 123	
SALES JRN	r⊾ # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
210268	9/14/12	000008	VISITING NURSE SERVICE	GREENBAUM, MASA	4.00		58.32 I	
210269	9/21/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	46.25		674.33 I	
				CUSTOMER	50.25	0.00	732.65	
				CATEGORY	50.25	0.00	732.65	

			YSIDE CITYWIDE				PAGE 1 - 1	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS	
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210270	9/21/12	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 12	25
Brilling Grav	1 11 0300	100 001		SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210271 210272	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	'	83.75 83.75		1,221.08 1,221.08	I I	
	-,,			CUSTOMER	167.50	0.00	2,442.16		
				CATEGORY	167.50	0.00	2,442.16		

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210273	9/21/12	800000	VISITING NURSE SERVICE	HANNA, ENA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

			YSIDE CITYWIDE				PAGE 1	- 12	7
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
				SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210274	9/21/12	000008	VISITING NURSE SERVICE	HARRISON, GLORI	56.00		816.48	I	
210275	9/21/12	800000	VISITING NURSE SERVICE	HENAO, VICTORIA	24.00		349.92	I	
210276	9/21/12	800000	VISITING NURSE SERVICE	HENDY, BERNICE	29.00		422.82	I	
				CUSTOMER	100 00	0.00	1 500 00		
				CUSTOMER	109.00	0.00	1,589.22		
				CATEGORY	109.00	0.00	1,589.22		

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY BALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	28 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210277	9/21/12	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	29
Brilling Grav	11 0300	100 001		ALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210278 210279	9/07/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HERNANDEZ, JUAN HERNANDEZ, JUAN	6.00 36.00		87.48 I 524.88 I	
				CUSTOMER	42.00	0.00	612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 130 ADU ADULT)
SALES UKN	п # 0300	TOC 001		SALES REGISTER				9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210280 210281	9/14/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 26.00		87.48 I 379.08 I	
210201	9/21/12	000008	VISITING NURSE SERVICE	,				
				CUSTOMER	32.00	0.00	466.56	
				CATEGORY	32.00	0.00	466.56	

RUN DATE 09 SALES JRNL		UP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS. BILL WEEK ENDIN	A
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210283	9/21/12 0	00008 00008 00008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HERNANDEZ, MARI HERNANDEZ, MARI HERNANDEZ, MERC	6.00 3.50 36.00		87.48 I 51.03 I 524.88 I	
				CUSTOMER	45.50	0.00	663.39	
				CATEGORY	45.50	0.00	663.39	

RUN DATI	E 09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 132	
SALES J	RNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			5	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE:	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
INVOICE	m DAIL	CODI NO	COBTONER NAME	KEI EKENCE	110010	IAM ANI	AMOUNT III BORTEOD	
210285	9/21/12	800000	VISITING NURSE SERVICE	HERRERA, CLARA	23.75		346.28 I	
				CATEGORY	23.75	0.00	346.28	

RUN DATE 09	9/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 133	3
SALES JRNL	# 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING F	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210286	9/21/12	000008	VISITING NURSE SERVICE	HERRERA, HORACI	56.00		816.48	I	
210287	9/21/12	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		583.20	I	
				CUSTOMER	96.00	0.00	1,399.68		
							1 200 60		
				CATEGORY	96.00	0.00	1,399.68		

ı	RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 134	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
١				5	SALES REGISTER			BILL WEEK ENDING 9/28	3/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
	210288	9/21/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13	35
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210289	9/21/12	800000	VISITING NURSE SERVICE	ICIANO, ALFREDO	4.50		65.61 I	
				CATEGORY	4.50	0.00	 65.61	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0300	LOC 001		REG NY NY S A L E S R E G I S T E R			LAA LOMBARDI AID BILL WEEK ENDING	
								-, -,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210290	9/21/12	000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	38.00		554.04 I	
				CATEGORY	38.00	0.00	554.04	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	137
DILLEO CIUV	L 0500	100 001		SALES REGIS	TER		BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210291	9/21/12	800000	VISITING NURSE SERVICE	INSERRA, CATE	HER 46.50		677.97 I	
				CATEGOR	RY 46.50	0.00	677.97	

RUN DATE (09/26/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	138	
SALES JRNI	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LHC	SA	
			S	BALES	REGISTER			BILL WEEK ENDI	NG 9/28/12	
				_						
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
210202	0/01/10	00000	VICIDING MIDGE CEDVICE	TO	KENDED TANI KA	24 00		240 02	т	
210292	9/21/12	000008	VISITING NURSE SERVICE	15	KENDERIAN, KA	24.00		349.92	I	
					CATEGORY	24.00	0.00	349.92		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 CCL CONGREGA BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210293 210294 210295	9/07/12 9/14/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JACSO, ERZSEBET	6.00 3.00 15.00		87.48 43.74 218.70	I I I	
				CUSTOMER	24.00	0.00	349.92		
				CATEGORY	24.00	0.00	349.92		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	140
SALES JRN	L # 0300	LOC 001		REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210296	9/21/12	800000	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	35.25		513.95 I	
				CATEGORY	35.25	0.00	513.95	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	- 141 CSA
	2 11 0500	200 001		ALES REGISTER	8		BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
210297	9/21/12	800000	VISITING NURSE SERVICE	JARA DEURUCHIM,	3.00		43.74	I
210298	9/14/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	8.00		116.64	I
210299	9/21/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I
210300	9/21/12	800000	VISITING NURSE SERVICE	JEWAT, LUCILLE	77.00		1,122.66	I
210301	9/21/12	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	24.00		349.92	I
				CUSTOMER	124.00	0.00	1,807.92	
				CATEGORY	124.00	0.00	1,807.92	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	:2
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210302	9/21/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 143	3
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210303	9/21/12	000008	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	144	
١	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
١				5	SALES REGISTER			BILL WEEK ENDING	9/28/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	210304	9/21/12	000008	VISITING NURSE SERVICE	JIMENEZ, BETTY	20.00		291.60 I		
					CATEGORY	20.00	0.00	291.60		

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 145	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
ı									
ı	210305	9/21/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	33.00		481.14 I	
ı									
ı									
ı					CATEGORY	33.00	0.00	481.14	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 14 ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210306	9/21/12	800000	VISITING NURSE SERVICE	KAKOULLIS, FAY	11.00		160.38 I	
				CATEGORY	11.00	0.00	160.38	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	147	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	4	
			S	SALES REGISTER	_		BILL WEEK ENDING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS	
010000	0.401.410				4 00		50 00 -		
210307	9/21/12	800000	VISITING NURSE SERVICE	KAUR, SARD	4.00		58.32 I		
					4 00	0.00			
				CATEGORY	4.00	0.00	58.32		

RUN DATE 09/26/12 SALES JRNL # 0300		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	148
		\$	SALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210308 8/31/12 210309 9/07/12 210310 9/21/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SHARAN	8.00 8.00 48.00		116.64 116.64 699.84	I I
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	149
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210311	9/21/12	800000	VISITING NURSE SERVICE	KAUR, SHARAN	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE 0		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	50
SALES URINI	. # 0300	TOC 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	8/31/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	8.00 5.00		116.64 I 72.91 I	
				CUSTOMER	13.00	0.00	189.55	
				CATEGORY	13.00	0.00	189.55	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 15 HOA HOSPICE ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210314 210315 210316	8/17/12 9/14/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KHAN, MARGARET KHAN, MARGARET KHAN, MARGARET	6.00 15.00 16.00		87.48 I 218.70 I 233.28 I	
				CUSTOMER	37.00	0.00	539.46	
				CATEGORY	37.00	0.00	539.46	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	152
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			5	SALES REGISTER			BILL WEEK ENDING	G 9/28/12
T1770 T GT		GTTGT 370	GIIGHOMED MANG	2222224	*******		334017377	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210317	9/14/12	000008	VISITING NURSE SERVICE	KILIMLIAN, PEPR	8.00		116.64 I	
210317	9/14/12	000008	VISITING NORSE SERVICE	KILIMLIAN, PEPK	8.00		110.04 1	
				CATEGORY	8.00	0.00	116.64	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 153 ADU ADULT BILL WEEK ENDING 9	/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
210318	9/21/12	800000	VISITING NURSE SERVICE	KOSTIKIAN, MARI	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A .
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210319	9/21/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	155 NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210320	9/21/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	9.00		131.22	I
				CATEGORY	9.00	0.00	131.22	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	56
SALES JR	NL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210321	9/21/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	55.50		809.19 I	
				CATEGORY	55.50	0.00	809.19	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 15' ADU ADULT BILL WEEK ENDING	7 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210322	9/21/12	800000	VISITING NURSE SERVICE	LASAK, MICHAEL	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	158
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210323	9/21/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	31.50		459.27	I
210324	9/21/12	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	12.50		182.25	I
				CUSTOMER	44.00	0.00	641.52	
				CATEGORY	44.00	0.00	641.52	

			YSIDE CITYWIDE				PAGE 1 - 15	9
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT	0 /00 /10
			· ·	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210325	9/14/12	000008	VISITING NURSE SERVICE	LENDOIRO, JUAN	16.00		233.28 I	
210326	9/21/12	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	17.00		247.86 I	
				CUSTOMER	33.00	0.00	481.14	
				0001011111		0.00		
				CATEGORY	33.00	0.00	481.14	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 16 VCP CHOICE LHCSA BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210327 210328 210329 210330	9/21/12 9/21/12 9/21/12 9/21/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LIGARDO, SOL M LIRIANO, FRANCI LITSAS, MARTHA	56.00 29.25 68.00 19.75		816.48 I 426.47 I 991.44 I 287.96 I	
				CUSTOMER	173.00	0.00	2,522.35	
				CATEGORY	173.00	0.00	2,522.35	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 161	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			S	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210331	9/21/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	27.75		404.60 I	
				CATEGORY	27.75	0.00	404.60	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	2
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	,
			i	SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210332	9/21/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	33.25		484.79	I	
210333	9/21/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	41.50		605.07	I	
				CUSTOMER	 74.75	0.00	1,089.86		
				CATEGORY	74.75	0.00	1,089.86		

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L63	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
ı				S	SALES REGISTER			BILL WEEK ENDING	9/28/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	210334	9/21/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	66.00		962.28 I		
ı										
ı					====					
ı					CATEGORY	66.00	0.00	962.28		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	164
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210335	9/21/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 165 VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210336	9/14/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	10.00		145.80 I	
210337 210338	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LOPEZ, ANGELICA LOPEZ, GRACIELA	38.00 12.00		554.04 I 174.96 I	
210330	J/21/12	000000	VISITING NORSE SERVICE	HOPEZ, GRACIEHA				
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	56
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210339	9/21/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	35.50		517.59 I	
				CATEGORY	35.50	0.00	517.59	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	67
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210340	9/21/12	800000	VISITING NURSE SERVICE	LUCES, LETICIA	19.00		277.03 I	
				CATEGORY	19.00	0.00	277.03	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 16 ADU ADULT	58
	,,			SALES REGISTER				9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210341	9/21/12	800000	VISITING NURSE SERVICE	LUGO, JOSE	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	69
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210342	9/21/12	800000	VISITING NURSE SERVICE	LYMN, ANGIE	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	170 IG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210343	9/21/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	34.50		503.02	-
				CATEGORY	34.50	0.00	503.02	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGA	- 17	
	.2 0500	200 001		SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210344	9/14/12	800000	VISITING NURSE SERVICE		12.00		174.96	I	
210345	9/21/12	000008	VISITING NURSE SERVICE	MAGILLIGAN, LOR	30.00		437.40	Τ	
				CUSTOMER	42.00	0.00	612.36		
				CATEGORY	42.00	0.00	612.36		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210346	9/21/12	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

			YSIDE CITYWIDE	DEG NV NV			-	173
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210347 210348	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00 9.00		43.74 I 131.22 I	
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 17 HCSA	74
511225 0144	.2 0500	200 001		SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210349 210350	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	20.00		291.60 1,224.72	I	
210330	9/21/12	000008	VISITING NORSE SERVICE	MANNINO, FRANCE			1,224.72		
				CUSTOMER	27.00	0.00	1,516.32		
				CATEGORY	27.00	0.00	1,516.32		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 175	
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
				SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210351	9/21/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	48.75		710.78 I	
				CATEGORY	48.75	0.00	710.78	

RUN I	DATE 09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	176
SALES	S JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			9	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
21035	9/21/12	800000	VISITING NURSE SERVICE	MARINO, ANN	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	177
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LHCS	SA
			S	SALES	REGISTER			BILL WEEK ENDIN	IG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RI	EFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210353	9/21/12	800000	VISITING NURSE SERVICE	MAI	RMOL ESPINAL,	25.00		364.50 I	-
					CATEGORY	25.00	0.00	364.50	

RUN	N DATE 0	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L78
SAL	LES JRNL	<u> </u>	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	1/O WALLS (LT
					SALES REGISTER			BILL WEEK ENDING	9/28/12
			~~						
INV	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
010	0254	0 /01 /10	000000		W1DW01	42.00		606.04	
210	0354	9/21/12	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
					CATEGORY	43.00	0.00	626.94	
					CATEGORY	43.00	0.00	626	 .94

RUN DATE 09/26/12 SALES JRNL # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 17	79
	200 001		SALES REGISTER			BILL WEEK ENI		9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210355 9/21/12 210356 9/21/12	000008	VISITING NURSE SERVICE	,	7.75		113.00	I	
210356 9/21/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	12.00		174.96	Т	
			CUSTOMER	19.75	0.00	287.96		
			CATEGORY	 19.75	0.00	287.96		

RUN DATE	09/26/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 180	
SALES JR	NL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGR	MAS
			Ş	SALES REGISTER			BILL WEEK ENDING 9/28/3	L2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
210357	9/21/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 09 SALES JRNL			REG NY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI	
INVOICE#	DATE CUST	_	REFERENCE	HOURS	TAX AMT		YP SURPLUS
210359	9/21/12 00000 9/21/12 00000 9/21/12 00000	08 VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARTA MARTINEZ, ROSA	24.00 41.25 39.75		349.92 601.44 1,221.08	I I I
			CUSTOMER	105.00	0.00	2,172.44	
			CATEGORY	105.00	0.00	2,172.44	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L82
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١									
١	210361	9/21/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	30.00		437.40 I	
١									
١								405 40	
ı					CATEGORY	30.00	0.00	437.40	

				YSIDE CITYWIDE				PAGE 1 -	
SAL	ES JRNL	# 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				•	SALES REGISIER			BILL WEEK ENDING	9/20/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210	362	9/21/12	000008	VISITING NURSE SERVICE	MATOS, ROSA	41.75		608.72 I	
					CATEGORY	41.75	0.00	608.72	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 18	34
SALES URN.	ь # 0300	LOC UUI		SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210363 210364	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	63.00 168.00		918.54 2,449.44	I I	
				CUSTOMER	231.00	0.00	3,367.98		
				CATEGORY	231.00	0.00	3,367.98		

			YSIDE CITYWIDE				PAGE 1 -	- 185
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	ING 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
210365	9/14/12	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	8.00		116.64	I
210366	9/21/12	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48	I
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 186 ADU ADULT	
	.2 0500	200 001		SALES REGISTER			BILL WEEK ENDING 9/2	8/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
210367	9/21/12	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	
210368	9/21/12	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	30.00		437.40 I	
210369 210370	9/07/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MEJIA, MARINA MEJIA, MARINA	4.00 21.00		58.32 I 306.18 I	
				CUSTOMER	55.00	0.00	801.90	
				CATEGORY	55.00	0.00	801.90	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 188	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING 9	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
010051	0 / 0 1 / 1 0				26 55		505.00	
210371	9/21/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	36.75		535.83 I	
				CATEGORY	36.75	0.00	535.83	
				CALEGORI	30.75	0.00	333.63	

			YSIDE CITYWIDE				PAGE 1 - 1	.89
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210372	9/21/12	800000	VISITING NURSE SERVICE	MENDEZ, ADA	42.00		612.36 I	
				CATEGORY	42.00		612.36	
				CATEGORY	42.00	0.00	012.30	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	90
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210373	9/21/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	8.00		116.64 I	
ı									
ı									
ı					CATEGORY	8.00	0.00	116.64	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 191 ADU ADULT	
			Ş	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210374	9/21/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	22.00		320.76 I	
				CATEGORY	22.00	0.00	320.76	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY S A L E S R E G I S T E R			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210375	9/21/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		568.62 I	
				CATEGORY	39.00	0.00	 568.62	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 193	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING 9/	28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
210376	9/21/12	800000	VISITING NURSE SERVICE	MILEO, MARY	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 19 ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210377	9/21/12	800000	VISITING NURSE SERVICE	MIRANDA, LUIS	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 19	95
Bribbs ord	.E 0500	100 001		BALES REGISTER			BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210378 210379	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MONSERRAT, DORI MORAITIS, AGATH	6.00 25.00		87.48 364.50	I	
210379	9/21/12	000008	VISITING NURSE SERVICE	MORAIIIS, AGAIH	25.00		304.30		
				CUSTOMER	31.00	0.00	451.98		
				CATEGORY	31.00	0.00	451.98		

RUN DATE 0	9/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 196
SALES JRNL	# 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK EN	DING 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
210380	9/07/12	000008	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		87.48	I
210381	9/21/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	46.25		674.33	I
				CUSTOMER	52.25	0.00	761.81	
				CATEGORY	52.25	0.00	761.81	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 – 197	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS	$_{ m LT}$
			;	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210382	9/21/12	800000	VISITING NURSE SERVICE	MORALES, CARMEN	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	98
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210383	9/21/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	45.00		656.10 I	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	199
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210384	9/21/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	18.00		262.44 I	
				CATEGORY	18.00	0.00		

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	00
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	210385	9/21/12	000008	VISITING NURSE SERVICE	NICKELL, JEAN	19.75		287.96 I	
ı	210385	9/21/12	000008	VISITING NURSE SERVICE	NICKELL, JEAN	19.75		287.96	
ı									
ı					CATEGORY	19.75	0.00	287.96	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	201
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210386	9/21/12	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	36.00		524.88 I	
				CATEGORY	36.00	0.00	 524.88	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	202
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210387	9/21/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	54.00		787.32 I	
				CATEGORY	54.00	0.00	787.32	

RUN DATE 09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	13
SALES JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
		5	SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210388 8/24/12	800000	VISITING NURSE SERVICE	NIEVES, NANCY	9.00		131.22	I	
210389 9/14/12	000008	VISITING NURSE SERVICE	NIEVES, NANCY	10.00		145.80	I	
210390 9/21/12	000008	VISITING NURSE SERVICE	NIEVES, NANCY	30.00		437.40	I	
210391 9/21/12	000008	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60	I	
			CUSTOMER	69.00	0.00	1,006.02		
			CATEGORY	69.00	0.00	1,006.02		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 204	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	Γ
			S	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210392	9/21/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	25.50		371.79 I	
210393	9/21/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		495.72 I	
				CUSTOMER	59.50	0.00	867.51	
				CATEGORY	59.50	0.00	867.51	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 20)5
	_ "			SALES REGISTER			BILL WEEK ENI		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210394 210395	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	NUZIALE, CONCET OCHOA, LUIS	49.00 36.00		714.42 524.88	I T	
210373	J/ ZI/ IZ	000000	VIDITING NORDE BERVICE	CUSTOMER	85.00	0.00	1,239.30		
				COSTOMER	85.00	0.00	1,239.30		
				CATEGORY	85.00	0.00	1,239.30		

			YSIDE CITYWIDE					06	
SALES JRN	L # 0300	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
210396	9/21/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	50.00		729.00 I		
				CATEGORY	50.00	0.00	 729.00		

			YSIDE CITYWIDE				-	- 20	7
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		0/20/12
			S	ALES REGISTER			BILL WEEK ENI	JING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210397	9/21/12	800000	VISITING NURSE SERVICE	ORNANO, BOLIVAR	12.00		174.96	I	
210398	9/14/12	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	22.00		320.76	I	
210399	9/21/12	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	22.00		320.76	I	
210400	9/21/12	800000	VISITING NURSE SERVICE	OSPINA, ANA	8.00		116.64	I	
210401	9/21/12	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	15.00		218.70	I	
					70.00	0.00	1 151 00		
				CUSTOMER	79.00	0.00	1,151.82		
				CATEGORY	79.00	0.00	1,151.82		

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 208 ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 9/28/12	!
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	;
210402	9/21/12	000008	VISITING NURSE SERVICE	PAOLONI, MARY	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	-

RUN DATE 0: SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	SA
			S	ALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	9/21/12	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I
	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	PAPP, TEREZIA PARETTI, MARIE	3.00 56.00		43.74 816.48	I
				CUSTOMER	109.00	0.00	1,589.22	
				CATEGORY	109.00	0.00	1,589.22	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	210	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	T	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
010406	0 / 0 1 / 1 0				4 00		50.00		
210406	9/21/12	800000	VISITING NURSE SERVICE	PARTAGAS, ANA	4.00		58.32 I		
				CA EDGODY	4 00	0.00			
				CATEGORY	4.00	0.00	58.32		

			YSIDE CITYWIDE				PAGE 1 - 21	11
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210407	9/21/12	800000	VISITING NURSE SERVICE	PENA, VICTORIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 212	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 9/28/12	2
								_
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
010400	0 / 01 / 10	000000		DENII 606 WIDII	05 00		264 50 -	
210408	9/21/12	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	-
				CATEGORI	23.00	0.00	304.30	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - : ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210409	9/21/12	800000	VISITING NURSE SERVICE	PEREA, LUIS	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 21	4
SALES JRN	1L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			;	SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210410	8/31/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06	I	
210411	9/21/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	I	
210412	9/21/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	24.00		349.92	I	
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

	09/26/12 - NL # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 215 ADU ADULT BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210413	9/21/12	800000	VISITING NURSE SERVICE	PFISTER, JOSEPH	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE				-	- 21	6
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		0 / 20 / 1 2
			· ·	SALES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210414	9/21/12	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	55.00		801.90	I	
210415	9/21/12	800000	VISITING NURSE SERVICE	PIZARRO, BARBAR	6.00		87.48	I	
210416	9/21/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	20.00		291.60	I	
210417	9/21/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	36.00		524.88	I	
210418	9/21/12	000008	VISITING NURSE SERVICE	POGGI, EMERITA	30.00		437.40	I	
				CUSTOMER	147.00	0.00	2,143.26		
				CATEGORY	147.00	0.00	2,143.26		

RUN DATE 0 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 217 ADU ADULT BILL WEEK ENDING 9/	28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
210420	8/24/12 9/14/12 9/21/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	POLANCO, JUAN POLANCO, JUAN POLANCO, JUAN	8.00 16.00 20.00		116.64 I 233.28 I 291.60 I	
				CUSTOMER	44.00	0.00	641.52	
				CATEGORY	44.00	0.00	641.52	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	218
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210422	9/21/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	19
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210423	9/21/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	20
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210424	9/21/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	40.50		590.50 I	
				CATEGORY	40.50	0.00	590.50	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	21
	_			SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210425	9/14/12	800000	VISITING NURSE SERVICE	QUATTROCCHI, FI	3.00		43.74 I	
210426 210427	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	QUATTROCCHI, FI OUAY, JOSEPHINE	6.00 4.00		87.48 I 58.32 I	
210127	J/21/12	000000	VIBILING NORSE BERVICE					
				CUSTOMER	13.00	0.00	189.54	
				CATEGORY	13.00	0.00	189.54	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	22
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210428	9/21/12	800000	VISITING NURSE SERVICE	QUINTERO, INES	29.75		433.76 I	
							422 56	
				CATEGORY	29.75	0.00	433.76	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 223	3
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210429	9/21/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	49.00		714.42 I	
ı									
ı									
ı					CATEGORY	49.00	0.00	714.42	

RUN DATE 0 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 22	4
			S	SALES REGISTER			BILL WEEK END	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RAHMAN, SYEDA RAJA, HANIFA	3.00 20.00		43.74 291.60	I I	
				CUSTOMER	23.00	0.00	335.34		
				CATEGORY	23.00	0.00	335.34		

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	225
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDE	S PEDIATRIC
ı				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210432	9/21/12	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
ı									
ı									
ı					CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - 226 LTC NURSING HOMEW/O BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210433 210434	9/14/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	4.00 42.75		58.32 I 623.30 I	
				CUSTOMER	46.75	0.00	681.62	
				CATEGORY	46.75	0.00	681.62	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 227	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
				SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210435	9/21/12	000008	VISITING NURSE SERVICE	RAMLALL, LILOWT	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 09 SALES JRNL	# 0300 LOC 001		REG NY NY			PAGE 1 - 2 ADU ADULT	228
SALES URNL	# 0300 LOC 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	0/21/12 000008 0/21/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMOS, ISMAEL RAMPHAL, INDRIA	2.50 20.00		36.45 I 291.60 I	
			CUSTOMER	22.50	0.00	328.05	
			CATEGORY	22.50	0.00	328.05	

RUN DATE 09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	29
SALES JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210438 9/21/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48 I	
210439 9/21/12	000008	VISITING NURSE SERVICE	REINA, JOSE	20.00		291.60 I	
210440 9/21/12	000008	VISITING NURSE SERVICE	RICCA, MARIE	16.00		233.28 I	
210441 9/21/12	000008	VISITING NURSE SERVICE	RICE, SYDNEY	8.00		116.64 I	
			CUSTOMER	50.00	0.00	729.00	
			CATEGORY	50.00	0.00	729.00	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	230
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210442	9/21/12	800000	VISITING NURSE SERVICE	RISCO, GUILLERM	34.50		503.01 I	
				CATEGORY	34.50	0.00	503.01	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	231	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A	
			5	SALES REGISTER			BILL WEEK ENDING	G 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
010442	0 /01 /10	000000		D.T.I.I.D.T.I.T.D.1	4 00		F0 20 T		
210443	9/21/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, OL	4.00		58.32 I		
				GARRIGODY	4 00	0.00	58.32		
				CATEGORY	4.00	0.00	58.3∠		

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	232
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	210444	9/21/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
ı									
ı									
ı					CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 VCP CHOICE LHCSA	33
DILLEG GIAV	11 0300	100 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210445 210446	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, CARMEN RIVERA, ERNESTO	42.00 20.00		612.36 I 291.60 I	
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 234	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING 9	/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
010445	0 /01 /10	00000		D.T.I.T.D.1 G.D.1.G.T.D.1	00 00		001 60 -	
210447	9/21/12	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	
				CALEGORI	20.00	0.00	291.00	

	09/26/12 - NL # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 235 ADU ADULT BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210448	9/21/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE (SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - 2 LAD NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210449	9/21/12	800000	VISITING NURSE SERVICE	RIVERA, WANDA	36.50		532.17 I	
				CATEGORY	36.50	0.00	 532.17	

ı	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 237	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210450	9/21/12	000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20 I	
ı									
ı									
ı					CATEGORY	40.00	0.00	583.20	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	238
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210451	9/21/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, FERM	30.50		444.70 I	
210452	9/21/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	42.50		619.65 I	
				CUSTOMER	73.00	0.00	1,064.35	
				CATEGORY	73.00	0.00	1,064.35	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	239
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210453	9/21/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	59.00		860.22 I	
				CATEGORY	59.00	0.00	860.22	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	40
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210454	8/17/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	5.00		72.90 I	
210455	9/21/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
511225 0144	2 11 0500	200 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210456	9/14/12	000008	VISITING NURSE SERVICE		7.00		102.06 I	
210457	9/21/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	 56.00	0.00	816.48	

RUN DATE (09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 242	2
SALES JRNI	<u> </u>	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C) WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210458	9/21/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	41.25		601.43 I	
				CATEGORY	41.25	0.00	601.43	
				CATEGORI	41.23	0.00	001.43	

		NYSIDE CITYWIDE	DEC NY NY			PAGE 1 -	243
SALES JRNL #	0300 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 9/28/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	4/12 000008 1/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 56.00		116.64 816.48	I I
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 24 LTC NURSING HOMEW	O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210461	9/14/12	000008	VISITING NURSE SERVICE	•	8.00		116.64 I	
210462	9/21/12	000008	VISITING NURSE SERVICE	E ROLON, JUANITA	48.00		699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 245	5
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210463	9/21/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	47.50		692.55 I	
1				CATEGORY	47.50	0.00	692.55	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 24	6
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW/	O WALLS (LT
				SALES R	EGISTE	R		BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210464	9/21/12	000008	VISITING NURSE SERVICE	ROMO,	FLOR	52.75		769.10	I	
210465	9/21/12	800000	VISITING NURSE SERVICE	ROSA,	ANA	32.00		466.56	I	
					CUSTOMER	84.75	0.00	1,235.66		
					CATEGORY	84.75	0.00	1,235.66		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	247 G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210466	9/21/12	800000	VISITING NURSE SERVICE	ROSA, LUZ E	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE (SALES JRNI		SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S .	REG NY NY A L E S R E G I S T E R			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210467 210468 210469 210470	9/21/12 9/21/12 9/21/12 9/21/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSA, MANOLO ROSARIO, ELSA ROSARIO, MARIA ROSARIOBREU, EM	16.00 31.00 12.50 25.00		233.28 I 451.98 I 182.25 I 364.50 I	
				CUSTOMER	84.50	0.00	1,232.01	
				CATEGORY	84.50	0.00	1,232.01	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 249 ADU ADULT)
	,, ,,,,,			SALES REGISTER				9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210471	9/14/12	800000	VISITING NURSE SERVICE	RUECKHER, FREDE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	250
SALES JRN	ъ # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIE	COSI NO	COSTONER NAME	KEI EKENCE	1100105	IAX ANI	AMOUNI III	SORFLOS
210472	9/21/12	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
				GA EEGODY	47.00		685.26	
				CATEGORY	47.00	0.00	085.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 251 ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING 9/	28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
210473	9/21/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210474	9/21/12	800000	VISITING NURSE SERVICE	SAK, FIRDEVS	15.00		218.70 I	
				CATECODY	15 00		210 70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 25: ADU ADULT	3
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210475	9/21/12	000008	VISITING NURSE SERVICE	SALADIN, MARIA	44.00		641.52 I	
				CATEGORY	44.00	0.00	641.52	

RU.	N DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	254
SA	LES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				S	SALES REGISTER			BILL WEEK ENDING	9/28/12
IN	WOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
21	.0476	9/21/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
					CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE					- 25	55
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		0.400.410
			:	SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210477	9/21/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	28.00		408.24	I	
210478	9/21/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	48.00		699.85	I	
				CUSTOMER	76.00	0.00	1,108.09		
				0001011211		0.00	_,		
				GAERGODY	76.00		1 100 00		
				CATEGORY	76.00	0.00	1,108.09		

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	56
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210479	9/21/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 - 2	57
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	0 / 20 / 1 2
			2	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
010400	0 /01 /10	000000		G117G117FG 117T G1	41 85		600 80 7	
210480	9/21/12	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	41.75		608.72 I	
				CATEGORY	41.75	0.00	608.72	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
210481	9/21/12	800000	VISITING NURSE SERVICE	SARRO, MICHELE	14.75		215.06	I	
				CATEGORY	14.75	0.00	215.06		

				YSIDE CITYWIDE				PAGE 1 -	
SAI	LES JRNI	7 # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
					SALES REGISTER			BILL WEEK ENDING	9/28/12
INV	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
0.1		0 /01 /10						010 04 -	
210	0482	9/21/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	55.75		812.84 I	
					CATEGORY	55.75	0.00	812.84	

RUN DATE (09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 260	
SALES JRNI	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 9	/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
210483	9/21/12	800000	VISITING NURSE SERVICE	SEEBERGER, DOLO	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
DALLS OW	ш # 0500	HOC 001		ALES REGISTER			BILL WEEK END:	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
210484	9/21/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I
210485	9/21/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	55.00		801.91	I
210486	9/21/12	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	55.75		812.84	I
210487	9/21/12	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	34.75		506.66	I
210488	9/21/12	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	20.00		291.60	I
210489	9/14/12	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80	I
				CUSTOMER	211.50	0.00	3,083.69	
				CATEGORY	211.50	0.00	3,083.69	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 262	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
			S	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210490	9/21/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	41.75		608.72 I	
				CATEGORY	41.75	0.00	608.72	

RUN DATE 09/26/12 SALES JRNL # 0300	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 26 VCP CHOICE LHCSA	53
BILLES SIGNE II 0300	100 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210491 9/21/12	000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40 I	
210492 9/21/12	000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70 1	
			CUSTOMER	45.00	0.00	656.10	
			CATEGORY	45.00	0.00	 656.10	
210492 9/21/12	000008	VISITING NURSE SERVICE	SINGH, JAMOONIE CUSTOMER	15.00 45.00	0.00	218.70 I 	

RUN DATE 09/26/12 - SUP SUNNYS					PAGE 1 -	
SALES JRNL # 0300 LOC 001	SUNNYSIDE CITYWIDE REG N S A L E S				CCL CONGREGATE BILL WEEK ENDI	CARE PROGRAM ING 9/28/12
INVOICE# DATE CUST NO C	CUSTOMER NAME	REFERENCE	HOURS 7	TAX AMT	AMOUNT T	YP SURPLUS
210493 9/21/12 000008 V	VISITING NURSE SERVICE	SOLTYS, MICHAEL	18.25		266.09	I
210494 9/21/12 000008 V	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96	I
		CUSTOMER	30.25	0.00	441.05	
		CATEGORY	30.25	0.00	441.05	

	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	65
	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	010405	0 / 0 1 / 1 0				24.00		105 50 -	
	210495	9/21/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	34.00		495.72 I	
					CA EFFCORY	24 00	0.00	405 70	
ı					CATEGORY	34.00	0.00	495.72	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	66
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210496	9/21/12	000008	VISITING NURSE SERVICE	SOTO, MARCELINA	8.00		116.64	I	
210497	9/21/12	800000	VISITING NURSE SERVICE	STAFILIAS, EVAN	56.00		816.48	I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

			YSIDE CITYWIDE				PAGE 1 - 26'	7
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210498	9/21/12	000008	VISITING NURSE SERVICE	STALANSKI, ROBE	9.75		142.16 I	
210499	9/21/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	48.00		699.84 I	
				CUSTOMER	57.75	0.00	842.00	
				CATEGORY	57.75	0.00	842.00	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRNI	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADUL	
				SALES KEGISIEK			DIDD WEEK ENDING	3/20/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210500	9/21/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	20.50		298.89 I	
				CATEGORY	20.50	0.00	298.89	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	269
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
				SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210501	9/21/12	800000	VISITING NURSE SERVICE	STENOS, MOSHOUL	20.00		291.60 I	
210502	9/21/12	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	20.00		291.60 I	
210503	9/21/12	800000	VISITING NURSE SERVICE	STICKELL, BLANC	25.25		368.15 I	
210504	9/21/12	800000	VISITING NURSE SERVICE	STROBL, ALFRED	34.00		495.72 I	
				CUSTOMER	99.25	0.00	1,447.07	
				CATEGORY	99.25	0.00	1,447.07	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 270 ADU ADULT	
SALES UKN	ь # 0300	TOC 001		SALES REGISTER			BILL WEEK ENDING 9/28/12	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
210505	9/21/12	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	24.75		360.86 I	
								-
				CATEGORY	24.75	0.00	360.86	

RUN DATE (SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 271 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
210506 210507	9/07/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	12.00 29.50		174.96 I 430.11 I
				CUSTOMER	41.50	0.00	605.07
				CATEGORY	41.50	0.00	605.07

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	72
SALES JRN	L # 0300	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210508	9/21/12	800000	VISITING NURSE SERVICE	SYED, GHULAM	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 2' HCSA	73
	"			SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210509 210510	9/21/12 9/21/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	18.25 55.00		266.09 801.90	I	
210310	J/21/12	000000	VISITING NORSE SERVICE	,					
				CUSTOMER	73.25	0.00	1,067.99		
				CATEGORY	 73.25	0.00	1,067.99		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 274	
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O	WALLS (LT
			:	SALES REGISTE	R		BILL WEEK EN	DING 9	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
210511	9/21/12	000008	VISITING NURSE SERVICE	TADDEO, LENA	55.00		801.90	I	
210512	9/14/12	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	12.00		174.96	I	
210513	9/21/12	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	24.00		349.92	I	
				CUSTOMER	91.00	0.00	1,326.78		
				CATEGORY	91.00	0.00	1,326.78		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 275 VCP CHOICE LHCSA	
BALLS OIGN	ш н озоо	100 001		SALES REGISTER				9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210514 210515	9/21/12 9/21/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TAVERAS, BERNAR TEJADA, BALDOME	12.00 20.00		174.96 I 291.60 I	
				CUSTOMER	32.00	0.00	466.56	
				CATEGORY	32.00	0.00	 466.56	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	76
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB O	NLY
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
010516	0 / 0 1 / 1 0				0 50		100 00 -	
210516	9/21/12	000008	VISITING NURSE SERVICE	TEJADA, MARIALU	8.50		123.93 I	
					0.50		102 02	
				CATEGORY	8.50	0.00	123.93	

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	PAGE 1 - 277 ADU ADULT
SALES REGISTER	BILL WEEK ENDING 9/28/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT	AMOUNT TYP SURPLUS
210517 9/21/12 000008 VISITING NURSE SERVICE TEODORU, MIRELL 2.00	29.16 I
CATEGORY 2.00 0.00	29.16

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	278
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
				SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210518	9/21/12	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	36.00		524.88 I	
210519	9/21/12	800000	VISITING NURSE SERVICE	TINOCO, INES	28.00		408.24 I	
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 27	79
SALES JRN	L # 0300	LOC 001		REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210520	9/21/12	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 28	0
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			5	SALES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210521	9/21/12	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	24.00		349.92	I	
210522	9/21/12	000008	VISITING NURSE SERVICE	TORO, PURA	83.50		1,217.43	I	
210523	9/21/12	800000	VISITING NURSE SERVICE	TORRES, EMELINA	40.00		583.20	I	
210524	9/21/12	800000	VISITING NURSE SERVICE	TORRES, LUZ M	79.00		1,151.82	I	
				CUSTOMER	226.50	0.00	3,302.37		
				CATEGORY	226.50	0.00	3,302.37		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 281	
SALES JRI	NL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210525	9/21/12	800000	VISITING NURSE SERVICE	TORRES, MARGOT	34.50		503.01 I	
				CATEGORY	34.50	0.00	503.01	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	282
SALES UKNI	ь # 0300	LOC 001		SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210526	9/21/12	800000	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE 09/26/ SALES JRNL # 03		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 28	33
BILLE STATE II 03	70 100 001		SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210527 9/21/		VISITING NURSE SERVICE	TRUONG, TINH	20.00		291.60	I	
210528 9/21/	L2 000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	55.50		809.19	Т	
			CUSTOMER	75.50	0.00	1,100.79		
						1 100 50		
			CUSTOMER CATEGORY	75.50 	0.00	1,100.79 1,100.79		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LAD NURSING HOM BILL WEEK ENDIN	284 ME W/O WALLS LT NG 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
210529	9/21/12	800000	VISITING NURSE SERVICE	TSUAI, PING	20.00		291.60	Ι
				CATEGORY	20.00	0.00	291.60	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210530 210531 210532	9/21/12 9/14/12 9/21/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TZOUMAS, EFFIE UGURLUYAN, KARA UGURLUYAN, KARA	53.50 0.67 6.00		780.03 117.22 1,049.76	I I I	
				CUSTOMER	60.17	0.00	1,947.01		
				CATEGORY	60.17	0.00	1,947.01		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	86
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210533	9/21/12	000008	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	287
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210534	9/21/12	000008	VISITING NURSE SERVICE	VALENCIA, BERNA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	88
SALES JRN	L # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210535	9/21/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	17.75		258.80 I	
				CATEGORY	17.75	0.00	258.80	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	. – 28	19
SALES JRN	և # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGA	TE CAR	E PROGRAM
			S	SALES	REGISTER	-		BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210536	9/21/12	800000	VISITING NURSE SERVICE	VAI	LENTI, HELEN	47.75		696.20	I	
					CATEGORY	47.75	0.00	696.20		

RUN DATE 09/26/12	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 29	0
SALES JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		i	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210537 7/13/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	18.00		262.44 I	
210538 8/03/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	12.00		174.96 I	
210539 9/14/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	12.00		174.96 I	
210540 9/21/12	800000	VISITING NURSE SERVICE	VALENTIN, ALEJA	22.50		328.06 I	
			CUSTOMER	64.50	0.00	940.42	
			CATEGORY	64.50	0.00	940.42	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	291
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
ı				Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	210541	9/21/12	800000	VISITING NURSE SERVICE	VAROL, ELMAS	6.75		98.42 I	
ı									
ı									
ı					CATEGORY	6.75	0.00	98.42	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 29	2
SALES JRN	L # 0300	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210542	9/21/12	800000	VISITING NURSE SERVICE	VASQUEZ, ARTURO	27.75		404.60 I	
				CATEGORY	27.75	0.00	404.60	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 293	3
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210543	9/21/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		481.14 I	
210544	9/21/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	18.00		262.44 I	
				CUSTOMER	51.00	0.00	743.58	
				CATEGORY	51.00	0.00	743.58	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	94
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB O	NLY
			Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210545	9/21/12	800000	VISITING NURSE SERVICE	VASQUEZSOTO, AR	27.00		393.66 I	
				CATEGORY	27.00	0.00	393.66	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	295
SALES JRI	4L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210546	0 /01 /10	00000	WEGGERING NUMBER CERTIFICE	TAROTTER BORTED	40.00		F02 20 +	
210546	9/21/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 29 ADU ADULT	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	9/28/12 SURPLUS
210547	9/21/12		VISITING NURSE SERVICE		2.00	TAX ANT	29.16 I	SORFIOS
	-,,							
				CATEGORY	2.00	0.00	29.16	

ı	RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	297
١	SALES JRN	և # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				5	SALES REGISTER			BILL WEEK ENDING	9/28/12
١									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	210548	9/21/12	000008	VISITING NURSE SERVICE	VELASOUEZ, NELL	19.75		287.96 I	
ı	210346	9/21/12	000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	19.75		287.90 1	
١									
١					CATEGORY	19.75	0.00	287.96	

R	RUN DATE	09/26/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	298
S	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				Ş	SALES REGISTER			BILL WEEK ENDING	9/28/12
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
2	210549	9/21/12	800000	VISITING NURSE SERVICE	VENTURA, ROSA	49.00		714.42 I	
1					CATEGORY	49.00	0.00	714.42	

	09/26/12 - IL # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 29 ADU ADULT BILL WEEK ENDING	99 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210550	9/21/12	800000	VISITING NURSE SERVICE	VERA, ROSARIO	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 300	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING 9/28/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
210551	9/21/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	56.00		816.48 I	
								-
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 - 30	01
SALES JRN	IL # 0300	LOC UUI		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210552	9/21/12	800000	VISITING NURSE SERVICE	VERDESOTO, JUAN	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30)2
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DAME	CHICH NO	CHCEOMED NAME	DEFEDENCE	HOHDO	max amm	AMOUNT TYP	GIIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210553	9/21/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	34.00		495.72 I	
				CATEGORY	34.00	0.00	495.72	

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	03
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210554	9/21/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

- 1				YSIDE CITYWIDE					304	
	SALES JRN	L # 0300	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING	•	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	210555	9/21/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40 I		
					CATEGORY	30.00	0.00	437.40		

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	05
SALES JRN	1L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210556	9/21/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	60.00		874.80 I	
				CATEGORY	60.00	0.00	874.80	

RUN DATE 0 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	306	5
			S	SALES REGISTER			BILL WEEK ENDI	NG	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	'YP	SURPLUS
	9/21/12	800000	VISITING NURSE SERVICE	VIVAR, AARON	1.00		14.58	I	
210558	9/21/12	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		291.60		
				CUSTOMER	21.00	0.00	306.18		
				CATEGORY	21.00	0.00	306.18		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 30	7
	_	200 001		SALES REGISTER			BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
210559	9/14/12	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
210560	9/21/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74		
				CUSTOMER	6.00	0.00	87.48		
				 CATEGORY	 6.00	0.00	 87.48		

RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	8 (
SALES JRN	rL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210561	9/21/12	800000	VISITING NURSE SERVICE	WASHINGTON, JAM	3.00		43.74 I	
				 CATEGORY	3.00	0.00	43.74	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 309	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			i	SALES REGISTER			BILL WEEK ENDING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
210562	9/14/12	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	30.00		437.40 I	
210563	9/21/12	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	30.00		437.40 I	
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	1L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
010564	0 /01 /10				15 55		000 64 -	
210564	9/21/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	15.75		229.64 I	
				CATEGORY	15.75	0.00	229.64	

RUN DA'	TE 09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	11
SALES	JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			:	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210565	9/21/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

ı	RUN DATE	09/26/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 312	
ı	SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				Ş	SALES REGISTER			BILL WEEK ENDING 9/	28/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
	210566	9/21/12	800000	VISITING NURSE SERVICE	ZAMBRANO, VICTO	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0300	LOC 001		REG NY NY			AMH ADULT MENTA	
			:	SALES REGISTER			BILL WEEK ENDIN	G 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
010565	0.401.410						05.40	
210567	9/21/12	000008	VISITING NURSE SERVICE	ZELLE, EVE	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	09/26/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 31	4
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W	/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210568	9/21/12	800000	VISITING NURSE SERVICE	ZIVAN, GEOLINA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 315 SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 9/28/12 | CUILDNET | ACERNO, CLAIRE | ALI, ANKUNISSA | 26,00 | 377,52 | GUILDNET | ALI, ANKUNISSA | 26,00 | 317,52 | GUILDNET | ALI, ANKUNISSA | 26,00 | 313,12 | GUILDNET | ALI, ANKUNISSA | 26,00 | 313,12 | GUILDNET | ALI, ANKUNISSA | 26,00 | 1,016,10 | 1,321,04 | GUILDNET | BEGUIM, JANILA | 72,00 | 1,045,44 | GUILDNET | BEGUIM, JANILA | 72,00 | 1,045,44 | GUILDNET | CRASWELL, LUELL | 70,00 | 1,016,40 | 653,40 | GUILDNET | CARSWELL, LUELL | 70,00 | 1,016,40 | 929,28 | GUILDNET | COLAVITTI, JEAN | 64,00 | 929,28 | GUILDNET | COLAVITTI, JEAN | 64,00 | 929,28 | GUILDNET | COLAVITTI, JEAN | 64,00 | 929,28 | GUILDNET | DIAZ, ALICIA | 38,00 | 551,76 | GUILDNET | DIAZ, CARMEN | 30,00 | 464,64 | GUILDNET | DIAZ, CARMEN | 32,00 | 464,64 | GUILDNET | DIAZ, CARMEN | 32,00 | 464,64 | GUILDNET | DURAN, CARMEN | 39,00 | 566,28 | GUILDNET | DURAN, CARMEN | 39,00 | 566,28 | GUILDNET | DURAN, CARMEN | 39,00 | 566,28 | GUILDNET | ERALINISTON, ALE | 48,00 | 696,96 | GUILDNET | ERALINISTON, ALE | 48,00 | 665,96 | GUILDNET | ERALINISTON, ALE | GUILDNET | GUILDNET | ERALINISTON, ALE | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,34 | GUILDNET | GUILDNET | GUILDNET | GREENSPAN, ALIC | 35,00 | 56,36 | GUILDNET | GUILD REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS ACERNO, CLAIRE 25.00 210569 363.00 I 9/21/12 000010 377.52 I 210570 9/14/12 000010 210571 9/21/12 000010 210572 9/21/12 000010 210573 9/21/12 000010 210574 9/21/12 000010 210575 9/21/12 000010 210576 9/21/12 000010 210577 9/14/12 000010 210578 9/21/12 000010 210579 9/21/12 000010 210580 9/21/12 000010 210581 9/21/12 000010 210582 9/21/12 000010 210583 9/14/12 000010 210584 9/14/12 000010 210585 9/21/12 000010 210586 9/21/12 000010 210587 9/21/12 000010 210588 9/07/12 000010 210589 9/21/12 000010 210590 9/21/12 000010 210591 9/21/12 000010 210592 9/21/12 000010 210593 9/21/12 000010 210594 9/21/12 000010 210595 9/21/12 000010 9/21/12 210596 000010 210597 9/21/12 000010 210598 9/21/12 000010 210599 9/21/12 000010 210600 9/21/12 000010 210601 9/21/12 000010 210602 9/21/12 000010 210603 9/21/12 000010 210604 9/21/12 000010 210605 9/21/12 000010 210606 9/21/12 000010 210607 9/21/12 000010 210608 000010 9/21/12 210609 9/21/12 000010 GUILDNET 210610 000010 GUILDNET 9/21/12 210611 9/21/12 000010 210612 9/21/12 000010 210613 9/21/12 000010 210614 9/21/12 000010 210615 8/31/12 000010 210616 9/21/12 000010 GUILDNET 9/21/12 000010 GUILDNET 210617

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE				REG NY NY SALES REGISTER			PAGE 2 - 316			
SALES JRN	IL # 0300	LOC 001	SUNNYSIDE CITYWIDE		NY			GUI GUILDNET		
				SALES	REGISTE	R		BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CHST NO	CUSTOMER NAME	ī	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
INVOICE	DITTE	CODI NO	CODIONER WILL	•	KEI EKEIVOE	1100110	11111 11111	11100111		BOILT HOD
210618	9/21/12	000010	GUILDNET	P	AZIOULIS, KLEO	55.00		798.60	I	
210619	9/21/12	000010	GUILDNET	PI	ENA, WALESKA	53.00		769.56	I	
210620	9/21/12	000010	GUILDNET	PI	EREZ, MARIA	24.00		348.48	I	
210621	9/21/12	000010	GUILDNET	P.	INILLA, VICTOR	29.75		431.97	I	
210622	9/21/12	000010	GUILDNET	PI	RADO, NANCY	12.00		174.24	I	
210623	9/21/12	000010	GUILDNET	PI	ROANO, ALICIA	15.00		232.80	I	
210624	9/21/12	000010	GUILDNET	PI	ROANO, BRUNO	25.00		388.00	I	
210625	9/14/12	000010	GUILDNET	RZ	AMOS, ARGENTIN	4.00		58.08	I	
210626	9/21/12	000010	GUILDNET	R2	AMOS, ESTHER	18.00		261.36	I	
210627	9/21/12	000010	GUILDNET	RI	ESTULA, VINCEN	15.50		225.06	I	
210628	9/21/12	000010	GUILDNET	R.	IVAS, GERTRUDI	30.00		435.60	I	
210629	9/21/12	000010	GUILDNET	RO	ODRIGUEZ, FABI	28.00		406.56	I	
210630	9/21/12	000010	GUILDNET	RO	ODRIGUEZ, HOLG	63.00		914.76	I	
210631	9/21/12	000010	GUILDNET	RO	DJAS, ANGEL	15.00		232.80	I	
210632	9/21/12	000010	GUILDNET	RO	DJAS, HAYDEE	20.00		310.40	I	
210633	9/21/12	000010	GUILDNET	RI	JBIANO, MARIA	20.00		290.40	I	
210634	9/21/12	000010	GUILDNET	SZ	ALJANIN, DILJA	43.00		624.36	I	
210635	9/14/12	000010	GUILDNET	SZ	ANCHEZ, ELIZAB	44.50		646.14	I	
210636	9/21/12	000010	GUILDNET	SI	HELTON, AGUEDA	42.00		609.84	I	
210637	9/21/12	000010	GUILDNET	SC	OMRAJ, UMILLA	15.00		217.80	I	
210638	9/21/12	000010	GUILDNET	TI	ROISI, DELIA	48.00		696.96	I	
210639	9/21/12	000010	GUILDNET	V]	LAHOS, MARIE	64.00		929.28	I	
210640	9/21/12	000010	GUILDNET	WI	EISZ, KLARA	7.00		101.64	I	
210641	9/21/12	000010	GUILDNET	WI	EST, BALDWIN	16.00		232.32	I	
210642	8/24/12	000010	GUILDNET	WI	HITE, GLORIA	4.00		58.08	I	
210643	9/21/12	000010	GUILDNET	WI	HITLEY, MYRNA	20.00		290.40	I	
210644	9/14/12	000010	GUILDNET	Y	I, CARLOS	28.00		406.56	I	
210645	9/21/12	000010	GUILDNET	Y	IANTSELIS, VIR	6.00		1,132.32	I	
210646	9/21/12	000010	GUILDNET	Zž	ARE, GLORIA	48.00		696.96	I	
210647	9/21/12	000010	GUILDNET	Zī	JMAETA, FANNY	64.00		929.28	Ī	
	- ,, - -			2.	,					
					AZIOULIS, KLEO ENA, WALESKA EREZ, MARIA INILLA, VICTOR RADO, NANCY ROANO, BRUNO AMOS, ARGENTIN AMOS, ESTHER ESTULA, VINCEN IVAS, GERTRUDI DDRIGUEZ, FABI DDRIGUEZ, FABI DDRIGUEZ, HOLG DJAS, ANGEL DJAS, HAYDEE JBIANO, MARIA ALJANIN, DILJA ANCHEZ, ELIZAB HELTON, AGUEDA DMRAJ, UMILLA ROISI, DELIA LAHOS, MARIE EISZ, KLARA EST, BALDWIN HITE, GLORIA HITLEY, MYRNA I, CARLOS IANTSELIS, VIR ARE, GLORIA JMAETA, FANNY	2,708.50	0.00	42,886.42		
					CATEGORY	2,708.50	0.00	42,886.42		

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE			YSIDE CITYWIDE				PAGE 1	- 31	.7
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH FI	RST	
				SALES REGISTE	R		BILL WEEK END	DING	9/28/12
	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210648	9/21/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	Т	
210649	9/21/12	000122	HEALTH FIRST	BHATRO, KOWSTLT	56.00		945.28	T	
210650	9/21/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	40.00		675.20	I	
210651	9/21/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
210652	9/21/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
210653	9/14/12	000122	HEALTH FIRST	CEBALLOS, ANA	24.00		405.12	Ī	
210654	9/21/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	T	
210655	8/31/12	000122	HEALTH FIRST	CORTES DE GALIN	44.00		742.72	Ī	
210656	9/21/12	000122	HEALTH FIRST	DELACRUZ, ANA	70.00		1,181,60	I	
210657	9/21/12	000122	HEALTH FIRST	DORNELLAS, STEL	30.00		506.40	I	
210658	9/21/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	28.00		472.64	I	
210659	9/21/12	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
210660	9/21/12	000122	HEALTH FIRST	FERGERSON, TINA	40.00		675.20	I	
210661	8/31/12	000122	HEALTH FIRST	FERRERA, FRANCI	5.00		84.40	I	
210662	9/07/12	000122	HEALTH FIRST	FONTANES, PEDRO	57.00		962.16	I	
210663	9/21/12	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
210664	8/24/12	000122	HEALTH FIRST	FRIAS, BARBARA	20.00		337.60	I	
210665	9/07/12	000122	HEALTH FIRST	HENRY, BRENDA	16.00		270.08	I	
210666	9/21/12	000122	HEALTH FIRST	HERRING, CHARLE	12.00		202.56	I	
210667	9/21/12	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	I	
210668	9/14/12	000122	HEALTH FIRST	LARA, TOMASA	56.00		945.28	I	
210669	9/21/12	000122	HEALTH FIRST	LAZALA, GLADYS	42.00		708.96	I	
210670	9/21/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	77.00		1,299.76	I	
210671	9/21/12	000122	HEALTH FIRST	MACARENA, SAHAR	84.00		1,417.92	I	
210672	9/21/12	000122	HEALTH FIRST	MARTIN, ARIANA	4.00		67.52	I	
210673	9/07/12	000122	HEALTH FIRST	PALAZZOLO, FLOR	168.00		2,835.84	I	
210674	9/14/12	000122	HEALTH FIRST	RIVERA, CHRISTO	42.00		708.96	I	
210675	9/14/12	000122	HEALTH FIRST	RIVERA, EDDIE	9.00		151.92	I	
210676	9/21/12	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
210677	9/21/12	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
210678	9/21/12	000122	HEALTH FIRST	SALHUANA, YOLAN	40.00		675.20	I	
210679	9/21/12	000122	HEALTH FIRST	SPIVEY, PATRICI	22.00		371.36	I	
210680	9/21/12	000122	HEALTH FIRST	ST ROMAINE, CLA	63.00		1,063.44	I	
210681	8/31/12	000122	HEALTH FIRST	SURIEL, GERTRUD	8.00		135.04	I	
210682	9/21/12	000122	HEALTH FIRST	VASQUEZ, OLGA	20.00		337.60	I	
210683	9/21/12	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	I	
				CUSTOMER	1,486.00	0.00	25,083.68		
				REG NY NY S A L E S R E G I S T E I REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DELACRUZ, ANA DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA HERRING, CHARLE KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA PALAZZOLO, FLOR RIVERA, CHRISTO RIVE	1,486.00	0.00	25,083.68		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE F S A I	REG NY NY LES REGISTER	2		PAGE 1 NHP NEIGHBORF BILL WEEK ENI	- 31 HOOD H	
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210684	9/14/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS AHMED, UMARA	56.00		945.28	I	
210685	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS AKHTER, SELINA	42.50		717.40	I	
210686	9/14/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS CHUKWUJIORAH, T	57.00		962.16	I	
210687	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS DIAZ, CARMEN	22.00		371.36	I	
210688	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS FERNANDEZ, MARI	12.00		202.56	I	
210689	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS FLORES, MARITZA	70.00		1,181.60	I	
210690	9/14/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS HAMPTON, PRISCI	51.00		860.88	I	
210691	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS JONES, CYNTHIA	10.00		168.80	I	
210692	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KHALIL, RASHAN	36.00		607.68	I	
210693	9/14/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS KHAN, FARUQUE	96.00		1,620.48	I	
210694	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KROLL, KATHERIN	39.00		658.32	I	
210695	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS MORALES HERNAD	42.00		708.96	I	
210696	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS MOSKOWITZ, RONA	36.00		607.68	I	
210697	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ, JESS	23.00		388.24	I	
210698	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ, MARI	20.00		337.60	I	
210699	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS SALVATO, MARY	56.00		945.28	I	
210700	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS SHEPPARD, ERMA	70.00		1,181.60	I	
210701	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS WELLS, WYNORIA	16.00		270.08	I	
210702	9/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	ERS WILSON, SHERYL	38.00		641.44	I	
				AHMED, UMARA AKHTER, SELINA CHUKWUJIORAH, T DIAZ, CARMEN CHES DIAZ, CARMEN CHES FERNANDEZ, MARI CHES FLORES, MARITZA CHES HAMPTON, PRISCI CHES JONES, CYNTHIA CHES KHALIL, RASHAN CHES KHALIL, RASHAN CHES KHALL, KATHERIN CHES MORALES HERNAD CHES MORALES HERNAD CHES MORALES HERNAD CHES MORALEZ, JESS CHES RODRIGUEZ, MARI CHES SALVATO, MARY CHES SALVATO, MARY CHES SHEPPARD, ERMA CHES WILSON, SHERYL CUSTOMER	792.50	0.00	13,377.40		
				CATEGORY	792.50	0.00	13,377.40		

			YSIDE CITYWIDE					- 31	
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHOI		DELIS
				SALES REGISTER			BILL WEEK ENI	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
010703	0 /1 4 /1 0	000106	NEW CARRIOT TO ARTER TO	DARLORA TOOR	FC 00		044 70	-	
210703	9/14/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	56.00			I	
210704	9/07/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	39.00		657.93	I	
210705	9/21/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	49.00		826.63	I	
210706	9/21/12	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	24.00		404.88	I	
210707	9/21/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.08	I	
210708	9/07/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	81.00		1,366.47	I	
210709	9/21/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	12.00		202.44	I	
210710	9/21/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	41.00		691.67	I	
210711	9/21/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81	I	
				CUSTOMER	449.00	0.00	7,574.63		
				CATEGORY	449.00	0.00	7,574.63		

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE REG NY NY PAGE 1 - 320 SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY UHC UNITED HEALTH									
SALES URN	ц # 0300	LOC 001	SUNNISIDE CITIWIDE	SALES REGISTER			BILL WEEK EN		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210712	9/21/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	I	
210713	9/21/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	53.00		909.48	I	
210714	9/21/12	000128	UNITED HEALTH CARE	PAUL, PUTUL	8.00		137.28	I	
210715	9/21/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I	
210716	9/14/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	32.00		549.12	I	
				CUSTOMER	219.00	0.00	3,758.04		
				CATEGORY	219.00	0.00	3,758.04		

RUN DATE	PAGE 1 - 321								
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM H		0/20/12
				SALES REGISTER			BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210717	9/21/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	16.75		234.50	I	
210718	9/21/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
210719	9/21/12	000114	EMBLEM HEALTH	COPELAND, ELISE	40.50		577.13	I	
210720	9/21/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00	I	
210721	9/21/12	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	50.00		700.00	I	
210722	9/21/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	35.00		490.00	I	
210723	9/21/12	000114	EMBLEM HEALTH	KEATON, CATHERI	83.00		1,162.00	I	
210724	9/14/12	000114	EMBLEM HEALTH	REYNOLDS, HARRI	24.00		336.00	I	
210725	9/21/12	000114	EMBLEM HEALTH	WEATHERS, VERDE	72.00		1,008.00	I	
210726	9/21/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00	I	
				CUSTOMER	481.25	0.00	6,747.63		
				CATEGORY	481.25	0.00	6,747.63		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E	NY NY SREGISTER	2		PAGE 1 HIP HEALTH I BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210727 210728 210729 210730 210731 210732	9/21/12 9/21/12 9/21/12 9/21/12 7/13/12 9/21/12	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA ORR, LOUISE PARADISE, ANITA WILLIAMS, DIANE	16.00 17.00 40.00 35.00 8.00 20.00		270.08 286.96 675.20 590.80 135.04 337.60	I I I I I	
				CUSTOMER	136.00	0.00	2,295.68		
				 CATEGORY	136.00	0.00	2,295.68		

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R BILL WEEK ENDING									
	_ "			SALES REGIST	E R		BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
210733	9/21/12	000130	METROPLUS HEALTH	ANDERSON, BETH	28.00			I	
210734	9/21/12	000130	METROPLUS HEALTH	ARIAS, NORA			1,166.20	I	
210735	9/21/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	15.00		257.25	I	
210736	9/21/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	65.00		1,114.75	I	
210737	9/21/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	133.00		2,280.95	I	
210738	9/07/12	000130	METROPLUS HEALTH	DOBBINS, SANDRA	288.00		4,939.20	I	
210739	9/21/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	8.00		137.20	I	
210740	9/21/12	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
210741	9/21/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I	
210742	9/21/12	000130	METROPLUS HEALTH	OSORIO, ELVIA	12.00		205.80	I	
210743	9/07/12	000130	METROPLUS HEALTH	PERSAD, USHA	49.00		840.35	I	
210744	9/21/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	21.00		360.15	I	
210745	9/21/12	000130	METROPLUS HEALTH	RYALS, CHARLES			686.00	I	
210746	9/14/12	000130	METROPLUS HEALTH	SANTORO, MATTHE			926.10	I	
210747	9/21/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20	I	
210748	9/21/12	000130	METROPLUS HEALTH	VALLE, BLASINA	8.00		137.20	I	
				CUSTOMER	892.00	0.00	15,297.80		
				CATEGORY	892.00	0.00	15,297.80		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG I				PAGE 1 WEL WELCARE O BILL WEEK END		9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210749 210750 210751	9/21/12 9/21/12 9/21/12	000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH MARTINEZ, MARIA RAMIREZ, ALIDA	42.00 42.00 63.00		722.40 722.40 1,083.60	I I I	
					CUSTOMER	147.00	0.00	2,528.40		
					CATEGORY	147.00	0.00	2,528.40		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMG AMERIGRO	- 32	25
SALES UKN	п # 0300	TOC 001	SUNNISIDE CITIWIDE		STER		BILL WEEK EN	-	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210752	9/21/12	000132	AMERIGROUP	DENNISON,	KELVI 4.00		67.52	I	
210753	9/21/12	000132	AMERIGROUP	ESPERSON,	CLAUD 16.00		270.08	I	
210754	9/21/12	000132	AMERIGROUP	FERNANDEZ,	NORK 34.00		573.92	I	
210755	9/07/12	000132	AMERIGROUP	GUERRA, LO	ORRAIN 72.00		1,215.36	I	
210756	9/21/12	000132	AMERIGROUP	HARDING, E	DNA 30.00		506.40	I	
210757	9/07/12	000132	AMERIGROUP	MICHEL, VE	RTULI 24.00		405.12	I	
210758	9/21/12	000132	AMERIGROUP	PRUITT, JO	0.08 YMMHO		135.04	I	
210759	9/14/12	000132	AMERIGROUP	WALTERS, E	3YRON 25.00		422.00	I	
210760	9/14/12	000132	AMERIGROUP	YOUNG, KAI	EILE 18.00		303.84	Ι	
				CUST	COMER 231.00	0.00	3,899.28		
				CATE	GGORY 231.00	0.00	3,899.28		

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - : HCP HEALTHCARE PA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210761 210762 210763 210764	9/21/12 9/21/12 9/21/12 9/21/12	000148 000148 000148 000148	HEALTH CARE PATTNERS HEALTH CARE PATTNERS HEALTH CARE PATTNERS HEALTH CARE PATTNERS	GOMES, AGUSTINA GOMES, AGUSTINA TOWLES, ADA ZAMBRANO, ZOILA	18.00 45.00 20.00 16.00		303.84 I 759.60 I 337.60 I 270.08 I	
				CUSTOMER	99.00	0.00	1,671.12	
				CATEGORY	99.00	0.00	1,671.12	

	/26/12 - SUP SUNN # 0300 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ICS INDEPENDEN	327 ICE CARE SYSTEMS
		S A	ALES REGISTER			BILL WEEK ENDI	NG 9/28/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	/21/12 000172	INDEPENDENCE CARE SYSTEMS		58.25		926.18	I
210/66 9	/21/12 000172	INDEPENDENCE CARE SYSTEMS	S RUIZ JR, SAMUEL	25.00		397.50	
			CUSTOMER	83.25	0.00	1,323.68	
			CATEGORY	83.25	0.00	1,323.68	

RUN DA	ATE 09/26/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 328	
SALES	JRNL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCS VNSNY CHO	ICE SELECTHEALTH	
				SALES REGIST	E R		BILL WEEK END	ING 9/28/12	
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
210767	7 9/21/12	000170	VNSNY CHOICE SELECT	HEALTH CLMS KARASSAVIDES, A	28.00		480.48	I	
				CATEGORY	28.00	0.00	480.48		

			YSIDE CITYWIDE				-	- 32	29
SALES JRN	L # 0300	LOC 001		REG NY NY LES REGISTER			PAR PRIVATE		
			S A	LES REGISTER			BILL WEEK END	ING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210768 210769 210770 210771 210772 210773	9/21/12 9/21/12 8/31/12 9/21/12 9/21/12 9/21/12	000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVI SUNNYSIDE COMMUNITY SERVI SUNNYSIDE COMMUNITY SERVI SUNNYSIDE COMMUNITY SERVI SUNNYSIDE COMMUNITY SERVI SUNNYSIDE COMMUNITY SERVI	CES ESCOBAR, MARIA CES HENRIQUEZ, TERE CES MARTIN, RUTH CES MONTELIONE, CAL	4.00 1.00 12.00		116.00 58.00 58.00 14.50 174.00 116.00	I I I I	
210774	9/21/12	000002	SUNNYSIDE COMMUNITY SERVI		3.75		54.38	I	
				CUSTOMER	40.75	0.00	590.88		
210775	9/21/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	8.00		124.00	I	
210776 210777 210778	9/21/12 9/14/12 9/21/12	000049 000049 000049	DOMINICAN SISTERS FAM HLT DOMINICAN SISTERS FAM HLT DOMINICAN SISTERS FAM HLT	H SVC MORSHELINA, NAS			358.88 217.50 217.50	I I	
				CUSTOMER	54.75	0.00	793.88		
210779	9/21/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	111.50	0.00	1,632.76		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REG NY NY LES REGISTER			PAGE 1 CAS CHILDREN BILL WEEK ENI	- 330 S AID SOCIETY DING 9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
210780 210781 210782 210783 210784 210785 210786 210787	9/21/12 9/14/12 9/21/12 9/14/12 9/21/12 9/21/12 9/21/12 9/21/12	000088 000088 000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, GENEVIEVE GIL, MARANGELI GIL, MARANGELI SALAS, HELENA VARGAS, BRANDON VARGAS, JOHN	20.00 6.00 6.00 6.00 28.00 11.00		310.00 93.00 93.00 93.00 93.00 434.00 170.50	I I I I I I	
				CUSTOMER	94.00	0.00	1,457.00		
				CATEGORY	94.00	0.00	1,457.00		

			YSIDE CITYWIDE				PAGE 1 - 3	31
SALES JRN	L # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAR PRIVATE	0./00./10
				SALES REGISTER			BILL WEEK ENDING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
210788	9/21/12	000098	MILDRED PANSE	PANSE, MILDRED	20.00		310.00 I	
				CATEGORY	20.00	0.00	310.00	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVEH BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
210789 210790 210791	9/14/12 9/21/12 9/21/12	000101 000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BEAN, ELMIRA BLACK, DOROTHY	10.00 25.00 19.75		142.50 I 356.25 I 281.44 I	
				CUSTOMER	54.75	0.00	780.19	
				CATEGORY	54.75	0.00	780.19	

RUN DATE	09/26/12	- SUP SUNN	NYSIDE CITYWIDE					PAGE 1	. – 33	33	
SALES JR	NL # 0300	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			PAR PRIVATE			
				SALES	REGISTER			BILL WEEK EN	DING	9/28/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME]	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
210792	9/21/12	000143	ETTORE COPPOLA	C	OPPOLA, ETTORE	16.00		248.00	I		
					CATEGORY	16.00	0.00	248.00			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E		R		PAGE 1 CCM COMPREHE BILL WEEK EN	NSIVE	34 CARE MGMT 9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210793 210794 210795 210796 210797 210798 210799	9/14/12 9/21/12 9/07/12 9/21/12 9/21/12 9/21/12 9/21/12	000150 000150 000150 000150 000150 000150	COMPREHENSIVE CARE MONTH COMPREHENSIVE CARE MO	MANAGEMENT MANAGEMENT MANAGEMENT MANAGEMENT MANAGEMENT	BONES, ANA BONES, ANA GARCIA, MARIA GARCIA, MARIA MELAMED, ESTER PULLIAM, WILLIE ROSARIO, CELEST	4.00 20.00 8.00 40.00 16.00 30.00 30.00		56.40 282.00 112.80 564.00 225.60 423.00 423.00	I I I I I	
					CUSTOMER	148.00	0.00	2,086.80		
					CATEGORY	148.00	0.00	2,086.80		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG N S A L E S		}		PAGE 1 PAR PRIVATE BILL WEEK EN	- 33	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210800	9/21/12	000155	ROSEMARY JIBAJA		JIBAJA, ROSEMAR	168.00		2,676.00	I	
210801	9/21/12	000167	AMY L. WELTMAN	:	LUSKIND, FRANCE	7.00		1,338.00	I	
210802	9/21/12	000179	DOROTHY TABICKMAN	•	TABICKMAN, DORT	21.00		325.50	I	
210803	9/21/12	000181	EDELMAN, MILDRED	:	EDELMAN, MILDRE	32.00		514.00	I	
210804	9/21/12	000183	STEPHEN EDEL	:	EDEL, CANDACE	69.00		1,093.50	I	
210805	9/21/12	000185	DIANE CERVONE	:	ESPINOZA, LUPE	20.00		310.00	I	
210806	9/21/12	000189	RHONDA SCHWARTZ	i	SCHORR, NORMA	6.00		93.00	I	
210807	9/21/12	002215	KEITH SALMON	:	LAWRANCE, LILLA	16.00		254.00	I	
210808	9/21/12	003108	NIGRO, CATHERINE	1	NIGRO, CATHERIN	20.00		310.00	I	
210809	9/21/12	003743	VICTOR NICASSIO	1	NICASSIO, VICTO	9.00		139.50	I	
210810	9/21/12	004784	CAMILLERI, JOSEPH		CAMILLERI, JOSE	24.75		334.13	I	
210811	9/21/12	007883	ABBAMONTE, RUTH		ABBAMONTE, RUTH	4.00		65.00	I	
210812	9/21/12	009498	LOUIS LE NOACH	:	LENOACH, LOUIS	9.00		148.50	I	
210813	9/21/12	009605	OLGA OBYMAKO		OBYMAKO, OLGA	6.00		93.00	I	
210814 210815	9/14/12 9/21/12	009752 009752	PETER CAPORASO PETER CAPORASO		CAPORASO, VINCE CAPORASO, VINCE	12.00 24.00		204.00 408.00	I	
					CUSTOMER	36.00	0.00	612.00		
210816	9/21/12	009854	HELEN TAYLOR	:	HERNANDEZ, FRAN	4.00		62.00	I	
210817	9/21/12	010269	ANGELINA MARASA	1	MARASA, ANGELIN	9.00		139.50	I	
210818	9/21/12	010375	DOMINICA IRAOLA		IRAOLA, LILIAN	9.00		146.25	I	
210819	9/21/12	010377	DOMINICA IRAOLA		IRAOLA, ANTONIO	8.00		130.00	I	
210820	9/21/12	010529	STEPHEN WEISS	1	WEISS, STELLA	4.75		80.75	I	
210821	9/21/12	010530	DANA SITILDES		ANSELMI, PETER	27.50		437.88	I	
210822	9/21/12	010735	MIGUEL ONATE		ONATE, MIGUEL	9.00		139.50	I	
210823	9/14/12	010887	FREDERICK RUECKHER	1	RUECKHER, PATRI	15.00		232.50	I	

	09/26/12 - L # 0300		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 2 PAR PRIVATE	- 33	36
DALLO OIGV	д # 0300	100 001	SOUNISIDE CITIVIDE	SALES REGIST	E R		BILL WEEK EN	DING	9/28/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
210824	9/21/12	010952	ARISTA THEOHARIS	THEOHARIS, ARIS	13.00		201.50	I	
210825	9/21/12	011016	MICHAEL SIANO	SIANO, ANDREW	30.00		465.00	I	
210826	9/21/12	011027	SALVATORE DINARO	DINARO, SALVATO	12.00		186.00	I	
210827	9/21/12	011060	ROBIN WARREN CHARLES	WARREN, CYNTHIA	133.00		2,118.50	I	
210828	9/21/12	011245	SHEEHAN MARGARET	SHEEHAN, MARGAR	12.00		186.00	I	
				CATEGORY	734.00	0.00	12,831.51		
				LOCATION	23,613.17	0.00	364,281.49		
				COMPANY	23,613.17	0.00	364,281.49		

RUN DATE 09/26/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 337
SALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

ALES JRNL # 0300 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 9/28/12

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

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