RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 7/13/12 CUST NO CUSTOMER NAME INVOICE# DATE CUSTOMER NAME

REFERENCE

REFERENCE

ALVAREZ, ANGELA
4.00
SENIOR HEALTH PARTNERS
BANKS, ANASTAZJ
24.00
SENIOR HEALTH PARTNERS
BEROOKS, NATALIE
18.00
SENIOR HEALTH PARTNERS
CARRILLO, MARIA
35.00
SENIOR HEALTH PARTNERS
COLON, RAYMUNDA
35.00
SENIOR HEALTH PARTNERS
GHILIOTTY, FLOR
SENIOR HEALTH PARTNERS
GHILIOTTY, FLOR
SENIOR HEALTH PARTNERS
GRAFSTEIN, LILL
1.00
SENIOR HEALTH PARTNERS
GRAFSTEIN, LILL
5.94
SENIOR HEALTH PARTNERS
GRAFSTEIN, LILL
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GRAFSTEIN, LILL
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SENIOR HEALTH PARTNERS
GRIEREZ, LUCI
20.00
SENIOR HEALTH PARTNERS
GUTIERREZ, LUCI
20.00
SENIOR HEALTH PARTNERS
GUTIERREZ, LUCI
20.00
SENIOR HEALTH PARTNERS
HARIDIN, KHAMAT
4.00
SENIOR HEALTH PARTNERS
HARIDIN, KHAMAT
4.00
SENIOR HEALTH PARTNERS
HARIDIN, RAMDIA
20.00
SENIOR HEALTH PARTNERS
HARIDIN, RAMDIA
115.00
SENIOR HEALTH PARTNERS
HARIDIN, RAMDIA
115.00
SENIOR HEALTH PARTNERS
HERNANDEZ, FRAN
24.00
SENIOR HEALTH PARTNERS
SENIOR HEALTH PARTNERS
HOROCHO, MANUEL
12.00
SENIOR HEALTH PARTNERS
SIMON, LUPE
8.00
SENIOR HEALTH PARTNERS
TORRESCAMPOS, J
8.00
SENIOR HEALTH PARTNERS
VIDOT-LINARES, 30.00
SENIOR HEALTH PARTNERS
VIDOT-LINARES, 30.00 REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 201041 7/06/12 000082 57.00 I 201042 7/06/12 000082 342.00 I 256.50 I 201043 7/06/12 000082 201044 7/06/12 000082 498.75 201045 7/06/12 000082 498.75 201046 71.25 7/06/12 000082 201047 7/06/12 000082 313.50 201048 7/06/12 000082 200.00 1,188.00 201049 7/06/12 000082 201050 6/29/12 000082 285.00 201051 7/06/12 000082 285.00 201052 7/06/12 000082 57.00 201053 7/06/12 000082 413.25 201054 7/06/12 000082 285.00 1,638.75 201055 7/06/12 000082 201056 7/06/12 342.00 000082 201057 7/06/12 000082 85.50 201058 7/06/12 000082 171.00 201059 912.00 7/06/12 000082 228.00 201060 7/06/12 000082 201061 7/06/12 000082 356.25 201062 7/06/12 000082 114.00 201063 6/29/12 000082 114.00 201064 7/06/12 000082 513.00 201065 7/06/12 000082 427.50 201066 7/06/12 000082 171.00 7/06/12 000082 SENIOR HEALTH PARTNERS 201067 57.00 _____ _____ CUSTOMER 602.94 0.00 9,881.00

CATEGORY 602.94 0.00

9,881.00

| SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCSA S A L E S R E G I S T E R BILL WEEK ENDING 7/13/12 |
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| SALES REGISTER BILL WEEK ENDING 7/13/12 |
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| INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS |
| |
| 201068 |
| 201069 |
| 201070 6/29/12 000008 VISITING NURSE SERVICE ABREU, ANA 12.00 174.96 I |
| 201071 7/06/12 000008 VISITING NURSE SERVICE ABREU, ANA 12.00 174.96 I |
| 201072 7/06/12 000008 VISITING NURSE SERVICE ACOSTA, ALBERTO 16.00 233.28 I |
| 201073 7/06/12 000008 VISITING NURSE SERVICE ADAMES, OLGA 20.00 291.60 I |
| 201074 7/06/12 000008 VISITING NURSE SERVICE ADAMES, RICARDO 5.00 72.90 I |
| 201075 7/06/12 000008 VISITING NURSE SERVICE ADAMES, RICARDO 30.00 437.40 I |
| 201076 7/06/12 000008 VISITING NURSE SERVICE ADAMS, MYRIAM 10.00 145.80 I |
| 201077 7/06/12 000008 VISITING NURSE SERVICE ADAMS, MYRIAM 60.00 874.80 I |
| 201078 6/29/12 000008 VISITING NURSE SERVICE ADUN, JEANETTE 8.00 116.64 I |
| 201079 7/06/12 000008 VISITING NURSE SERVICE ADUN, JEANETTE 8.00 116.64 I |
| 201080 7/06/12 000008 VISITING NURSE SERVICE ADUN, JEANETTE 33.00 481.14 I |
| 201081 7/06/12 000008 VISITING NURSE SERVICE AFZAL, AMIR 4.00 58.32 I |
| 7/00/12 00000 VIBITING NORDE BERVICE ALEMI, AVIR 1.00 30.32 1 |
| CUSTOMER 274.00 0.00 3,994.92 |
| |
| |
| CATEGORY 274.00 0.00 3,994.92 |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 3 |
|---------------|-----------|---------|---|-----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | LTC NURSING HOME BILL WEEK ENDING | |
| | | | | | | | DIEL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201002 | 7/06/12 | 000008 | VICIBING MIDGE CEDVICE | ACIITI AD CODATO | 5.00 | | 72.90 I | |
| 201082 201083 | 7/06/12 | 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , - | 40.00 | | 72.90 I 583.20 I | |
| | .,, | | | | | | | |
| | | | | CUSTOMER | 45.00 | 0.00 | 656.10 | |
| | | | | | | | | |
| | | | | CATEGORY | 45.00 | 0.00 | 656.10 | |

| RUN DATE SALES JRN | | LOC 001 | | REG NY NY A L E S R E G I S T E R | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | |
|-----------------------|---------|---------|------------------------|--------------------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201084 | 7/06/12 | 800000 | VISITING NURSE SERVICE | AKBAR, NASEEM | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 LTC NURSING | - HOMEW | 5 /O WALLS (LT |
|-----------------------|--------------------|-----------------------|---|------------------------------------|---------------|---------|-----------------------|------------|-------------------|
| | _ " | | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201085 | 6/22/12 | 800000 | VISITING NURSE SERVICE | ALEKSANDORVA, S | 5.00 | | 72.90 | I | |
| 201086 201087 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | ALEKSANDORVA, S ALEKSANDORVA, S | 5.00 10.00 | | 72.90 145.80 | I I | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | | |
| | | | | CODIONER | 20.00 | 0.00 | 271.00 | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCSA | 6 |
|-----------------------|-----------|----------|-----------------------------------|-----------------|-------|---------|------------------------------|---------|
| STEED STEE | _ 020) | 200 001 | | SALES REGISTER | | | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201088 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ALFEREZ, GLORIA | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE SALES JRN | | LOC 001 | | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 7 7/13/12 |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|---|-----------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201089 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ALTSITZER, HARO | 6.00 | | 87.48 I | |
| | | | | CATEGORY | 6.00 | 0.00 | 87.48 | |

| | | | YSIDE CITYWIDE | | | | | 8 |
|-----------|----------|---------|------------------------|-----------------|-----------|---------|-------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | HOA HOSPICE ADULT | 7/12/12 |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201090 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ALVAREZ, NAZARE | 8.00 | | 116.64 I | |
| 201091 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ALVAREZ, NAZARE | 48.00 | | 699.84 I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | |

| RUN DATE SALES JRN | - , , | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCS | 9 A |
|-----------------------|---------|------------|--------------------------------------|-----------------|------------|---------|-----------------------------|-----------|
| Bridde Grav | 1 0200 | 100 001 | | LES REGISTER | | | BILL WEEK ENDIN | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201092 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ANANIA, GLYGERI | 24.75 | | 360.86 I | |
| 201093 | 5/25/12 | 000008 | VISITING NURSE SERVICE | ANDINO, ESTEBAN | 4.00 | | 58.32 I | |
| 201094 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANDINO, ESTEBAN | 20.00 | | 291.60 I | |
| 201095 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANDRADE, LOLA | 12.00 | | 174.96 I | |
| 201096 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANDRADE, LOLA | 72.00 | | 1,049.76 I | |
| 201097 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANDREWS, JOHNNI | 32.00 | | 466.56 I | |
| 201098 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANGRISANO, RUTH | 4.00 | | 58.32 I | |
| 201099 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANGRISANO, RUTH | 24.00 | | 349.92 I | |
| | | | | CUSTOMER | 192.75 | 0.00 | 2,810.30 | |
| | | | | CATEGORY | 192.75 | 0.00 | 2,810.30 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 10 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | IOMEW/O WA | LLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK END | ING 7/1 | 3/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SUR | PLUS |
| 201100 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ANGULO, ELCY | 20.00 | | 291.60 | I | |
| 201101 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ANUT, ALICE | 7.50 | | 109.35 | I | |
| 201102 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ANUT, ALICE | 53.00 | | 772.74 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 80.50 | 0.00 | 1,173.69 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 80.50 | 0.00 | 1,173.69 | | |

| RUN DATE SALES JRN | | | IYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN | |
|-----------------------|---------|---------|---------------------------------------|----------------------------|-------|---------|--|-----------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201103 | 7/06/12 | 800000 | VISITING NURSE SERVICE | AOUN, ODETTE | 30.00 | | 437.40 | Į. |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| | | | YSIDE CITYWIDE | 222 | | | - | 12 |
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| SALES JRNI | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201104 201105 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 3.00 17.00 | | 43.74 I 247.86 I | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 1 | 13 |
|-----------|-----------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201106 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ARGENTINA, CESS | 4.00 | | 58.32 | I | |
| 201107 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ARIAS, MAGDALEN | 4.75 | | 69.26 | I | |
| 201108 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ARIAS, MAGDALEN | 37.75 | | 550.40 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 46.50 | 0.00 | 677.98 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 46.50 | 0.00 | 677.98 | | |

| | | | YSIDE CITYWIDE | DEC NV NV | | | 11100 | - : | 14 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|----------------------------|-----|---------|
| SALES JRN | ⊔ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP | SURPLUS |
| 201109 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ASADOURIAN, COR | 8.00 | | 116.64 | I | |
| 201110 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ASADOURIAN, COR | 10.00 | | 145.80 | I | |
| 201111 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ASH, MARIE | 12.00 | | 174.96 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 30.00 | 0.00 | 437.40 | | |
| | | | | | | | | | |
| | | | | ==== | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 1 | L5 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | | , |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201112 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ASHLEY, CLYDE | 7.00 | | 102.06 | I | |
| 201113 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ASHLEY, CLYDE | 35.00 | | 510.30 | I | |
| | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | | |
| | | | | COSTOMER | 42.00 | 0.00 | 012.30 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 42.00 | 0.00 | 612.36 | | |

| RUN DATE SALES JRN | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDIN | 16 IG 7/13/12 |
|-----------------------|---------|---------------------|--------------------------------------|----------------------------|-------|---------|--|------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201114 | 7/06/12 | 800000 | VISITING NURSE SERVICE | AVILES, MERCEDE | 8.00 | | 116.64 | <u>.</u> - |
| | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| | | | YSIDE CITYWIDE | | | | | 17 |
|-----------|---------------|---------|------------------------|----------------|---------|---------|------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | | REG NY NY | | | LTC NURSING HOME | • |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 001115 | T / 0 C / 1 O | | | | 1.5 0.0 | | | |
| 201115 | 7/06/12 | 800000 | VISITING NURSE SERVICE | AZAD, ABUL | 16.00 | | 233.28 I | |
| | | | | | | | | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | 7/13/12 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201116 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BADILLO, JOVITA | 7.75 | | 113.00 I | |
| | | | | CATEGORY | 7.75 | 0.00 | 113.00 | |

| | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 19 7/13/12 |
|----------|---------|-----------------------|---|-----------------------------|-------|---------|---|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201117 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BAEZ, JUAN | 7.00 | | 102.06 I | |
| | | | | CATEGORY | 7.00 | 0.00 | 102.06 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 20 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201118 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BAEZ, JUAN | 21.00 | | 306.18 I | |
| | | | | CATEGORY | 21.00 | 0.00 | 306.18 | |

| RUN DATE | 07/11/12 - | | YSIDE CITYWIDE | | | | PAGE 1 | . – : | 21 |
|-----------|------------|---------|------------------------|-----------------|--------|---------|--------------|-------|--------------|
| SALES JRN | JL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW | /O WALLS (LT |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201119 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BALLAS, VIOLA | 5.00 | | 72.90 | I | |
| 201120 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BALLAS, VIOLA | 25.00 | | 364.50 | | |
| | , , | | | • | | | | | |
| 201121 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BAQUERIZO, ANNA | 8.00 | | 116.64 | Τ | |
| 201122 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BAQUERIZO, ANNA | 47.75 | | 696.20 | I | |
| 201123 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BARDEANU, VICTO | 5.00 | | 72.90 | I | |
| 201124 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BARDEANU, VICTO | 40.00 | | 583.20 | I | |
| 201125 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BATTLE, JEANETT | 7.00 | | 102.06 | I | |
| 201126 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BATTLE, JEANETT | 41.50 | | 605.07 | I | |
| | | | | CUSTOMER | 179.25 | 0.00 | 2,613.47 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 179.25 | 0.00 | 2,613.47 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 2 | 2 |
|-----------|----------------|------------|------------------------|-----------------|--------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | SALES REGISTER | | | | | | | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201127 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BECERRA, FELIPE | 18.50 | | 269.73 | I | |
| 201128 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BELLOROFONTE, M | 20.00 | | 291.60 | I | |
| 201129 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BELLOROFONTE, M | 131.00 | | 1,909.98 | I | |
| 201130 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BERENBLIT, SARA | 3.00 | | 43.74 | I | |
| | | | | CUSTOMER | 172.50 | 0.00 | 2,515.05 | | |
| | | | | CATEGORY | 172.50 | 0.00 | 2,515.05 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 23 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201131 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BETHUNE, HARRYD | 5.00 | | 72.90 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 5.00 | 0.00 | 72.90 | |

| RUN DATE 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | L – | 24 |
|-------------------|------------|------------------------|----------------|-------|---------|--------------|-------|---------|
| SALES JRNL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE I | | |
| | | S | SALES REGISTER | | | BILL WEEK EN | IDING | 7/13/12 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201132 7/06/12 | 000008 | VISITING NURSE SERVICE | BHATT, JYOTI | 36.00 | | 524.88 | I | |
| | | | CATEGORY | 36.00 | 0.00 | 524.88 | - | |

| | RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 25 |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------------|
| | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | | |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 001100 | T /06 /10 | | | | 20.00 | | 427 40 - | |
| ı | 201133 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BHAWNANI, BISHU | 30.00 | | 437.40 I | |
| | | | | | | | | | |
| | | | | | CAMPRODY | 20.00 | 0.00 | 437.40 | |
| ı | | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - 2 | 26 |
|-----------------------|--------------------|-----------------------|---|----------------------------------|---------------|---------|---------------------|--------|---------|
| SALES OWN | H 0205 | HOC 001 | | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201134 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BHULLA, JIWAN | 8.00 | | 116.64 | I | |
| 201135 201136 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | BHULLA, JIWAN BIANCO HOPKINS, | 8.00 20.00 | | 116.64 291.60 | I I | |
| | | | | CUSTOMER | 36.00 | 0.00 | 524.88 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 36.00 | 0.00 | 524.88 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | | REGNY NY SALES REGISTER | | | PAGE 1 - LTC NURSING HOME BILL WEEK ENDING | • |
|-----------------------|---------|-----------------------|------------------------|----------------------------|-------|---------|--|--------|
| INVOICE# | DATE | CUST NO | - | REFERENCE | HOURS | TAX AMT | AMOUNT TY | - , -, |
| 201137 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BLANCAFLOR, PUR | 39.00 | | 568.62 I | |
| | | | | CATEGORY | 39.00 | 0.00 | 568.62 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - | 28 |
|-----------------------|--------------------|-----------------------|---|------------------------------------|---------------|---------|---------------------|--------|---------|
| DALLO OICI | 1L # 0209 | 100 001 | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201138 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BOCANEGRA, GLAD | 12.00 | | 174.96 | I | |
| 201139 201140 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | BONILLA, ESPERA BONILLA, ESPERA | 7.00 42.00 | | 102.06 612.36 | I T | |
| 202210 | ,,00,12 | | VIDITING HONDE DERVIOE | | | | | | |
| | | | | CUSTOMER | 61.00 | 0.00 | 889.38 | | |
| | | | | CATEGORY | 61.00 | 0.00 | 889.38 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 29 |
|----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JR | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201141 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BONILLA, LYDIA | 16.00 | | 233.28 I | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 30 |
|----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JR | NL # 0289 | LOC 001 | | REG NY NY | | | LTC NURSING HOME | • |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201142 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BONSIGNORE, GAE | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 3 | 31 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | AMH ADULT MENTAL H | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201143 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BORSARI, ANTOIN | 2.00 | | 29.16 I | |
| | | | | CATEGORY | 2.00 | 0.00 | | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHO BILL WEEK END | CSA |
|-----------------------|--------------------|------------------|---|-----------------------------|---------------|---------|---|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 201144 201145 | 6/29/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 4.00 11.75 | | 58.32 171.32 | I I |
| | | | | CUSTOMER | 15.75 | 0.00 | 229.64 | |
| | | | | CATEGORY | 15.75 | 0.00 | 229.64 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 33 |
|-----------|------------|------------|------------------------|---------------------------|-------|---------|----------------|-----------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | | : | S A L E S R E G I S T E R | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201146 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BOYADJIAN, ZARO | 5.00 | | 72.90 | I |
| 201147 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BOYADJIAN, ZARO | 30.00 | | 437.40 | I |
| | | | | CUSTOMER | 35.00 | 0.00 | 510.30 | |
| | | | | | | | | |
| | | | | CATEGORY | 35.00 | 0.00 | 510.30 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | J - |
|-----------|----------|---------|------------------------|----------------|-------|---------|----------------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | |
| | | | | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 201148 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BOYLAN, FRANK | 9.00 | | 131.22 | I |
| 201149 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BOYLAN, FRANK | 54.00 | | 787.32 | I |
| | | | | CUSTOMER | 63.00 | 0.00 | 918.54 | |
| | | | | | | | | |
| | | | | CATEGORY | 63.00 | 0.00 | 918.54 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 35 ADU ADULT BILL WEEK ENDING 7/13/12 | |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------------------|-------|---------|--|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201150 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BRACERO, HELEN | 8.00 | | 116.64 I | |
| | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 36 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CARE | PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201151 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BROWN, BETTY | 9.00 | | 131.22 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 131.22 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 5, |
|-----------|----------|---------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | |
| | | | | SALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201152 | 7/06/12 | 000008 | VISITING NURSE SERVICE | BURGOS, RAFAELA | 9.00 | | 131.22 | I |
| 201153 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BURNS, MARGARET | 8.00 | | 116.64 | I |
| 201154 | 7/06/12 | 800000 | VISITING NURSE SERVICE | BURNS, MARGARET | 48.00 | | 699.84 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 65.00 | 0.00 | 947.70 | |
| | | | | | | | | |
| | | | | CATEGORY | 65.00 | 0.00 | 947.70 | |

| RUN DATE 07 SALES JRNL | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - LAD NURSING HOME BILL WEEK ENDING | |
|---------------------------|--------------------|---------------------|---|-----------------------------|---------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 8.00 48.00 | | 116.64 I 699.84 I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | |
| | | | | CATEGORY | 56.00 | 0.00 | | |

| RUN DATE SALES JRN | | | | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHCS. BILL WEEK ENDIN | |
|-----------------------|---------|---------|------------------------|-----------------------------|-------|---------|---|--------|
| INVOICE# | DATE | CUST NO | | REFERENCE | HOURS | TAX AMT | AMOUNT TY | - , -, |
| 201157 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CABA, PURA | 10.00 | | 145.80 I | |
| | | | | CATEGORY | 10.00 | 0.00 | 145.80 | |

| RUN DATE 0 | 7/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 4 | .0 |
|------------|-----------|----------|------------------------|-----------------|-------|---------|---------------|------|---------|
| SALES JRNL | # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | |
| | | | S | ALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201158 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CALABRO, JOSEPH | 10.00 | | 145.80 | I | |
| 201159 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CALABRO, JOSEPH | 60.00 | | 874.80 | I | |
| | | | | | 70.00 | 0.00 | 1 000 60 | | |
| | | | | CUSTOMER | 70.00 | 0.00 | 1,020.60 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,020.60 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 VCP CHOICE LH BILL WEEK END | CSA | 7/13/12 |
|----------------------------|-------------------------------|-----------------------|--|---|-----------------------|---------|--|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201160 201161 201162 | 6/29/12 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | CALDERON, FRANC CALDERON, FRANC CALDERON, FRANC | 8.00 8.00 33.00 | | 116.64 116.64 481.14 | I I I | |
| | | | | CUSTOMER | 49.00 | 0.00 | 714.42 | | |
| | | | | CATEGORY | 49.00 | 0.00 | 714.42 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 HOA HOSPICE A | | 12 |
|-----------------------|------------|-----------------------|--------------------------------------|-----------------|-------|---------|-------------------------|-----|---------|
| | .2 0205 | 200 001 | | SALES REGISTER | | | BILL WEEK ENI | - | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201163 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CALKOSZ, JOSEFI | 9.00 | | 131.22 | I | |
| 201164 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CALKOSZ, JOSEFI | 54.00 | | 787.32 | | |
| | | | | CUSTOMER | 63.00 | 0.00 | 918.54 | | |
| | | | | CATEGORY | 63.00 | 0.00 | 918.54 | | |

| | ATE 07/11/12 JRNL # 0289 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | | 43 | |
|-------|-----------------------------|------------------|---|----------------|---------------|---------|------------------------|--------|---------|--|
| SALES | UKNL # 0209 | LOC 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 | |
| INVOI | CE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 20116 | | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 8.00 48.00 | | 116.64 699.84 | I I | | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | | | |

| RUN DATE 07 | 7/11/12 - ST | UP SUNNY | SIDE CITYWIDE | | | | | PAGE 1 | - 4 | 4 |
|-------------|--------------|----------|------------------------|---------|---------------|-------|---------|--------------|--------|-------------|
| SALES JRNL | # 0289 LO | OC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | | SALES R | EGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE C | UST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201167 7 | 7/06/12 00 | 00008 | VISITING NURSE SERVICE | CANO, | ADELINA | 6.00 | | 87.48 | I | |
| 201168 7 | 7/06/12 00 | 80000 | VISITING NURSE SERVICE | CANO, | ADELINA | 36.00 | | 524.88 | I | |
| | | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | | |
| | | | | | - CATEGORY | 42.00 | 0.00 | 612.36 | | |

| | | | YSIDE CITYWIDE | DEC NV NV | | | PAGE 1 - | 45 |
|-----------|----------|---------|------------------------|--------------------------------------|-------|---------|------------------------------|------------|
| SALES JRN | L # U289 | TOC 001 | SUNNYSIDE CITYWIDE S | REG NY NY A L E S R E G I S T E R | | | ADU ADULT BILL WEEK ENDIN | IG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201169 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CANTO, THERESA | 16.00 | | 233.28 | |
| | | | | | | | | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| | | | YSIDE CITYWIDE | | | | 11102 1 | | 16 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | | 7/12/10 |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201170 | 7/06/12 | 000008 | VISITING NURSE SERVICE | | 11.50 | | 167.67 | I | |
| 201171 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CAPORASO, VINCE | 72.00 | | 1,049.76 | I | |
| | | | | CUSTOMER | 83.50 | 0.00 | 1,217.43 | | |
| | | | | CATEGORY | 83.50 | 0.00 | 1,217.43 | | |

| RUN DATE (| | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 47 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 7/13/12 | |
|------------------|--------------------|-----------------------|--|-----------------------------|--------------|---------|--|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201172 201173 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 5.00 6.00 | | 72.90 I 87.48 I | |
| | | | | CUSTOMER | 11.00 | 0.00 | 160.38 | |
| | | | | CATEGORY | 11.00 | 0.00 | 160.38 | |

| RUN DATE | N DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 48 | | | | | | | | | | | |
|-----------|--|---------|------------------------|----------------|-------|---------|--------------|------|---------|--|--|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | | | | |
| | | | S | SALES REGISTE | R | | BILL WEEK EN | DING | 7/13/12 | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | | | |
| 201174 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CARDONA, MARIA | 7.75 | | 113.00 | I | | | | |
| 201175 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARDONA, MARIA | 38.00 | | 554.06 | I | | | | |
| | | | | | 45.55 | | | | | | | |
| | | | | CUSTOMER | 45.75 | 0.00 | 667.06 | | | | | |
| | | | | | | | | | | | | |
| | | | | CATEGORY | 45.75 | 0.00 | 667.06 | | | | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | | |
|-----------------------|---------|-----------------------|---------------------------------------|-------------------------|-------|---------|----------------------|-------------|--|
| | | | S | A L E S R E G I S T E R | | | BILL WEEK END | ING 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP SURPLUS | |
| 201176 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CARDOSO, ORLAND | 8.00 | | 116.64 | I | |
| 201177 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARDOSO, ORLAND | 45.25 | | 659.75 | I | |
| 201178 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CARDOZA, ANAIDA | 30.00 | | 437.40 | I | |
| 201179 | 6/15/12 | 800000 | VISITING NURSE SERVICE | CARELA-REYES, M | 5.00 | | 72.90 | I | |
| | | | | CUSTOMER | 88.25 | 0.00 | 1,286.69 | | |
| | | | | CATEGORY | 88.25 | 0.00 | 1,286.69 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 HOA HOSPICE A | - | 50 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------|-----------|---------|-------------------------|------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201180 201181 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARRALERO, ROSA | 6.00 | | 87.48 | I | |
| 201181 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARRALERO, ROSA | 39.25 | | 572.27 | | |
| | | | | CUSTOMER | 45.25 | 0.00 | 659.75 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 45.25 | 0.00 | 659.75 | | |

| RUN DATE SALES JRN | | SUP SUNN LOC 001 | | REG NY NY A L E S R E G I S T E R | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | |
|-----------------------|---------|---------------------|------------------------|--------------------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201182 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARRENO, CRISTI | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 52 | 2 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | | REG NY NY | | | LTC NURSING HOMEW/C | , |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201183 | 6/29/12 | 000008 | VISITING NURSE SERVICE | CARTAGENA, FRAN | 8.00 | | 116.64 I | |
| 201184 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARTAGENA, FRAN | 8.00 | | 116.64 I | |
| 201185 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CARTAGENA, FRAN | 48.00 | | 699.84 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 64.00 | 0.00 | 933.12 | |
| | | | | | | | | |
| | | | | CATEGORY | 64.00 | 0.00 | 933.12 | |

| RUN DATE SALES JRN | - , , | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | | 53 |
|-----------------------|-----------|------------|-----------------------------------|-----------------|--------|---------|------------------------|-----|---------|
| SALES UKN | 11 # 0209 | TOC 001 | | ALES REGISTE: | R | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201186 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CEBALLOS, CLEME | 20.00 | | 291.60 | I | |
| 201187 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CERNILLI, MARIA | 7.00 | | 102.06 | I | |
| 201188 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CERNILLI, MARIA | 26.00 | | 379.08 | I | |
| 201189 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CESPEDES, CRIST | 9.00 | | 131.22 | I | |
| 201190 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHARLES PIERRE, | 30.00 | | 437.40 | I | |
| 201191 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHAUCA, PEDRO | 10.00 | | 145.80 | I | |
| 201192 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHAUCA, PEDRO | 60.00 | | 874.80 | I | |
| | | | | CUSTOMER | 162.00 | 0.00 | 2,361.96 | | |
| | | | | CATEGORY | 162.00 | 0.00 | 2,361.96 | | |

| | | | TYSIDE CITYWIDE | | | | | 54 |
|-----------|-----------|---------|------------------------|-----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | | REG NY NY SALES REGISTER | | | LTC NURSING HOME BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201193 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHIANETTA, JOSE | 27.75 | | 404.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 27.75 | 0.00 | 404.60 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 55 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201194 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHINGA, ALBA | 24.00 | | 349.92 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 24.00 | 0.00 | 349.92 | |

| | | | YSIDE CITYWIDE | | | | | 56 |
|-----------|----------|---------|------------------------|---------------|-------|---------|--------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | • |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201195 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CHO, MOGEE | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE SALES JRN | - , | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | | 57 |
|-----------------------|----------|------------|-----------------------------------|-----------------|--------|---------|------------------------|-----|---------|
| BALLED OILL | ш н одор | 100 001 | | SALES REGISTER | 1 | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201196 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CHOUDHURY, SHAM | 7.75 | | 113.00 | I | |
| 201197 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHOUDHURY, SHAM | 48.00 | | 699.84 | I | |
| 201198 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHU, MOLLY | 32.00 | | 466.56 | I | |
| 201199 | 6/22/12 | 800000 | VISITING NURSE SERVICE | CHUCK, ENA | 3.00 | | 43.74 | I | |
| 201200 | 6/29/12 | 800000 | VISITING NURSE SERVICE | CHUCK, ENA | 22.50 | | 328.06 | I | |
| 201201 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHUCK, ENA | 6.00 | | 87.48 | I | |
| 201202 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CHUCK, ENA | 27.50 | | 400.95 | I | |
| | | | | CUSTOMER | 146.75 | 0.00 | 2,139.63 | | |
| | | | | CATEGORY | 146.75 | 0.00 | 2,139.63 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 5 | 8 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|--------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/ | , |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201203 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CIPRIAN, FREDEV | 8.00 | | 116.64 | I | |
| 201204 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CIPRIAN, FREDEV | 48.00 | | 699.84 | I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | | |

| 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 - ADU ADULT BILL WEEK ENDING | 59 7/13/12 |
|-----------------------|---------|---------------------|---|--------------------------------------|-------|---------|---|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201205 | 7/06/12 | 000008 | VISITING NURSE SERVICE | COLEMAN, JAMES | 6.00 | | 87.48 I | |
| | | | | CATEGORY | 6.00 | 0.00 | 87.48 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 6 | 50 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|--------|-------------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | | SALES REGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201206 | 7/06/12 | 000008 | VISITING NURSE SERVICE | COLLER, FELISA | 20.00 | | 291.60 | I | |
| 201207 | 7/06/12 | 000008 | VISITING NURSE SERVICE | COLLER, JOSE | 15.00 | | 218.70 | I | |
| 201208 | 7/06/12 | 800000 | VISITING NURSE SERVICE | COLON, ANTONIA | 6.00 | | 87.48 | I | |
| 201209 | 7/06/12 | 000008 | VISITING NURSE SERVICE | COLON, ANTONIA | 36.00 | | 524.88 | I | |
| 201210 | 7/06/12 | 800000 | VISITING NURSE SERVICE | COLON, ISABEL | 18.00 | | 262.44 | I | |
| | | | | CUSTOMER | 95.00 | 0.00 | 1,385.10 | | |
| | | | | CATEGORY | 95.00 | 0.00 | 1,385.10 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 6 | 1 |
|-----------|------------|------------|------------------------|----------------|--------|---------|---------------|------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | | | E PROGRAM |
| | | | \$ | SALES REGISTER | | | BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201211 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CORDERO, NELLY | 24.00 | | 349.92 | I | |
| 201212 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CORDERO, NELLY | 144.00 | | 2,099.52 | I | |
| | | | | CUSTOMER | 168.00 | 0.00 | 2,449.44 | | |
| | | | | CODIONER | 100.00 | 0.00 | 2,113.11 | | |
| | | | | | | | | | |
| 1 | | | | CATEGORY | 168.00 | 0.00 | 2,449.44 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 62 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201213 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CORREA, MARGARI | 24.00 | | 349.92 I | |
| | | | | CATEGORY | 24.00 | 0.00 | 349.92 | |

| | 07/11/12 - IL # 0289 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 63 VCP CHOICE LHCSA BILL WEEK ENDING 7/13/12 | 2 |
|----------|-------------------------|---------|--------------------------------------|-----------------------------|-------|---------|---|---|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | 5 |
| 201214 | 7/06/12 | 800000 | VISITING NURSE SERVICE | COSTA, ANTOINET | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | - |

| RUN DATE 07 | 7/11/12 - SUP S | SUNNYSIDE CITYWIDE | | | | PAGE 1 | - 64 |
|-------------|-----------------|---------------------------|---------------|-------|---------|---------------|------------------|
| SALES JRNL | # 0289 LOC 0 | 001 SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | OMEW/O WALLS (LT |
| | | | SALES REGISTE | R | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE CUST | NO CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP SURPLUS |
| 201215 7 | 7/06/12 00000 | 08 VISITING NURSE SERVICE | COSTA, ARSENE | 5.00 | | 72.90 | I |
| 201216 7 | 7/06/12 00000 | 08 VISITING NURSE SERVICE | COSTA, ARSENE | 35.00 | | 510.30 | I |
| | | | CUSTOMER | 40.00 | 0.00 | 583.20 | |
| | | | | | | | |
| | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 6 | 5 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | |
| | | | S | BALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201217 | 7/06/12 | 000008 | VISITING NURSE SERVICE | COVALIU, SIMION | 6.00 | | 87.48 | I | |
| 201218 | 7/06/12 | 800000 | VISITING NURSE SERVICE | COVALIU, SIMION | 29.25 | | 426.48 | I | |
| | | | | CHICEOMED | 25 25 | 0.00 | | | |
| | | | | CUSTOMER | 35.25 | 0.00 | 513.96 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 35.25 | 0.00 | 513.96 | | |

| RUN DATE (SALES JRNI | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY SALES R | NY EGISTE | 2 R | | PAGE 1 HOA HOSPICE BILL WEEK EN | ADULT | 7/13/12 |
|--------------------------|--------------------|-----------------------|---|-------------------|----------------|---------------|---------|---------------------------------------|-------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REF | ERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201219 201220 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | PETRA PETRA | 4.00 15.00 | | 58.32 218.70 | I | |
| | | | | | CUSTOMER | 19.00 | 0.00 | 277.02 | | |
| | | | | | - CATEGORY | 19.00 | 0.00 | 277.02 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 67 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 201221 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CRAWFORD, CARME | 8.00 | | 116.64 I | |
| 201222 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CRAWFORD, CARME | 46.00 | | 670.69 I | |
| | | | | CUSTOMER | 54.00 | 0.00 | 787.33 | |
| | | | | | | | | |
| | | | | CATEGORY | 54.00 | 0.00 | 787.33 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 68 |
|-----------|-----------|---------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 201223 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CROUSE, MARIA | 3.00 | | 43.74 I | |
| | | | | | | | | |
| | | | | CATEGORY | 3.00 | 0.00 | 43.74 | |

| | | | YSIDE CITYWIDE | DEC NV | NT37 | | | 111011 1 | | 69 |
|-----------|----------|---------|------------------------|--------|--------------|-------|---------|-----------------------------|------|---------|
| SALES JRN | L # U289 | LOC 001 | SUNNYSIDE CITYWIDE | _ | NY EGISTE | 7 R | | LAD NURSING BILL WEEK EN | | 7/13/12 |
| | | | | | | J 10 | | DIEL WEEK EN | DING | ,,13,12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201224 | 6/15/12 | 000008 | VISITING NURSE SERVICE | CDII7 | HECTOR | 3.00 | | 43.74 | т | |
| 201224 | 7/06/12 | 000008 | VISITING NURSE SERVICE | | HECTOR | 7.00 | | 102.06 | I | |
| 201226 | 7/06/12 | 800000 | VISITING NURSE SERVICE | CRUZ, | HECTOR | 25.00 | | 364.50 | I | |
| | | | | | GIIGEOMED - | 35.00 | | F10 20 | | |
| | | | | | CUSTOMER | 35.00 | 0.00 | 510.30 | | |
| | | | | | - | | | | | |
| | | | | | CATEGORY | 35.00 | 0.00 | 510.30 | | |

| RUN DATE SALES JRN | | | | REG NY NY SALES REGISTER | | | PAGE 1 - 70 VCP CHOICE LHCSA BILL WEEK ENDING 7/13, | /12 |
|-----------------------|---------|---------|------------------------|-----------------------------|-------|---------|---|-----|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURP | LUS |
| 201227 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CRUZ, JUANA | 15.50 | | 226.00 I | |
| | | | | CATEGORY | 15.50 | 0.00 | 226.00 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 71 |
|----------|------------|------------|------------------------|-----------------|-------|---------|------------------|--------------|
| SALES JR | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME | W/O WALLS LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201228 | 7/06/12 | 000008 | VISITING NURSE SERVICE | CURCIO, ANTONIA | 11.50 | | 167.67 I | |
| | | | | CATEGORY | 11.50 | 0.00 | 167.67 | |

| RUN DATE SALES JRN | | | | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDIN | 72 G 7/13/12 |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|--|-----------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201229 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DABROWSKI, ALEK | 9.00 | | 131.22 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 131.22 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 73 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------------|----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WA | ALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 7/1 | 13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUE | RPLUS |
| 201230 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DAMICO, ANGELA | 23.25 | | 338.99 I | |
| 201231 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DANNY, RAMDULAR | 8.00 | | 116.64 I | |
| 201232 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DANNY, RAMDULAR | 25.00 | | 364.50 I | |
| | | | | CUSTOMER | 56.25 | 0.00 | 820.13 | |
| | | | | CATEGORY | 56.25 | 0.00 | 820.13 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 74 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------------|-----|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING 7/13/ | 12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPI | LUS |
| 201233 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DAVIS, LOUELLEN | 6.00 | | 87.48 | I | |
| 201234 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DAVIS, LOUELLEN | 36.00 | | 524.88 | I | |
| 201235 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DEBAZALAR, ANTO | 18.00 | | 262.44 | I | |
| | | | | CUSTOMER | 60.00 | 0.00 | 874.80 | | |
| | | | | CATEGORY | 60.00 | 0.00 | 874.80 | | |

| RUN DATE SALES JRN | | | | REG NY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 75 7/13/12 |
|-----------------------|---------|---------|------------------------|-----------------------------|-------|---------|---|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201236 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DECICCO, AMIEL | 5.00 | | 72.90 I | |
| | | | | CATEGORY | 5.00 | 0.00 | 72.90 | |

| | | | YSIDE CITYWIDE | | | | 11101 | | 76 |
|-----------|----------|---------|---|----------------------------|-------|---------|----------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LE | | 7/13/12 |
| | | | • | SALES REGISIER | | | DILL MEEV FINI | JING | //13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201237 | 6/22/12 | 000008 | VISITING NURSE SERVICE | DEJESUS, FELIX | 5.00 | | 72.90 | т | |
| 201237 | 7/06/12 | 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | · | 20.25 | | 295.25 | I | |
| | | | | · | | | | | |
| | | | | CUSTOMER | 25.25 | 0.00 | 368.15 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 25.25 | 0.00 | 368.15 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 77 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|-----------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDI | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | T TRUOMA | TYP SURPLUS |
| 201239 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DEL CARPIO, FEL | 24.00 | | 349.92 | I |
| 201240 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DELACRUZ, SEFER | 4.00 | | 58.32 | I |
| 201241 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DELACRUZ, SEFER | 34.00 | | 495.72 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 62.00 | 0.00 | 903.96 | |
| | | | | | | | | |
| | | | | CATEGORY | 62.00 | 0.00 | 903.96 | |

| | | | YSIDE CITYWIDE | DEC MY MY | | | | | 78 |
|-----------|----------|---------|------------------------|---------------------------|--------|---------|---------------|-----|---------|
| SALES JRN | L # U289 | LOC 001 | SUNNYSIDE CITYWIDE S A | REGNY NY ALES REGISTER | | | VCP CHOICE LE | | 7/13/12 |
| | | | ~ | | | | | | .,, |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201242 | 6/29/12 | 000008 | VISITING NURSE SERVICE | DELOSSANTOS, MA | 6.00 | | 87.48 | т | |
| 201212 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DELOSSANTOS, MA | 30.00 | | 437.40 | T | |
| 201213 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DELPOZO, MIGUEL | 4.00 | | 58.32 | T | |
| 201211 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DELPOZO, MIGUEL | 16.00 | | 233.28 | T | |
| 201246 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DELUCA, ANTIONE | 4.00 | | 58.32 | Ť | |
| 201247 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DELUCA, ANTIONE | 24.00 | | 349.92 | Ť | |
| 201248 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DEROMAN, MARIA | 2.00 | | 29.16 | T | |
| 201249 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DEY, KRISHNA | 3.00 | | 43.74 | Ī | |
| 201250 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DEZUMARAN, REBE | 44.00 | | 641.53 | I | |
| | | | | CUSTOMER | 133.00 | 0.00 | 1,939.15 | | |
| | | | | COSTOMER | 133.00 | 0.00 | 1,939.13 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 133.00 | 0.00 | 1,939.15 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 79 |
|------------|------------|------------|------------------------|----------------|--------|---------|------------------|----------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME | E W/O WALLS LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| T1770 T GT | | GTTGT 170 | GUGEOLER MANE | | ****** | | 33401DT | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 201251 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DIAZ, HILDA | 39.50 | | 575.91 I | |
| 201231 | 7/00/12 | 000008 | VISITING NORSE SERVICE | DIAZ, HILDA | 39.30 | | 373.91 1 | |
| | | | | | | | | |
| | | | | CATEGORY | 39.50 | 0.00 | 575.91 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | | 80 |
|-----------------------|---------|---------|--------------------------------------|-----------------|--------|---------|------------------------|-----|---------|
| SALES OWN | H 0205 | 100 001 | | ALES REGISTER | 2 | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201252 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DIAZ, MARIA | 35.00 | | 510.30 | I | |
| 201253 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DIAZ, OLGA | 6.00 | | 87.48 | I | |
| 201254 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DIAZ, OLGA | 46.00 | | 670.68 | I | |
| 201255 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DIAZ, ROSA | 6.00 | | 87.48 | I | |
| 201256 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DIAZ, ROSA | 36.00 | | 524.88 | I | |
| 201257 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DILLUVIO, MATTI | 10.00 | | 145.80 | I | |
| 201258 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DILLUVIO, MATTI | 50.00 | | 729.00 | I | |
| 201259 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DOMINGUEZ, MARI | 6.00 | | 87.48 | I | |
| 201260 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DOMINGUEZ, MARI | 36.00 | | 524.88 | I | |
| 201261 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DOMINGUEZ-REIN, | 20.00 | | 291.60 | I | |
| | | | | CUSTOMER | 251.00 | 0.00 | 3,659.58 | | |
| | | | | CATEGORY | 251.00 | 0.00 | 3,659.58 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 8 | 31 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|--------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | 5 | SALES REGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201262 | 7/06/12 | 000008 | VISITING NURSE SERVICE | DUTAN, SELINDA | 5.00 | | 72.90 | I | |
| 201263 | 7/06/12 | 800000 | VISITING NURSE SERVICE | DUTAN, SELINDA | 28.00 | | 408.24 | I | |
| | | | | | 22.00 | 0.00 | 401 14 | | |
| | | | | CUSTOMER | 33.00 | 0.00 | 481.14 | | |
| | | | | | | | | | |
| | | | | 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 - CCL CONGREGATE BILL WEEK ENDI | CARE PROGRAM |
|-----------------------|--------------------|-----------------------|--|----------------------------|---------------|---------|--|--------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | TYP SURPLUS |
| 201264 201265 | 6/01/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 3.00 12.00 | | 43.74 174.96 | I I |
| | | | | CUSTOMER | 15.00 | 0.00 | 218.70 | |
| | | | | CATEGORY | 15.00 | 0.00 | 218.70 | |

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|-----------|----------|---------|------------------------|----------------------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA | 7/13/12 |
| | | | | SALES REGISIER | | | BILL WEEK ENDING | //13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201266 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ECHEGARAY, MARI | 1.00 | | 14.58 I | |
| 201267 | 7/06/12 | 000008 | VISITING NURSE SERVICE | | 38.50 | | 561.34 I | |
| | | | | CHCEOMED | | | F7F 00 | |
| | | | | CUSTOMER | 39.50 | 0.00 | 575.92 | |
| | | | | | | | | |
| | | | | CATEGORY | 39.50 | 0.00 | 575.92 | |

| | | | YSIDE CITYWIDE | DEC MY MY | | | PAGE 1 - 8 | 4 |
|-----------|----------|---------|------------------------|-----------------------------|-------|---------|-------------------------------|---------|
| SALES JRN | ⊥ # UZ89 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201268 | 7/06/12 | 000008 | VISITING NURSE SERVICE | E EDELMAN, MILDRE | 13.00 | | 189.54 I | |
| | | | | CATEGORY | 13.00 | 0.00 | 189.54 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - | 85 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------|---------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | ICSA | | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 201269 | 7/06/12 | 800000 | VISITING NURSE SERVICE | EMILIAN, SIRPOO | 4.00 | | 58.32 | I | | |
| | | | | CATEGORY | 4.00 | 0.00 | 58.32 | | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 86 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE C | ARE PROGRAM |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201270 | 7/06/12 | 000008 | VISITING NURSE SERVICE | EPSTEIN, GEORGE | 16.00 | | 233.28 I | |
| 201271 | 7/06/12 | 000008 | VISITING NURSE SERVICE | EPSTEIN, GEORGE | 4.00 | | 58.32 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY ALES REGISTER | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | |
|-----------------------|---------|---------|---|---------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201272 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ESPEJO, FLORENC | 24.00 | | 349.92 I | |
| | | | | CATEGORY | 24.00 | 0.00 | 349.92 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 88 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|-------------|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201273 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ESPIN, CESAR | 9.00 | | 131.22 | I |
| 201274 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ESPIN, CESAR | 53.00 | | 772.74 | I |
| | | | | CUSTOMER | 62.00 | 0.00 | 903.96 | |
| | | | | | | | | |
| | | | | CATEGORY | 62.00 | 0.00 | 903.96 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHO | 0,5 |
|-----------------------|--------------------|-----------------------|---|----------------|---------------|---------|----------------------------|-------------|
| SALES UKN | ш # 0209 | LOC 001 | | SALES REGISTER | | | BILL WEEK END: | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT : | TYP SURPLUS |
| 201275 201276 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 6.00 21.00 | | 87.48 306.18 | I I |
| | | | | CUSTOMER | 27.00 | 0.00 | 393.66 | |
| | | | | CATEGORY | 27.00 | 0.00 | 393.66 | |

| | | | YSIDE CITYWIDE | DEC MY MY | | | PAGE 1 - | 90 |
|------------------|--------------------|------------------|---|------------------------------|-------|---------|------------------------------|------------|
| SALES JRN | L # U289 | LOC 001 | SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDII | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201277 201278 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | FADEN, ROBIN FADEN, ROBIN | 10.00 | | 145.80 874.80 | [[|
| | | | | CUSTOMER | 70.00 | 0.00 | 1,020.60 | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,020.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 91 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201279 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FAMBIATOU, PARA | 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 1 | VY. | | | PAGE 1 HOA HOSPICE | | 92 |
|-----------------------|---------|-----------------------|--------------------------------------|----------|----------|-----------|---------|-----------------------|------|---------|
| | | | S | SALES RI | EGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201280 | 7/06/12 | 000008 | VISITING NURSE SERVICE | | JOSEPH | 3.00 | | 43.74 | I | |
| 201281 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FARO, | JOSEPH - | 15.00 | | 218.70 | 1 | |
| | | | | | CUSTOMER | 18.00 | 0.00 | 262.44 | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 18.00 | 0.00 | 262.44 | | |

| RUN DATE (| | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 9 | 93 |
|------------|---------------------|---------------------|--------------------------------------|----------------|-------|---------|------------------|---------|
| SALES OWN | ш н 020) | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201282 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FAY, JULIA | 19.00 | | 277.02 I | |
| | | | | | | | | |
| | | | | CATEGORY | 19.00 | 0.00 | 277.02 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 94 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | A |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201283 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FERMIN, OROUIDI | 8.00 | | 116.64 I | |
| 201284 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FERMIN, ORQUIDI | 48.00 | | 699.84 I | |
| | | | | CLICEOMED | | 0.00 | 016 40 | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | |
| | | | | | | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 95 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201285 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FERNANDEZ, JORG | 15.00 | | 218.70 I | |
| | | | | CATEGORY | 15.00 | 0.00 | 218.70 | |

| | | | YSIDE CITYWIDE | DEC NY NY | | | | - 96 | |
|------------------|--------------------|------------------|---|-----------------------------|---------------|---------|--------------------------------|--------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | VCP CHOICE LI BILL WEEK ENI | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201286 201287 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | -, | 3.00 15.00 | | 43.74 218.70 | I I | |
| | | | | CUSTOMER | 18.00 | 0.00 | 262.44 | | |
| | | | | CATEGORY | 18.00 | 0.00 | 262.44 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 9 | |
|-----------|----------|---------|------------------------|----------------|-------|---------|--------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | CCL CONGREGATE CAR | |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201288 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FERRER, MARIE | 9.00 | | 131.22 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 131.22 | |

| RUN DATE 07/11/ | 12 - SUP SUN | NYSIDE CITYWIDE | | | | PAGE 1 | - 9 | 18 |
|-----------------|--------------|------------------------|----------------|-------|---------|---------------|--------|-------------|
| SALES JRNL # 02 | 89 LOC 001 | | REG NY NY | | | LTC NURSING H | HOMEW/ | O WALLS (LT |
| | | S | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201289 6/29/ | 12 000008 | VISITING NURSE SERVICE | FIUMARA, ROSE | 7.00 | | 102.06 | I | |
| 201290 6/29/ | 12 000008 | VISITING NURSE SERVICE | FIUMARA, ROSE | 8.25 | | 120.29 | I | |
| 201291 7/06/ | 12 000008 | VISITING NURSE SERVICE | FIUMARA, ROSE | 6.00 | | 87.48 | I | |
| 201292 7/06/ | 12 000008 | VISITING NURSE SERVICE | FIUMARA, ROSE | 38.00 | | 554.04 | I | |
| | | | CUSTOMER | 59.25 | 0.00 | 863.87 | | |
| | | | CATEGORY | 59.25 | 0.00 | 863.87 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 99 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201293 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FLEITMAN, KLARA | 6.00 | | 87.48 I | |
| | | | | | | | | |
| | | | | CATEGORY | 6.00 | 0.00 | 87.48 | |

| RUN DATE 07/11/12 SALES JRNL # 0289 | - SUP SUNI LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY ALES REGISTER | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | |
|--|----------------------------|--|--|---------------------------------|---------|--|---------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201294 7/06/12 201295 7/06/12 201296 7/06/12 201297 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | FOLLETTO, ROSIN FONG, ALEFINA FONTEBOA, GUILL FONTEBOA, GUILL | 35.00 16.00 5.00 30.00 | | 510.30 I 233.28 I 72.90 I 437.40 I | |
| | | | CUSTOMER | 86.00 | 0.00 | 1,253.88 | |
| | | | CATEGORY | 86.00 | 0.00 | 1,253.88 | |

| | | | YSIDE CITYWIDE | | | | | - 10 | |
|-----------|-----------|---------|---|--------------------------------|-------|---------|-----------------------------|------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTEI | | | LTC NURSING BILL WEEK EN | | 7/13/12 |
| | | | | SALES KEGISTEI | C | | DILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201298 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FRED, EULALIA | 8.00 | | 116.64 | т | |
| 201298 | 7/06/12 | 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | FRED, EULALIA FRED, EULALIA | 48.00 | | 699.84 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 1 VCP CHOICE LHCSA | .02 |
|----------|---------|---------|--------------------------------------|-----------------|-------|---------|--------------------------------|---------|
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201300 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FREDERICK, AMEL | 35.50 | | 517.59 I | |
| | | | | CATEGORY | 35.50 | 0.00 | 517.59 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 103 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|-----------------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | | S | ALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201301 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FREIJOSO, ROSA | 6.00 | | 87.48 | I |
| 201302 | 7/06/12 | 000008 | VISITING NURSE SERVICE | FREIJOSO, ROSA | 32.00 | | 466.56 | I |
| 201303 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FUNES, GEORGINA | 5.00 | | 72.90 | I |
| 201304 | 7/06/12 | 800000 | VISITING NURSE SERVICE | FUNES, GEORGINA | 30.00 | | 437.40 | I |
| | | | | CUSTOMER | 73.00 | 0.00 | 1,064.34 | |
| | | | | CATEGORY | 73.00 | 0.00 | 1,064.34 | |

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| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 105 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|-----------------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201312 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GALLO, BENJAMIN | 8.00 | | 116.64 | I |
| 201313 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GALLO, BENJAMIN | 40.00 | | 583.20 | I |
| 201314 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GARAY, ANGELES | 11.50 | | 167.67 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 59.50 | 0.00 | 867.51 | |
| | | | | | | | | |
| | | | | CATEGORY | 59.50 | 0.00 | 867.51 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 10 |)6 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201315 | 6/29/12 | 000008 | VISITING NURSE SERVICE | GARCIA, CONCEPC | 12.00 | | 174.96 | I | |
| 201316 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GARCIA, CONCEPC | 38.00 | | 554.04 | I | |
| | | | | CUSTOMER | 50.00 | 0.00 | 729.00 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 50.00 | 0.00 | 729.00 | | |

| l | RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 10 | 7 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|-------------------|---------|
| | SALES JRN | ъ # 0289 | LOC 001 | | REG NY NY | | | HOA HOSPICE ADULT | |
| | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 201317 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GARCIA, JESUS | 20.00 | | 291.60 I | |
| | | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 108 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WA | LLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/1 | 3/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | PLUS |
| 201318 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GARCIA, OLGA | 30.00 | | 437.40 I | |
| 201319 | 6/29/12 | 800000 | VISITING NURSE SERVICE | GEBHARDT, DOROT | 8.00 | | 116.64 I | |
| 201320 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GEBHARDT, DOROT | 24.00 | | 349.92 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 62.00 | 0.00 | 903.96 | |
| | | | | | | | | |
| | | | | CATEGORY | 62.00 | 0.00 | 903.96 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - : | 109 | |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| 201321 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GEORGE, MERCEDE | 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 - ADU ADULT | 110 |
|---|------------------------|---------|---------------------|--------------------------------------|---------------------------|-------|---------|-----------------------|---------|
| | | | | | S A L E S R E G I S T E R | | | BILL WEEK ENDING | 7/13/12 |
| 1 | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 2 | 201322 | 7/06/12 | 800000 | VISITING NURSE SERVICE | E GERSHON, NORMAN | 2.00 | | 29.16 I | |
| | | | | | | | | | |
| | | | | | CATEGORY | 2.00 | 0.00 | 29.16 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 111 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------------|--------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | AUR ADULT REHAB ONLY | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7, | /13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP ST | URPLUS |
| 201323 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GILBERT, LILIAN | 11.75 | | 171.32 I | |
| | | | | | | | | |
| | | | | CATEGORY | 11.75 | 0.00 | 171.32 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 11 | .2 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|--------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201324 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GIORGIO, WILLIA | 7.00 | | 102.06 | I | |
| 201325 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GIORGIO, WILLIA | 40.25 | | 586.85 | I | |
| | | | | CUSTOMER | 47.25 | 0.00 | 688.91 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 47.25 | 0.00 | 688.91 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | - 11 | .3 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGA | | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201326 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GOLIGHTLY, OZEL | 8.00 | | 116.64 | I | |
| 201327 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOLIGHTLY, OZEL | 48.00 | | 699.84 | I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 816.48 | | |
| | | | | CALEGORI | 30.00 | 0.00 | 010.40 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 114 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------------|-------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 7/ | 13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | RPLUS |
| 201328 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOMEZ, JOSEFINA | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| | | | YSIDE CITYWIDE | | | | - | 115 |
|-----------|-----------|---------|------------------------|-----------------|-------|---------|-----------------|---------------|
| SALES JRN | IL # 0289 | LOC 001 | | REG NY NY | | | LTC NURSING HOM | • |
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | IG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201329 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GOMEZ, ROSANA | 35.00 | | 510.30 | |
| 201330 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOMEZ, VICTORIA | 4.00 | | 58.32 | <u>.</u> - |
| 201331 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOMEZ, VICTORIA | 29.00 | | 422.82 | • |
| | | | | | 60.00 | 0.00 | 001 44 | |
| | | | | CUSTOMER | 68.00 | 0.00 | 991.44 | |
| | | | | | | | | |
| | | | | CATEGORY | 68.00 | 0.00 | 991.44 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 11 | .6 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | ъ # 0289 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201332 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GONGORA, MARUJA | 8.00 | | 116.64 I | |
| | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 - 11 ADU ADULT BILL WEEK ENDING | |
|----------|---------|-----------------------|---|-----------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201333 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GONZALEZ, CARLO | 9.00 | | 131.22 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 131.22 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 – | 118 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS. | A |
| | | | Si | ALES REGISTER | | | BILL WEEK ENDIN | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201334 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GONZALEZ, DOLOR | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | - 119 | ١ |
|-----------|---------------|---------|------------------------|---|--------------|---------|---------------|-------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | TNO | 7/12/10 |
| | | | • | SALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 001005 | T / 0 C / 1 O | | | | 5 5 0 | | 00.10 | _ | |
| 201335 | 7/06/12 | 000008 | VISITING NURSE SERVICE | , | 5.50 | | 80.19 | I | |
| 201336 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GONZALEZ, ELBA | 35.75 | | 521.24 | Τ | |
| | | | | CUSTOMER | 41.25 | 0.00 | 601.43 | | |
| | | | | *************************************** | | | | | |
| | | | | | | | | | |
| | | | | CATEGORY | 41.25 | 0.00 | 601.43 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 120 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS (LT |
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 201337 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GONZALEZ, ELSA | 30.00 | | 437.40 I |
| 201338 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOVERDOVSKIY, N | 3.00 | | 43.74 I |
| 201339 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GOVERDOVSKIY, N | 15.00 | | 218.70 I |
| | | | | CUSTOMER | 48.00 | 0.00 | 699.84 |
| | | | | | | | |
| | | | | CATEGORY | 48.00 | 0.00 | 699.84 |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 12 | 1 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | ICSA | |
| | | | Ş | SALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201340 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GOYES, ELBA | 4.00 | | 58.32 | I | |
| 201341 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GOYES, ELBA | 16.00 | | 233.28 | I | |
| 201342 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GRAVER, EDNA | 40.00 | | 583.20 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 60.00 | 0.00 | 874.80 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 60.00 | 0.00 | 874.80 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 122 | |
|-----------|----------|---------|------------------------|-----------------|-------|---------|-----------------------|-----|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13 | /12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURP | LUS |
| 201343 | 6/29/12 | 000008 | VISITING NURSE SERVICE | GREENBAUM, MASA | 8.00 | | 116.64 I | |
| 201344 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GREENBAUM, MASA | 8.00 | | 116.64 I | |
| | | | | CUSTOMER | 16.00 | 0.00 | 233.28 | |
| | | | | | | | | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 LAA LOMBARDI BILL WEEK EN | | |
|----------------------------|-------------------------------|----------------------------|--|-----------------------------|----------------------|---------|--|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | | SURPLUS |
| 201345 201346 201347 | 6/01/12 6/15/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | GRESSINE, ARNOL | 7.00 7.00 7.00 | | 102.06 102.06 102.06 | I I T | |
| 201348 | 7/06/12 | 000008 | VISITING NURSE SERVICE | | 41.25 | | 601.43 | Ī | |
| | | | | CUSTOMER | 62.25 | 0.00 | 907.61 | | |
| | | | | CATEGORY | 62.25 | 0.00 | 907.61 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 12 | 24 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | ICSA | |
| | | | S | SALES REGISTER | | | BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201349 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GUEVARA, ELENA | 12.00 | | 174.96 | I | |
| 201350 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GUEVARA, ELENA | 72.00 | | 1,049.76 | I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,224.72 | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,224.72 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | | |
|-----------------------|--------------------|-----------------------|---|------------------------------------|----------------|---------|-----------------------|--------|---------|
| | | | 2 | SALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP | SURPLUS |
| 201351 | 7/06/12 | 000008 | VISITING NURSE SERVICE | GUTHRIE, LORETH | 9.00 | | 131.22 | I | |
| 201352 201353 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | GUTIERREZ, ANGE GUTIERREZ, ANGE | 11.50 71.50 | | 167.67 1,042.47 | I I | |
| | | | | CHICHOMED | | | 1 241 26 | | |
| | | | | CUSTOMER | 92.00 | 0.00 | 1,341.36 | | |
| | | | | CATEGORY | 92.00 | 0.00 | 1,341.36 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 12 | |
|-----------|-----------|---------|------------------------|----------------------------|-------|---------|--|---------|
| SALES JRN | IL # 0289 | 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 |
| 201354 | 7/06/12 | 800000 | VISITING NURSE SERVICE | GUTIERREZ, JOSE | 6.00 | | 87.48 I | |
| | | | | CATECODY | | | 07 40 | |
| | | | | CATEGORY | 6.00 | 0.00 | 87.48 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 127 ADU ADULT | |
|------------|---------|---------|--------------------------------------|----------------|-------|---------|---------------------------|---------|
| | | | | SALES REGISTER | | | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | | SURPLUS |
| 201355 | 7/06/12 | 000008 | VISITING NURSE SERVICE | HARDY, ANNA | 4.00 | | 58.32 I | |
| | | | | CATEGORY | 4.00 | 0.00 | 58.32 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 12 | 8 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | ICSA | |
| | | | S | SALES REGISTER | | | BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201356 | 7/06/12 | 000008 | VISITING NURSE SERVICE | HENAO, VICTORIA | 20.00 | | 291.60 | I | |
| 201357 | 7/06/12 | 800000 | VISITING NURSE SERVICE | HENDY, BERNICE | 28.75 | | 419.18 | I | |
| | | | | CUSTOMER | 48.75 | 0.00 | 710.78 | | |
| | | | | COSTOMER | 40.75 | 0.00 | /10./6 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 48.75 | 0.00 | 710.78 | | |

| RUN DATE 07/11/12 - SALES JRNL # 0289 | - SUP SUNI LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDIN | |
|--|--------------------------------------|--|--|--------------------------------|---------|---|--------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | - , -, |
| 201358 7/06/12 201359 7/06/12 201360 7/06/12 201361 7/06/12 | 000008 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | HENRIQUEZ, MARI HENRIQUEZ, MARI HERNANDEZ, MARI HERNANDEZ, MARI | 8.00 48.00 6.00 35.00 | | 116.64 I 699.84 I 87.48 I 510.31 I | |
| | | | CUSTOMER | 97.00 | 0.00 | 1,414.27 | |
| | | | CATEGORY | 97.00 | 0.00 | 1,414.27 | |

| RUN DATE SALES JRN | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 130 VCP CHOICE LHCSA BILL WEEK ENDING 7/13/12 | |
|-----------------------|--------------------|---------------------|---|-----------------------------|---------------|---------|--|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201362 201363 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 6.00 24.00 | | 87.48 I 349.92 I | |
| | | | | CUSTOMER | 30.00 | 0.00 | 437.40 | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 LTC NURSING H | - 131 OMEW/O WALLS (LT |
|-----------------------|---------|---------|--------------------------------------|-----------------|--------|---------|-------------------------|---------------------------|
| | | | 2 | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201364 | 7/06/12 | 000008 | VISITING NURSE SERVICE | HERRERA, ANGELA | 31.25 | | 455.63 | I |
| 201365 | 7/06/12 | 000008 | VISITING NURSE SERVICE | HERRERA, HORACI | 29.25 | | 426.47 | I |
| 201366 | 7/06/12 | 800000 | VISITING NURSE SERVICE | HUNGRIA, SABINA | 5.00 | | 72.90 | I |
| 201367 | 7/06/12 | 000008 | VISITING NURSE SERVICE | HUNGRIA, SABINA | 36.00 | | 524.88 | I |
| | | | | CUSTOMER | 101.50 | 0.00 | 1,479.88 | |
| | | | | CATEGORY | 101.50 | 0.00 | 1,479.88 | |

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|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201368 | 7/06/12 | 800000 | VISITING NURSE SERVICE | IBASCO, SOFIA | 20.00 | | 291.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DA | TE 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 133 | |
|--------|-------------|------------|------------------------|-----------------|-------|---------|----------------------|----------|
| SALES | JRNL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME W/C | WALLS LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING 7 | 7/13/12 |
| INVOIC | E# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | SURPLUS |
| INVOIC | E# DAIE | COSI NO | COSTOMER NAME | KEFEKENCE | поокъ | IAA AMI | AMOUNT TIP 3 | OKPLUS |
| 201369 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ICIANO, ALFREDO | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 134 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------------------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | | AIDS ADULT POPUL |
| | | | : | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 201370 | 7/06/12 | 800000 | VISITING NURSE SERVICE | INOSTROZA, RAPH | 5.00 | | 72.90 | I |
| 201371 | 7/06/12 | 800000 | VISITING NURSE SERVICE | INOSTROZA, RAPH | 40.00 | | 583.20 | I |
| | | | | CUSTOMER | 45.00 | 0.00 | 656.10 | |
| | | | | 0001011111 | 00 | 0.00 | 130.10 | |
| | | | | | 45.00 | | | |
| | | | | CATEGORY | 45.00 | 0.00 | 656.10 | |

| | | | YSIDE CITYWIDE | | | | 11102 | - 135 | 5 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------|-------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | E /10 /10 |
| | | | 2 | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201372 | 7/06/12 | 000008 | VISITING NURSE SERVICE | INSERRA, CATHER | 7.00 | | 102.06 | I | |
| 201373 | 7/06/12 | 800000 | VISITING NURSE SERVICE | INSERRA, CATHER | 42.00 | | 612.36 | I | |
| | | | | CUSTOMER | 49.00 | 0.00 | 714.42 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 49.00 | 0.00 | 714.42 | | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 136 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | 1 |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201374 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ISKENDERIAN, KA | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | PAGE 1 - 1 CCL CONGREGATE CA BILL WEEK ENDING | ARE PROGRAM |
|----------|---------|---------|---|----------------------------|-------|---------|---|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201375 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JACSO, ERZSEBET | 3.00 | | 43.74 I | |
| | | | | CATEGORY | 3.00 | 0.00 | 43.74 | |

| RUN DATE 07 SALES JRNL | | | SIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY S A L E S | | STER | | | PAGE 1 LTC NURSING BILL WEEK EN | | |
|---------------------------|----------|---------|-------------------------------------|---------------------|--------------------------|----------|---------------|---------|---------------------------------------|-----|---------|
| INVOICE# | DATE CUS | ST NO C | CUSTOMER NAME | | REFERENCE | | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | VISITING NURSE SERV | | JAKLITSCH, JAKLITSCH, | | 6.00 40.00 | | 87.48 583.20 | I | |
| | | | | | CUSTO | DMER | 46.00 | 0.00 | 670.68 | | |
| | | | | | CATEG | GORY | 46.00 | 0.00 | 670.68 | | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | - 13 | 9 |
|-----------------------|----------|------------|--------------------------------------|-----------------|--------|---------|-------------------------|------|---------|
| SALES UKN | ш # 0209 | TOC 001 | | ALES REGISTER | | | BILL WEEK END | | 7/13/12 |
| | | | | | - | | | | .,, |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201378 | 7/06/12 | 000008 | VISITING NURSE SERVICE | JARA DEURUCHIM, | 10.00 | | 145.80 | т | |
| 201376 | , , | | | · | | | | | |
| | 7/06/12 | 000008 | VISITING NURSE SERVICE | JARAMILLO PAL, | 8.00 | | 116.64 | 1 | |
| 201380 | 7/06/12 | 000008 | VISITING NURSE SERVICE | JEWAT, LUCILLE | 11.00 | | 160.38 | I | |
| 201381 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JEWAT, LUCILLE | 66.00 | | 962.28 | I | |
| 201382 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JHAVERI, RAMESH | 4.00 | | 58.32 | I | |
| 201383 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JHAVERI, RAMESH | 20.00 | | 291.60 | I | |
| | | | | | 110 00 | | 1 525 00 | | |
| | | | | CUSTOMER | 119.00 | 0.00 | 1,735.02 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 119.00 | 0.00 | 1,735.02 | | |
| | | | | CATEGORI | 117.00 | 0.00 | 1,733.02 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 HOA HOSPICE A BILL WEEK END | - |
|-----------------------|--------------------|-----------------------|---|------------------------------------|-------|---------|--|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201384 201385 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | JIANNARAS, ANNA JIANNARAS, ANNA | 10.00 | | 145.80 874.80 | I I |
| | | | | CUSTOMER | 70.00 | 0.00 | 1,020.60 | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,020.60 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | | REG NY NY SALES REGISTER | | | PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN | |
|-----------------------|---------|-----------------------|------------------------|-----------------------------|-------|---------|--|-----------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201386 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JIMENEZ, ALTAGR | 27.50 | | 400.95 I | |
| | | | | CATEGORY | 27.50 | 0.00 | 400.95 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 142 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|-----------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | A. |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 201387 | 7/06/12 | 800000 | VISITING NURSE SERVICE | JIMENEZ, BETTY | 15.00 | | 218.70 I | |
| | | | | CATEGORY | 15.00 | 0.00 | 218.70 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 14 ADU ADULT | 13 |
|-------------|-----------|---------|--------------------------------------|-----------------|-------|---------|--------------------------|---------|
| DILLED CITY | L 0205 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201388 | 7/06/12 | 000008 | VISITING NURSE SERVICE | JOHNSON, DOROTH | 16.75 | | 244.22 I | |
| | | | | | | | | |
| | | | | CATEGORY | 16.75 | 0.00 | 244.22 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE REG NY NY LTC NUR S A L E S R E G I S T E R BILL WE | | | | | | | | | 14 'O WALLS (LT 7/13/12 |
|---|-------------------------------|----------------------------|--|---|------------------------|---------|----------------------------|-------------|-------------------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201389 201390 201391 | 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | JORRIN, HORTENS JORRIN, NILIO JORRIN, NILIO | 25.00 7.00 30.75 | | 364.50 102.06 448.34 | I I I | |
| | | | | CUSTOMER | 62.75 | 0.00 | 914.90 | | |
| | | | | CATEGORY | 62.75 | 0.00 | 914.90 | | |

| RUN DATE 07/11/12 | - SUP SUN | NYSIDE CITYWIDE | | | | PAGE 1 | - 145 | |
|-------------------|-----------|------------------------|-----------------|-------|---------|---------------|-------------|--|
| SALES JRNL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | CSA | |
| | | 2 | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 | |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP SURPLUS | |
| 201392 7/06/12 | 000008 | VISITING NURSE SERVICE | KAUR, SARD | 5.00 | | 72.90 | I | |
| 201393 7/06/12 | 000008 | VISITING NURSE SERVICE | KAUR, SHARAN | 4.50 | | 65.61 | I | |
| 201394 7/06/12 | 000008 | VISITING NURSE SERVICE | KAUR, SHARAN | 50.25 | | 732.65 | I | |
| 201395 7/06/12 | 800000 | VISITING NURSE SERVICE | KEARNEY, LORRAI | 18.50 | | 269.74 | I | |
| | | | CUSTOMER | 78.25 | 0.00 | 1,140.90 | | |
| | | | CATEGORY | 78.25 | 0.00 | 1,140.90 | | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 146 | |
|----------|------------|----------|------------------------|-------------------|-------|---------|--------------------------|--|
| SALES JR | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING 7/13/12 | |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| | | | | | | | | |
| 201396 | 7/06/12 | 000008 | VISITING NURSE SERVICE | E KEINATH, WALTER | 12.00 | | 174.96 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 12.00 | 0.00 | 174.96 | |

| RUN DATE (| | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 1 HOA HOSPICE ADULT | = : |
|--------------|-----------|----------|--------------------------------------|----------------|-------|---------|---------------------------------|---------|
| 011220 01413 | 2 11 0205 | 200 001 | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201397 | 7/06/12 | 000008 | VISITING NURSE SERVICE | KHAN, MARGARET | 16.00 | | 233.28 I | |
| | | | | | | | | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| RUN DATE 07 | 7/11/12 - \$ | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 148 |
|-------------|--------------|----------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRNL | # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | !SA |
| | | | S | ALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | YP SURPLUS |
| 201398 7 | 7/06/12 | 800000 | VISITING NURSE SERVICE | KILIMLIAN, PEPR | 8.00 | | 116.64 | I |
| 201399 7 | 7/06/12 | 800000 | VISITING NURSE SERVICE | KILIMLIAN, PEPR | 16.00 | | 233.28 | I |
| 201400 7 | 7/06/12 (| 800000 | VISITING NURSE SERVICE | KOUTROUBAS, THE | 8.00 | | 116.64 | I |
| 201401 7 | 7/06/12 | 800000 | VISITING NURSE SERVICE | KOUTROUBAS, THE | 47.75 | | 696.20 | I |
| | | | | CUSTOMER | 79.75 | 0.00 | 1,162.76 | |
| | | | | CATEGORY | 79.75 | 0.00 | 1,162.76 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 49 |
|-----------|-----------|---------|------------------------|----------------------------|-------|---------|-------------------------------|---------|
| SALES JRN | IL # 0289 | TOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201402 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LANDAU, BERNARD | 5.75 | | 83.84 I | |
| | | | | CATEGORY | 5.75 | 0.00 | 83.84 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 150 | |
|-----------|------------|----------|------------------------|-----------------|-------|---------|---------------|-------------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | CSA | |
| | | | | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS | |
| 201403 | 6/08/12 | 000008 | VISITING NURSE SERVICE | LARA-MORA, BELE | 8.00 | | 116.64 | I | |
| 201404 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LARA-MORA, BELE | 8.00 | | 116.64 | I | |
| 201405 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LARA-MORA, BELE | 48.00 | | 699.84 | I | |
| | | | | CUSTOMER | 64.00 | 0.00 | 933.12 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 64.00 | 0.00 | 933.12 | | |

| | | | YSIDE CITYWIDE | REG NY NY | | | 11102 | - 15 | 1 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|----------------------------|------|---------|
| SALES JRN | ш # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201406 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LARKIN, THERESA | 8.00 | | 116.64 | I | |
| 201407 | 6/29/12 | 800000 | VISITING NURSE SERVICE | LASAK, MICHAEL | 3.00 | | 43.74 | I | |
| 201408 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LASAK, MICHAEL | 9.00 | | 131.22 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 152 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------------------|--------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALI | LS (LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING 7/13 | 12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPI | JUS |
| 201409 | 6/22/12 | 000008 | VISITING NURSE SERVICE | LEE, KATHLEEN | 4.00 | | 58.32 I | |
| | | | | • | | | | |
| 201410 | 6/29/12 | 000008 | VISITING NURSE SERVICE | LEE, KATHLEEN | 4.00 | | 58.32 I | |
| 201411 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEE, KATHLEEN | 4.00 | | 58.32 I | |
| 201412 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEE, KATHLEEN | 12.00 | | 174.96 I | |
| 201413 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEGASPI, CECILI | 11.50 | | 167.68 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 35.50 | 0.00 | 517.60 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 35.50 | 0.00 | 517.60 | |

| RUN DATE | UN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 153 | | | | | | | | | | |
|-----------|--|---------|------------------------|----------------|-------|---------|---------------|--------------|--|--|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | | | |
| | | | : | SALES REGISTE | R | | BILL WEEK END | DING 7/13/12 | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS | | | |
| 201414 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LENDOIRO, JUAN | 2.50 | | 36.45 | I | | | |
| 201415 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEON, EDELMIRA | 3.00 | | 43.74 | I | | | |
| 201416 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEON, EDELMIRA | 25.00 | | 364.50 | I | | | |
| | | | | | | | | | | | |
| | | | | CUSTOMER | 30.50 | 0.00 | 444.69 | | | | |
| | | | | | | | | | | | |
| | | | | CATEGORY | 30.50 | 0.00 | 444.69 | | | | |

| | | | YSIDE CITYWIDE | | | | | - 15 | 54 |
|------------|----------|---------|------------------------|-----------------|--------|---------|------------------|------|---------|
| SALES JRNI | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | ALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201417 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LEWIS, CATHERIN | 8.00 | | 116.64 | I | |
| 201418 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LEWIS, CATHERIN | 48.00 | | 699.84 | I | |
| 201419 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LIGARDO, SOL M | 29.75 | | 433.76 | I | |
| 201420 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LIRIANO, FRANCI | 10.00 | | 145.80 | I | |
| 201421 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LIRIANO, FRANCI | 58.00 | | 845.64 | I | |
| 201422 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LITSAS, MARTHA | 23.00 | | 335.34 | I | |
| | | | | CUSTOMER | 176.75 | 0.00 | 2,577.02 | | |
| | | | | CATEGORY | 176.75 | 0.00 | 2,577.02 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 155 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|--------------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME | W/O WALLS LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| TATTOTOTI | D3.000 | GIIGE NO | CHCEOMED NAME | DEFENDA | HOHDG | max anm | AMOUNTE ENTE | GIIDDI IIG |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201423 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LLANES, ELEAZER | 29.00 | | 422.82 I | |
| 201123 | 7,00712 | 000000 | VIBILING NORDE BERVICE | | 25.00 | | 122.02 | |
| | | | | | | | | |
| | | | | CATEGORY | 29.00 | 0.00 | 422.82 | |

| | | | PAGE 1 | - 156 | |
|-----------------|--|---|--|---|--|
| REG NY NY | | | LTC NURSING H | HOMEW/C | WALLS (LT |
| SALES REGISTER | | | BILL WEEK END | DING | 7/13/12 |
| REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| LOCORRIERE, JOS | 8.00 | | 116.64 | I | |
| LOCORRIERE, JOS | 48.00 | | 699.84 | I | |
| LOGAN, ADELE | 6.00 | | 87.48 | I | |
| LOGAN, ADELE | 36.00 | | 524.88 | I | |
| | | | | | |
| CUSTOMER | 98.00 | 0.00 | 1,428.84 | | |
| | | | | | |
| CATEGORY | 98 NN | 0.00 | 1 428 84 | | |
| 1 | REFERENCE LOCORRIERE, JOS LOCORRIERE, JOS LOCORNIERE, JOS LOGAN, ADELE LOGAN, ADELE | REFERENCE HOURS LOCORRIERE, JOS 8.00 LOCORRIERE, JOS 48.00 LOGAN, ADELE 6.00 LOGAN, ADELE 36.00 CUSTOMER 98.00 | REFERENCE HOURS TAX AMT LOCORRIERE, JOS 8.00 LOCORRIERE, JOS 48.00 LOGAN, ADELE 6.00 LOGAN, ADELE 36.00 CUSTOMER 98.00 0.00 | REG NY NY S A L E S R E G I S T E R REFERENCE HOURS TAX AMT AMOUNT LOCORRIERE, JOS 8.00 116.64 LOCORRIERE, JOS 48.00 699.84 LOGAN, ADELE 6.00 87.48 LOGAN, ADELE 36.00 524.88 CUSTOMER 98.00 0.00 1,428.84 | REG NY NY S A L E S R E G I S T E R REFERENCE HOURS TAX AMT AMOUNT TYP LOCORRIERE, JOS 8.00 116.64 I LOCORRIERE, JOS 48.00 699.84 I LOGAN, ADELE 6.00 87.48 I LOGAN, ADELE 36.00 524.88 I CUSTOMER 98.00 0.00 1,428.84 |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 57 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201428 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LONDONO, AMIRA | 10.00 | | 145.80 I | |
| 201429 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LONDONO, AMIRA | 48.00 | | 699.84 I | |
| | | | | CUSTOMER | 58.00 | 0.00 | 845.64 | |
| | | | | CATEGORY | 58.00 | 0.00 | 845.64 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | | REG NY NY SALES REGIST | E R | | PAGE 1 LTC NURSING BILL WEEK EN | | |
|----------------------------|-------------------------------|----------------------------|--|--|-----------------------|---------|---------------------------------------|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201430 201431 201432 | 6/22/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | LONDONO, MARIA LONDONO, MARIA LONDONO, MARIA | 6.00 6.00 36.00 | | 87.48 87.48 524.88 | I I I | |
| | | | | CUSTOMER | 48.00 | 0.00 | 699.84 | | |
| | | | | CATEGORY | 48.00 | 0.00 | 699.84 | | |

| RUN DATE 0 | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | - 15 | 9 |
|-------------|--------------------|------------------|---|------------------------------------|---------------|---------|------------------------|--------|---------|
| DALLO GIAVE | π 0200 | 100 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | LOPEZ, ANGELICA LOPEZ, ANGELICA | 4.75 30.00 | | 69.26 437.40 | I I | |
| 201435 | 7/06/12 | 000008 | VISITING NURSE SERVICE | LOPEZ, GRACIELA | 8.00 | | 116.64 | I | |
| | | | | CUSTOMER | 42.75 | 0.00 | 623.30 | | |
| | | | | CATEGORY | 42.75 | 0.00 | 623.30 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 160 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/C | WALLS (LT |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201436 | 6/29/12 | 000008 | VISITING NURSE SERVICE | LOPEZ, MARIA | 12.00 | | 174.96 I | |
| 201437 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LOPEZ, MARIA | 6.00 | | 87.48 I | |
| 201438 | 7/06/12 | 800000 | VISITING NURSE SERVICE | LOPEZ, MARIA | 36.00 | | 524.88 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 54.00 | 0.00 | 787.32 | |
| | | | | | | | | |
| | | | | CATEGORY | 54.00 | 0.00 | 787.32 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 16 ADU ADULT BILL WEEK ENDING | 1 7/13/12 |
|----------------------------|-------------------------------|----------------------------|--|---|-------------------------|---------|--|--------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201439 201440 201441 | 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | LOPEZDELCASTIL, LOPEZDELCASTIL, LOZADA, LAURA | 10.00 59.75 12.00 | | 145.80 I 871.16 I 174.96 I | |
| | | | | CUSTOMER | 81.75 | 0.00 | 1,191.92 | |
| | | | | CATEGORY | 81.75 | 0.00 | 1,191.92 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 1 CCL CONGREGATE CA BILL WEEK ENDING | |
|----------------------------|-------------------------------|----------------------------|--|--|------------------------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201442 201443 201444 | 7/06/12 6/22/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | LUCES, LETICIA LYMN, ANGIE LYMN, ANGIE | 19.75 5.00 20.00 | | 287.96 I 72.90 I 291.60 I | |
| | | | | CUSTOMER | 44.75 | 0.00 | 652.46 | |
| | | | | CATEGORY | 44.75 | 0.00 | 652.46 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 163 | |
|-----------|----------|---------|------------------------|----------------|-------|---------|--------------------------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201445 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MACCHIA, CATHY | 8.00 | | 116.64 I | |
| 201446 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MACCHIA, CATHY | 28.00 | | 408.24 I | |
| | | | | CUSTOMER | 36.00 | 0.00 | 524.88 | |
| | | | | CATEGORY | 36.00 | 0.00 | 524.88 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - CCL CONGREGATE (BILL WEEK ENDING | |
|----------------------------|-------------------------------|----------------------------|--|-----------------------------|------------------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201447 201448 201449 | 6/29/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | MAGILLIGAN, LOR | 12.00 6.00 24.00 | | 174.96 I 87.48 I 349.92 I | |
| | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | |
| | | | | CATEGORY | 42.00 | 0.00 | 612.36 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 65 |
|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | E (10 (10 |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201450 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MANGAN, JOHN | 20.00 | | 291.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE 07/11/12 - | - SUP SUNNYSIDE CITYWIDE | | | | PAGE 1 - 166 |
|---------------------|-------------------------------|-----------------|-------|---------|--------------------------|
| SALES JRNL # 0289 | LOC 001 SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT |
| | S | ALES REGISTER | | | BILL WEEK ENDING 7/13/12 |
| INVOICE# DATE | CUST NO CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 201451 7/06/12 | 000008 VISITING NURSE SERVICE | MANNINO, CALOGE | 4.00 | | 58.32 I |
| 201452 7/06/12 | 000008 VISITING NURSE SERVICE | MANNINO, CALOGE | 16.00 | | 233.28 I |
| | | CUSTOMER | 20.00 | 0.00 | 291.60 |
| | | | | | |
| | | CATEGORY | 20.00 | 0.00 | 291.60 |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 16 | 57 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201453 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MANNINO, FRANCE | 1.00 | | 174.96 | I | |
| 201454 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MANNINO, FRANCE | 5.00 | | 874.80 | I | |
| | | | | CUSTOMER | 6.00 | 0.00 | 1,049.76 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 6.00 | 0.00 | 1,049.76 | | |

| RUN DATE SALES JRN | | | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY A L E S R E G I S T E R | | | PAGE 1 - LTC NURSING HOME BILL WEEK ENDING | W/O WALLS (LT |
|-----------------------|---------|---------|--|--------------------------------------|-------|---------|--|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201455 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MANOS, VASILIKE | 30.00 | | 437.40 I | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 16 | 9 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGA | | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201456 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MARGOLIS, GERTR | 9.00 | | 131.22 | I | |
| 201457 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARINO, ANN | 24.00 | | 349.92 | I | |
| | | | | CUSTOMER | 33.00 | 0.00 | 481.14 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 33.00 | 0.00 | 481.14 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 70 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | AMH ADULT MENTAL | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201458 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARKHAM, RUDOLP | 9.00 | | 131.22 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 131.22 | |

| RUN DATE 07/11/12 - SALES JRNL # 0289 | - SUP SUNN LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY A L E S R E G I S T E R | | | PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING | |
|--|--------------------------------------|--|--|--------------------------------|---------|--|---------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201459 7/06/12 201460 7/06/12 201461 6/29/12 201462 7/06/12 | 000008 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | MARKS, ANN MARKS, ANN MARMOL ESPINAL, MARMOL ESPINAL, | 8.00 46.00 5.00 25.00 | | 116.64 I 670.68 I 72.90 I 364.50 I | |
| | | | CUSTOMER | 84.00 | 0.00 | 1,224.72 | |
| | | | CATEGORY | 84.00 | 0.00 | 1,224.72 | |

| RUN DATE (| 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 172 |
|------------|------------|------------|------------------------|----------------|-------|---------|---------------|-------------------|
| SALES JRNI | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | HOMEW/O WALLS (LT |
| | | | : | SALES REGISTER | | | BILL WEEK EN | DING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201463 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MARMOL, LIDIA | 4.00 | | 58.32 | I |
| 201464 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARMOL, LIDIA | 32.00 | | 466.56 | I |
| | | | | CUSTOMER | 36.00 | 0.00 | 524.88 | |
| | | | | COBTORER | 30.00 | 0.00 | 321.00 | |
| | | | | | | | | |
| | | | | CATEGORY | 36.00 | 0.00 | 524.88 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 17 | /3 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | | |
| | | | | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201465 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MARTE, JOSE | 7.50 | | 109.35 | I | |
| 201466 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTIN, ELAUCAD | 6.00 | | 87.48 | I | |
| | | | | CUSTOMER | 13.50 | 0.00 | 196.83 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 13.50 | 0.00 | 196.83 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - 174 |
|-----------------------|--------------------|-----------------------|---|----------------|---------------|---------|---------------------|-------------|
| | | | | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201467 | 6/15/12 | 800000 | VISITING NURSE SERVICE | | 6.00 | | 87.48 | Ī |
| 201468 201469 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 5.75 18.00 | | 83.84 262.44 | I I |
| | | | | | 29.75 | 0.00 | 433.76 | |
| | | | | CUSTOMER | 29.75 | 0.00 | 433.70 | |
| | | | | CATEGORY | 29.75 | 0.00 | 433.76 | |

| RUN DATE (| 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 175 | 5 |
|------------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRNI | և # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201470 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, CAMIL | 13.75 | | 200.48 I | |
| | | | | | | | | |
| | | | | CATEGORY | 13.75 | 0.00 | 200.48 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 CCL CONGREGA | - 17 | |
|-----------------------|--------------------|-----------------------|--|----------------|----------------|---------|------------------------|------|---------|
| Brilling Grav | .1 0205 | 100 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201471 201472 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 10.00 60.00 | | 145.80 874.80 | I | |
| | | | | CUSTOMER | 70.00 | 0.00 | 1,020.60 | | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,020.60 | | |

| | | 07/11/12 - L # 0289 | | | REG NY NY SALES REGISTER | | | ADU ADULT | 7/13/12 |
|---|----------|------------------------|---------|------------------------|-----------------------------|-------|---------|------------------------------|---------|
| | INVOICE# | DATE | CUST NO | | SALES REGISTER REFERENCE | HOURS | TAX AMT | BILL WEEK ENDING AMOUNT TYP | SURPLUS |
| 2 | 201473 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, FEDOR | 20.00 | | 291.60 I | |
| | | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 17 | '8 | |
|-----------|------------|------------|------------------------|-----------------|--------|---------|------------------|------|---------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | | |
| | | | S | SALES REGISTER | 1 | | BILL WEEK EN | DING | 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 201474 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, MARGA | 30.00 | | 437.40 | I | | |
| 201475 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, MARTA | 5.75 | | 83.84 | I | | |
| 201476 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, MARTA | 18.00 | | 262.44 | I | | |
| 201477 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ROSA | 11.25 | | 164.03 | I | | |
| 201478 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ROSA | 71.75 | | 1,046.12 | I | | |
| | | | | CUSTOMER | 136.75 | 0.00 | 1,993.83 | | | |
| | | | | CATEGORY | 136.75 | 0.00 | 1,993.83 | | | |

| RUN DATE 0' | 7/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 179 |
|-------------|-----------|----------|------------------------|-----------------|-------|---------|--------------|-------------------|
| SALES JRNL | # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/O WALLS (LT |
| | | | i | SALES REGISTER | | | BILL WEEK EN | DING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201479 | 6/29/12 | 000008 | VISITING NURSE SERVICE | MARTINEZ, ROSAL | 5.75 | | 83.84 | I |
| 201480 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ROSAL | 12.00 | | 174.96 | I |
| | | | | CUSTOMER | 17.75 | 0.00 | 258.80 | |
| | | | | COSTOMER | 17.75 | 0.00 | 250.00 | |
| | | | | | | | | |
| | | | | CATEGORY | 17.75 | 0.00 | 258.80 | |

| RUN DATE (| 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 18 | 0 | |
|------------|------------|------------|------------------------|---------------|-------|---------|------------------|------|---------|--|
| SALES JRNI | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | | |
| | | | S | ALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 201481 | 6/01/12 | 000008 | VISITING NURSE SERVICE | MATOS, ROSA | 16.00 | | 233.28 | I | | |
| 201482 | 6/08/12 | 800000 | VISITING NURSE SERVICE | MATOS, ROSA | 8.00 | | 116.64 | I | | |
| 201483 | 6/22/12 | 800000 | VISITING NURSE SERVICE | MATOS, ROSA | 8.00 | | 116.64 | I | | |
| 201484 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MATOS, ROSA | 8.00 | | 116.64 | I | | |
| 201485 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MATOS, ROSA | 39.75 | | 579.56 | I | | |
| | | | | CUSTOMER | 79.75 | 0.00 | 1,162.76 | | | |
| | | | | CATEGORY | 79.75 | 0.00 | 1,162.76 | | | |

| _ | - , , | | YSIDE CITYWIDE | | | | PAGE 1 | - 18 | 31 |
|-----------|----------|---------|------------------------|-----------------|--------|---------|---------------|------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | E /12 /10 |
| | | | S | ALES REGISTER | 2 | | BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201486 | 6/29/12 | 000008 | VISITING NURSE SERVICE | MAZZONE, FRANCE | 9.00 | | 131.22 | I | |
| 201487 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MAZZONE, FRANCE | 9.00 | | 131.22 | I | |
| 201488 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MAZZONE, FRANCE | 54.00 | | 787.32 | I | |
| 201489 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MCBRAYER, SYLVI | 24.00 | | 349.92 | I | |
| 201490 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MCBRAYER, SYLVI | 144.00 | | 2,099.52 | I | |
| | | | | CUSTOMER | 240.00 | 0.00 | 3,499.20 | | |
| | | | | CATEGORY | 240.00 | 0.00 | 3,499.20 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | .82 |
|-----------|-----------|---------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | ı∟ # 0289 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | 7/12/10 |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201491 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MCGUIRE, HELEN | 40.00 | | 583.20 I | |
| | | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE SALES JRN | | | | REGNY NY BALES REGISTER | | | PAGE 1 - 18 ADU ADULT BILL WEEK ENDING | 7/13/12 |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201492 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MCKAY, DOROTHY | 15.00 | | 218.70 I | |
| | | | | CATEGORY | 15.00 | 0.00 | 218.70 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCS. | 184 A |
|-----------------------|---------|------------|--------------------------------------|-------------------------|-------|---------|------------------------------|-----------|
| 511225 614. | _ | 200 001 | | A L E S R E G I S T E R | | | BILL WEEK ENDIN | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201493 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MEJIA, DINORAH | 15.75 | | 229.64 I | |
| 201494 | 6/22/12 | 800000 | VISITING NURSE SERVICE | MEJIA, MARINA | 8.00 | | 116.64 I | |
| 201495 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MEJIA, MARINA | 4.00 | | 58.32 I | |
| 201496 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MEJIA, MARINA | 16.00 | | 233.28 I | |
| | | | | CUSTOMER | 43.75 | 0.00 | 637.88 | |
| | | | | CATEGORY | 43.75 | 0.00 | 637.88 | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | - 185 HOMEW/O WALLS (LT |
|-----------------------|--------------------|------------------|---|----------------|---------------|---------|------------------|----------------------------|
| | | | • | SALES REGISTER | | | BILL WEEK END | DING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201497 201498 | 6/29/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 8.00 36.50 | | 116.64 532.17 | I I |
| | | | | CUSTOMER | 44.50 | 0.00 | 648.81 | |
| | | | | CATEGORY | 44.50 | 0.00 | 648.81 | |

| RUN DATE 07/11/12 | - SUP SUNN | NYSIDE CITYWIDE | | | | PAGE 1 - 186 | |
|-------------------|------------|------------------------|----------------|-------|---------|----------------------|------|
| SALES JRNL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | : | SALES REGISTER | | | BILL WEEK ENDING 7/1 | 3/12 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | PLUS |
| 201499 7/06/12 | 800000 | VISITING NURSE SERVICE | MENDEZ, ADA | 6.00 | | 87.48 I | |
| 201500 7/06/12 | 000008 | VISITING NURSE SERVICE | MENDEZ, ADA | 36.00 | | 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 | | | 11102 1 | - 187 HOME W/O WALLS | LT |
|-----------------------|--------------------|-----------------------|---|--------------------------------|---------------|---------|-----------------|-------------------------|----|
| | _ 0205 | 200 001 | | SALES REGISTER | | | BILL WEEK ENI | , | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS | |
| 201501 201502 | 6/01/12 6/29/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | MENDEZ, NELLY MENDEZ, NELLY | 12.00 4.00 | | 174.96 58.32 | I | |
| 201502 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MENDEZ, NELLY | 20.00 | | 291.60 | Ī | |
| | | | | CUSTOMER | 36.00 | 0.00 | 524.88 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 36.00 | 0.00 | 524.88 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | - 18 | 38 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | | |
| | | | i | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201504 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MENDOLIA, ANTOI | 11.00 | | 160.38 | I | |
| 201505 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MENDOLIA, ANTOI | 64.00 | | 933.12 | I | |
| | | | | CUSTOMER | 75.00 | 0.00 | 1,093.50 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 75.00 | 0.00 | 1,093.50 | | |

| RUN DATE 07/11/1 SALES JRNL # 028 | | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTE | R | | PAGE 1 LTC NURSING H BILL WEEK END | OMEW/O WALLS (LT |
|--------------------------------------|---------|---|----------------------------|---------------|---------|--|------------------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201506 7/06/1 201507 7/06/1 | | VISITING NURSE SERVICE VISITING NURSE SERVICE | - , | 4.00 35.00 | | 58.32 510.30 | I I |
| | | | CUSTOMER | 39.00 | 0.00 | 568.62 | |
| | | | - CATEGORY | 39.00 | 0.00 | 568.62 | |

| | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWID | E DEC NY NY | | | | - 19 |) 0 |
|-----------|------------|------------|-------------------------------------|-----------------------------|--------|---------|------------------------------|------|----------------|
| SALES JRN | 11. # 0289 | LOC 001 | SUNNYSIDE CITYWID | E REGNY NY SALES REGIST: | E R | | VCP CHOICE L BILL WEEK EN | | 7/13/12 |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201508 | 7/06/12 | 000008 | VISITING NURSE SER | VICE MENDOZA, VALENT | 10.75 | | 156.74 | I | |
| 201509 | 7/06/12 | 000008 | VISITING NURSE SER | VICE MILEO, MARY | 6.00 | | 87.48 | I | |
| 201510 | 7/06/12 | 800000 | VISITING NURSE SER | VICE MILEO, MARY | 36.00 | | 524.88 | I | |
| 201511 | 7/06/12 | 800000 | VISITING NURSE SER | VICE MONSERRAT, DORI | 9.75 | | 142.16 | I | |
| 201512 | 7/06/12 | 800000 | VISITING NURSE SER | VICE MONTES, MARTA | 24.00 | | 349.92 | I | |
| 201513 | 7/06/12 | 800000 | VISITING NURSE SER | VICE MORAITIS, AGATH | 5.00 | | 72.90 | I | |
| 201514 | 7/06/12 | 800000 | VISITING NURSE SER | VICE MORAITIS, AGATH | 30.00 | | 437.40 | I | |
| | | | | CUSTOMER | 121.50 | 0.00 | 1,771.48 | | |
| | | | | CATEGORY | 121.50 | 0.00 | 1,771.48 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 191 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|-----------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201515 | 6/29/12 | 000008 | VISITING NURSE SERVICE | MORALES, ANGELI | 6.00 | | 87.48 | I |
| 201516 | 7/06/12 | 000008 | VISITING NURSE SERVICE | MORALES, ANGELI | 6.00 | | 87.48 | I |
| 201517 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MORALES, ANGELI | 30.00 | | 437.40 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | |
| | | | | | | | | |
| | | | | CATEGORY | 42.00 | 0.00 | 612.36 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 19 | 2 |
|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | BALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201518 | 7/06/12 | 800000 | VISITING NURSE SERVICE | MOURAS, ANNA | 8.00 | | 116.64 I | |
| | | | | | | | | |
| | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | - 19 | 3 |
|-----------------------|--------------------|-----------------------|---|--------------------------------|----------------|---------|------------------------|--------|---------|
| Brilling Grav | 1 0200 | 100 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201519 | 7/06/12 | 000008 | VISITING NURSE SERVICE | NAGY, GEORGE | 6.00 | | 87.48 | I | |
| 201520 201521 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | NAGY, GEORGE NAJERA WARREN, | 35.00 17.00 | | 510.30 247.86 | I T | |
| 201021 | ,,00,12 | 00000 | VIDITING NONDE DENVIOL | , ———· | | | | | |
| | | | | CUSTOMER | 58.00 | 0.00 | 845.64 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 58.00 | 0.00 | 845.64 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 194 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|--------|--------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGAT | | |
| | | | | SALES REGISTER | | | BILL WEEK END | ING 7 | /13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SI | URPLUS |
| 201522 | 6/22/12 | 000008 | VISITING NURSE SERVICE | NAVARRO, MARIA | 4.00 | | 58.32 | I | |
| 201523 | 7/06/12 | 800000 | VISITING NURSE SERVICE | NAVARRO, MARIA | 16.00 | | 233.28 | I | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | | |

| RUN DATE | 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 195 |
|-----------|----------|------------|------------------------|---------------------------|-------|---------|----------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | | S A L E S R E G I S T E R | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201524 | 7/06/12 | 800000 | VISITING NURSE SERVIC | E NELLINI, MARY | 6.00 | | 87.48 | I |
| 201525 | 7/06/12 | 000008 | VISITING NURSE SERVICE | E NELLINI, MARY | 38.00 | | 554.04 | I |
| 201526 | 7/06/12 | 800000 | VISITING NURSE SERVIC | E NICKELL, JEAN | 9.00 | | 131.22 | I |
| 201527 | 7/06/12 | 800000 | VISITING NURSE SERVIC | E NICOLELIS, LUCY | 2.00 | | 29.16 | I |
| 201528 | 7/06/12 | 800000 | VISITING NURSE SERVIC | E NICOLELIS, LUCY | 8.00 | | 116.64 | I |
| | | | | CUSTOMER | 63.00 | 0.00 | 918.54 | |
| | | | | CATEGORY | 63.00 | 0.00 | 918.54 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTEI | 3 | | PAGE 1 LTC NURSING BILL WEEK EN | | |
|-----------------------|--------------------|-----------------------|---|-----------------------------|---------------|---------|---------------------------------------|-----|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201529 201530 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | -, - | 7.00 35.00 | | 102.06 510.30 | 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 | REGNY NY SALES REGISTER | | | PAGE 1 CCL CONGREGA' BILL WEEK EN | | |
|----------------------------|-------------------------------|----------------------------|--|----------------------------|-----------------------|---------|---|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201531 201532 201533 | 6/22/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | NIETO RAMOS, JO | 9.00 9.00 55.25 | | 131.22 131.22 805.55 | I I I | |
| | | | | CUSTOMER | 73.25 | 0.00 | 1,067.99 | | |
| | | | | CATEGORY | 73.25 | 0.00 | 1,067.99 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 19 | 98 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201534 | 7/06/12 | 000008 | VISITING NURSE SERVICE | NIEVES, NANCY | 36.00 | | 524.88 | I | |
| 201535 | 7/06/12 | 800000 | VISITING NURSE SERVICE | NINO, CARMEN | 20.50 | | 298.89 | I | |
| | | | | CUSTOMER | 56.50 | 0.00 | 823.77 | | |
| | | | | CATEGORY | 56.50 | 0.00 | 823.77 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN | |
|----------------------------|-------------------------------|----------------------------|--|--|------------------------|---------|--|------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | TP SURPLUS |
| 201536 201537 201538 | 7/06/12 6/29/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | NOBLIN, ELOISE NOBOADESALAZAR, NOBOADESALAZAR, | 20.00 8.00 16.50 | | 291.60 I 116.64 I 240.57 I | |
| | | | | CUSTOMER | 44.50 | 0.00 | 648.81 | |
| | | | | CATEGORY | 44.50 | 0.00 | 648.81 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN | | |
|--------------------------------------|--|----------------------------|--|--|--------------------------------|---------|--|------------|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | TP SURPLUS | |
| 201539 201540 201541 201542 | 7/06/12 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | NUZIALE, CONCET NUZIALE, CONCET OCHOA, LUIS OCHOA, LUIS | 7.00 42.00 4.00 39.00 | | 102.06 I 612.36 I 58.32 I 568.62 I | | |
| | | | | CUSTOMER | 92.00 | 0.00 | 1,341.36 | | |
| | | | | CATEGORY | 92.00 | 0.00 | 1,341.36 | | |

| RUN DATE | 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 201 |
|----------|-----------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JR | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | • |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201543 | 7/06/12 | 800000 | VISITING NURSE SERVICE | OLVERA, ROSALIA | 25.00 | | 364.50 I | |
| | | | | CATEGORY | 25.00 | 0.00 | | |

| RUN DATE 07/11/ SALES JRNL # 02 | | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 202 VCP CHOICE LHCSA BILL WEEK ENDING 7/13/12 | |
|--|-----------|--|---|-----------------------|---------|--|--|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201544 7/06/ 201545 7/06/ 201546 7/06/ | 12 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | ORTEGA, CARLOS ORTEGA, CARLOS OSPINA, ANA | 5.00 11.00 8.00 | | 72.90 I 160.38 I 116.64 I | |
| | | | CUSTOMER | 24.00 | 0.00 | 349.92 | |
| | | | CATEGORY | 24.00 | 0.00 | 349.92 | |

| | | 07/11/12 - L # 0289 | | | REG NY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 203 G 7/13/12 |
|----|--------|------------------------|---------|------------------------|-----------------------------|-------|---------|---|------------------|
| IN | NOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 20 | 1547 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PAOLONI, MARY | 15.00 | | 218.70 I | |
| | | | | | CATEGORY | 15.00 | 0.00 | 218.70 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 204 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | SA |
| | | | : | SALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201548 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PAPAZIAN, MANNI | 30.00 | | 437.40 | I |
| 201549 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PAPOUTSIS, MARY | 9.00 | | 131.22 | I |
| 201550 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PARETTI, MARIE | 8.00 | | 116.64 | I |
| 201551 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PARETTI, MARIE | 48.00 | | 699.84 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 95.00 | 0.00 | 1,385.10 | |
| | | | | | | | | |
| | | | | CATEGORY | 95.00 | 0.00 | 1,385.10 | |

| RUN DATE SALES JRN | | | | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201552 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PASTORE, ANTONI | 3.00 | | 43.74 I | |
| | | | | CATEGORY | 3.00 | 0.00 | 43.74 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 20 | 6 |
|-----------|------------|------------|------------------------|-----------------|--------|---------|---------------|------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | CSA | |
| | | | : | SALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201553 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PENA, VICTORIA | 6.00 | | 87.48 | I | |
| 201554 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PENA, VICTORIA | 33.25 | | 484.79 | I | |
| 201555 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PENAGOS, MARIA | 20.00 | | 291.60 | I | |
| 201556 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PEREZ MONSER, C | 7.00 | | 102.06 | I | |
| 201557 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PEREZ MONSER, C | 42.00 | | 612.36 | I | |
| | | | | CUSTOMER | 108.25 | 0.00 | 1,578.29 | | |
| | | | | CATEGORY | 108.25 | 0.00 | 1,578.29 | | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 207 ADU ADULT | |
|------------|---------|---------|--------------------------------------|-----------------|-------|---------|---------------------------|---|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13/12 | 2 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | S |
| 201558 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PEREZ, CARMELIN | 28.00 | | 408.24 I | |
| | | | | CATEGORY | 28.00 | 0.00 | 408.24 | _ |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 20 | 08 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201559 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PEREZ, GLADYS | 6.00 | | 87.48 I | |
| 201560 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PEREZ, GLADYS | 36.00 | | 524.88 I | |
| | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | |
| | | | | CATEGORY | 42.00 | 0.00 | 612.36 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 209 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 201561 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PEREZ, JOAQUIN | 18.00 | | 262.44 I | |
| | | | | CATEGORY | 18.00 | 0.00 | 262.44 | |

| RUN DATE 07/11/12 - SU | JP SUNNYSIDE CITYWIDE | | | | PAGE 1 | - 210 |
|------------------------|------------------------------|----------------|-------|---------|---------------|------------------|
| SALES JRNL # 0289 LO | OC 001 SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | OMEW/O WALLS (LT |
| | S | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# DATE CU | JST NO CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201562 7/06/12 00 | 00008 VISITING NURSE SERVICE | PERSAUD, RITA | 5.00 | | 72.90 | I |
| 201563 7/06/12 00 | 00008 VISITING NURSE SERVICE | PERSAUD, RITA | 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 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | - 21 | .1 |
|-----------------------|---------|------------|--------------------------------------|-----------------|--------|---------|-------------------------|-------|---------|
| | _ " | | | LES REGISTER | | | BILL WEEK ENI | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201564 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PHILIPPS, MARY | 8.00 | | 116.64 | I | |
| 201565 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PHILIPPS, MARY | 24.00 | | 349.92 | I | |
| 201566 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PIZARRO, BARBAR | 6.00 | | 87.48 | I | |
| 201567 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PLACIDO, GENARO | 5.00 | | 72.90 | I | |
| 201568 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PLACIDO, GENARO | 25.00 | | 364.50 | I | |
| 201569 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PLACIDO, MERCED | 6.00 | | 87.48 | I | |
| 201570 | 7/06/12 | 000008 | VISITING NURSE SERVICE | PLACIDO, MERCED | 33.00 | | 481.14 | I | |
| 201571 | 7/06/12 | 800000 | VISITING NURSE SERVICE | POGGI, EMERITA | 24.00 | | 349.92 | I | |
| | | | | CUSTOMER | 131.00 | 0.00 | 1,909.98 | | |
| | | | | CATEGORY | 131.00 | 0.00 | 1,909.98 | | |

| RUN DATE SALES JRN | | LOC 001 | | REGNY NY BALES REGISTER | | | PAGE 1 - 21: LTC NURSING HOMEW/O BILL WEEK ENDING | O WALLS (LT |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|---|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201572 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PONCE, ALICIA | 40.00 | | 583.20 I | |
| | | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | |
|----------|---------|---------|--------------------------------------|----------------------------|-------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201573 | 7/06/12 | 800000 | VISITING NURSE SERVICE | PREVOST, IRENE | 16.00 | | 233.28 I | |
| | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 21 VCP CHOICE LHCSA | 4 |
|-----------------------|--------------------|-----------------------|---|----------------------------------|---------------|---------|---------------------------------|---------|
| SALES URN | ш # 0209 | LOC UUI | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201574 201575 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | PUISELLO, CIRA PUISELLO, CIRA | 4.00 28.00 | | 58.32 I 408.24 I | |
| | | | | CUSTOMER | 32.00 | 0.00 | 466.56 | |
| | | | | CATEGORY | 32.00 | 0.00 | 466.56 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - 2 CCL CONGREGATE CA BILL WEEK ENDING | |
|----------------------------|-------------------------------|----------------------------|--|----------------------------|-----------------------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201576 201577 201578 | 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | PULLIZA, DIANNE | 6.00 1.00 12.00 | | 87.48 I 14.58 I 174.96 I | |
| | | | | CUSTOMER | 19.00 | 0.00 | 277.02 | |
| | | | | CATEGORY | 19.00 | 0.00 | 277.02 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 21 | 16 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRI | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201579 | 7/06/12 | 800000 | VISITING NURSE SERVICE | QUINTERO, INES | 24.00 | | 349.92 I | |
| | | | | CATEGORY | 24.00 | 0.00 | 349.92 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 21 | L7 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|--------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | 5 | SALES REGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201580 | 7/06/12 | 000008 | VISITING NURSE SERVICE | OUIZHPI, MARIA | 7.00 | | 102.06 | I | |
| 201581 | 7/06/12 | 800000 | VISITING NURSE SERVICE | QUIZHPI, MARIA | 34.75 | | 506.66 | I | |
| | | | | - CHGEOMED | 41 75 | 0.00 | 600.70 | | |
| | | | | CUSTOMER | 41.75 | 0.00 | 608.72 | | |
| | | | | _ | | | | | |
| | | | | CATEGORY | 41.75 | 0.00 | 608.72 | | |

| ı | RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 18 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|-------------------|-------------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAP LOMBARDI AIDE | S PEDIATRIC |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 201582 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RAMIREZ, ANA | 40.00 | | 583.20 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE (SALES JRNI | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 219 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 7/13/12 | |
|--------------------------|--------------------|-----------------------|--|-----------------------------|---------------|---------|---|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 4.00 39.00 | | 58.32 I 568.62 I | |
| | | | | CUSTOMER | 43.00 | 0.00 | 626.94 | |
| | | | | CATEGORY | 43.00 | 0.00 | 626.94 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2: | 20 |
|-----------|------------|----------|------------------------|---------------|-------|---------|------------------|---------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201585 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RAMOS, ALICIA | 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 L | - 22 HCSA | 21 |
|-----------------------|---------|------------|-----------------------------------|-----------------|-------|---------|------------------------|--------------|---------|
| 511225 014 | 0203 | 200 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201586 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RAMPHAL, INDRIA | 12.00 | | 174.96 | I | |
| 201587 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RANDAZZO, ROSAL | 20.00 | | 291.60 | I | |
| 201588 | 6/22/12 | 000008 | VISITING NURSE SERVICE | RASMUSSEN, GEOR | 2.75 | | 40.10 | I | |
| 201589 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RASMUSSEN, GEOR | 6.00 | | 87.48 | I | |
| 201590 | 7/06/12 | 000008 | VISITING NURSE SERVICE | REINA, JOSE | 20.00 | | 291.60 | I | |
| 201591 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RICCA, MARIE | 16.00 | | 233.28 | I | |
| 201592 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RIVADENEIRA, OL | 20.00 | | 291.60 | I | |
| | | | | CUSTOMER | 96.75 | 0.00 | 1,410.62 | | |
| | | | | CATEGORY | 96.75 | 0.00 | 1,410.62 | | |

| RUN DATE 07/ SALES JRNL # | 11/12 - SUP SUNN 0289 LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING | 22 /O WALLS (LT 7/13/12 |
|------------------------------|----------------------------------|---|------------------------------------|---------------|---------|---|-------------------------------|
| INVOICE# D | DATE CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| , | 06/12 000008 06/12 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | RIVADENEIRA, RO RIVADENEIRA, RO | 8.00 47.75 | | 116.64 I 696.20 I | |
| | | | CUSTOMER | 55.75 | 0.00 | 812.84 | |
| | | | CATEGORY | 55.75 | 0.00 | 812.84 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 223 VCP CHOICE LHCSA | |
|-----------------------|--------------------|-----------------------|---|-----------------|--------------|---------|----------------------------------|---------|
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201595 201596 | 7/06/12 6/29/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , - | 8.50 4.00 | | 123.94 I 58.32 I | |
| 201597 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RIVERA, ERNESTO | 20.00 | | 291.60 I | |
| | | | | CUSTOMER | 32.50 | 0.00 | 473.86 | |
| | | | | | | | | |
| | | | | CATEGORY | 32.50 | 0.00 | 473.86 | |

| | 07/11/12 - JL # 0289 | | | REGNY NY SALES REGISTER | | | PAGE 1 - LTC NURSING HOM BILL WEEK ENDING | EW/O WALLS (LT |
|----------|-------------------------|---------|------------------------|----------------------------|-------|---------|---|----------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201598 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RIVERA, GRACIEL | 20.00 | | 291.60 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE (| | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 ADU ADULT BILL WEEK EN | - 225 DING 7/13/12 | |
|--------------------------------------|--|--------------------------------------|--|-----------------------------|--------------------------------|---------|-------------------------------------|-----------------------|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS | |
| 201599 201600 201601 201602 | 7/06/12 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | RIVERA, RAQUEL | 4.00 24.25 7.00 34.75 | | 58.32 353.57 102.06 506.66 | I I I | |
| | | | | CUSTOMER | 70.00 | 0.00 | 1,020.61 | | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,020.61 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 226 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | OMEW/O WALLS (LT |
| | | | : | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP SURPLUS |
| 201603 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ROCCISANO, LOUI | 8.00 | | 116.64 | I |
| 201604 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROCCISANO, LOUI | 40.00 | | 583.20 | I |
| | | | | CUSTOMER | 48.00 | 0.00 | 699.84 | |
| | | | | COSTONER | 40.00 | 0.00 | 000.04 | |
| | | | | | | | | |
| | | | | CATEGORY | 48.00 | 0.00 | 699.84 | |

| | E 07/11/12 RNL # 0289 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 227 G 7/13/12 |
|----------|-----------------------|---------|--------------------------------------|----------------------------|-------|---------|---|------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | P SURPLUS |
| 201605 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, GRIS | 25.00 | | 364.50 I | |
| | | | | CATEGORY | 25.00 | 0.00 | 364.50 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 22 | 8 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201606 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, IRMA | 6.00 | | 87.48 I | |
| 201607 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, IRMA | 36.00 | | 524.88 I | |
| | | | | CUSTOMER | 42.00 | 0.00 | 612.36 | |
| | | | | | | | | |
| | | | | CATEGORY | 42.00 | 0.00 | 612.36 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 22 | 29 |
|-----------|------------|------------|------------------------|---------------------------------------|-------|---------|--------------|--------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGA | TE CAF | RE PROGRAM |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201608 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, MARC | 12.00 | | 174.96 | I | |
| 201609 | 7/06/12 | 000008 | VISITING NURSE SERVICE | · · · · · · · · · · · · · · · · · · · | 72.00 | | 1,049.76 | I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,224.72 | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,224.72 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 230 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|----------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | EW/O WALLS (LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201610 | 6/29/12 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, OLGA | 5.00 | | 72.90 I | |
| 201611 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, OLGA | 20.00 | | 291.60 I | |
| | | | | CUSTOMER | 25.00 | 0.00 | 364.50 | |
| | | | | | | | | |
| | | | | CATEGORY | 25.00 | 0.00 | 364.50 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 231 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201612 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, PORF | 7.00 | | 102.06 I | |
| 201613 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, PORF | 41.00 | | 597.78 I | |
| | | | | CUSTOMER | 48.00 | 0.00 | 699.84 | |
| | | | | COSTOMER | 40.00 | 0.00 | 0,0,04 | |
| | | | | | | | | |
| | | | | CATEGORY | 48.00 | 0.00 | 699.84 | |

| RUN DATE 07 SALES JRNL | | | REG NY NY S A L E S R E G I S T E R | | | PAGE 1 - 23 LTC NURSING HOMEW/ BILL WEEK ENDING | |
|---------------------------|----------------------------------|------------------|--|---------------|---------|---|---------|
| INVOICE# | DATE CUST N | NO CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 7/06/12 000008 7/06/12 000008 | | · ~ | 5.00 35.00 | | 72.90 I 510.30 I | |
| | | | CUSTOMER | 40.00 | 0.00 | 583.20 | |
| | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - 23 | 3 |
|-----------------------|--------------------|------------------|---|----------------|---------------|---------|---------------------|------|---------|
| | " | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201616 201617 | 6/22/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 16.00 8.00 | | 233.28 116.64 | I | |
| 201618 | 7/06/12 | 000008 | VISITING NURSE SERVICE | • | 48.00 | | 699.84 | Ī | |
| | | | | CUSTOMER | 72.00 | 0.00 | 1,049.76 | | |
| | | | | CATEGORY | 72.00 | 0.00 | 1,049.76 | | |

| ı | RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 23 | 34 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|--------------------|-------------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | O WALLS (LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 201619 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROLON, JUANITA | 39.75 | | 579.56 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 39.75 | 0.00 | 579.56 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 23 | 5 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201620 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ROMERO, SANTHY | 8.00 | | 116.64 I | |
| 201621 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROMERO, SANTHY | 32.00 | | 466.56 I | |
| | | | | CUSTOMER | 40.00 | 0.00 | 583.20 | |
| | | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER | | | | | | | | | PAGE 1 - 236 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 7/13/12 | | | |
|--|--------------------|------------------|---|-------|----------|---------------|---------|------------------|---|---------|--|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | | |
| 201622 201623 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | ROMO, | | 8.00 48.00 | | 116.64 699.84 | I I | | | |
| | | | | | CUSTOMER | 56.00 | 0.00 | 816.48 | | | | |
| | | | | | CATEGORY | 56.00 | 0.00 | 816.48 | | | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 23 | 7 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201624 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROQUE, GLORIA | 16.50 | | 240.57 I | |
| | | | | CATEGORY | 16.50 | 0.00 | 240.57 | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 238 | |
|-----------|------------|----------|------------------------|----------------|-------|---------|---------------------------|-----|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS | (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13/1 | 2 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLU | S |
| 201625 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROSA, ANA | 32.00 | | 466.56 I | |
| | | | | CATEGORY | 32.00 | 0.00 | 466.56 | _ |

| | /11/12 - SUP SUNN | | | 737 | | | | - 23 | 19 |
|--------------|--------------------------------|---|-------|----------------|---------------|---------|---------------------------|------|---------|
| SALES JRNL : | # 0289 LOC 001 | SUNNYSIDE CITYWIDE | _ | NY EGISTEF | 2 | | ADU ADULT BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE CUST NO | CUSTOMER NAME | REFER | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | /06/12 000008 /06/12 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | LUZ E LUZ E | 8.00 47.75 | | 116.64 696.20 | I | |
| | | | | CUSTOMER | 55.75 | 0.00 | 812.84 | | |
| | | | | CATEGORY | 55.75 | 0.00 | 812.84 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 24 | 0 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | | |
| | | | S | ALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201628 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ROSA, MANOLO | 16.00 | | 233.28 | I | |
| 201629 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROSARIO, ELSA | 6.00 | | 87.48 | I | |
| 201630 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROSARIO, ELSA | 29.50 | | 430.11 | I | |
| 201631 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROSARIO, MARIA | 20.00 | | 291.60 | I | |
| 201632 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ROSARIOBREU, EM | 26.25 | | 382.73 | I | |
| | | | | CUSTOMER | 97.75 | 0.00 | 1,425.20 | | |
| | | | | CATEGORY | 97.75 | 0.00 | 1,425.20 | | |

| RUN DATE (SALES JRNI | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 241 ADU ADULT BILL WEEK ENDING 7 | 7/13/12 |
|--------------------------|--------------------|-----------------------|--|-----------------------------|---------------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | SURPLUS |
| 201633 201634 | 6/29/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 3.00 15.00 | | 43.74 I 218.70 I | |
| | | | | CUSTOMER | 18.00 | 0.00 | 262.44 | |
| | | | | CATEGORY | 18.00 | 0.00 | 262.44 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 242 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCS | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 201635 | 7/06/12 | 000008 | VISITING NURSE SERVICE | RUEDA, INES | 6.00 | | 87.48 I | |
| 201636 | 7/06/12 | 800000 | VISITING NURSE SERVICE | RUEDA, INES | 40.00 | | 583.20 I | |
| | | | | CUSTOMER | 46.00 | 0.00 | 670.68 | |
| | | | | | | | | |
| | | | | CATEGORY | 46.00 | 0.00 | 670.68 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE | | | REG NY NY SALES REGISTER | | | PAGE 1 - 243 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 7/13/12 | |
|---|--------------------|------------------|--|-----------|---------------|---|---------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| | 6/29/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 6.25 24.00 | | 91.13 I 349.92 I |
| | | | | CUSTOMER | 30.25 | 0.00 | 441.05 |
| | | | | CATEGORY | 30.25 | 0.00 | 441.05 |

| RUN DATE 07/11/ | | YSIDE CITYWIDE | | | | PAGE 1 | - 24 | 4 |
|-----------------|------------|------------------------|----------------|-------|---------|--------------|------|---------|
| SALES JRNL # 02 | 89 LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | |
| | | 5 | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201639 7/06/ | 12 000008 | VISITING NURSE SERVICE | RUSSO, MONICA | 10.00 | | 145.80 | I | |
| 201640 7/06/ | 12 000008 | VISITING NURSE SERVICE | RUSSO, MONICA | 60.00 | | 874.80 | I | |
| | | | CUSTOMER | 70.00 | 0.00 | 1,020.60 | | |
| | | | CATEGORY | 70.00 | 0.00 | 1,020.60 | | |

| | | | YSIDE CITYWIDE | | | | 11102 | - 24 | | | |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------|-------------------------------|---------|--|--|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | | LTC NURSING HOMEW/O WALLS (LT | | | |
| | | | SALES REGISTER | | | | BILL WEEK EN | DING | 7/13/12 | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | | |
| 201641 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SAAVEDRA, STELL | 4.00 | | 58.32 | I | | | |
| 201642 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SAAVEDRA, STELL | 27.50 | | 400.96 | I | | | |
| | | | | CUSTOMER | 31.50 | 0.00 | 459.28 | | | | |
| | | | | | | | | | | | |
| | | | | CATEGORY | 31.50 | 0.00 | 459.28 | | | | |

| | | | YSIDE CITYWIDE | | | | | - 24 | 16 |
|-----------|----------|---------|------------------------|----------------|--------|---------|------------------|------|----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| INVOICE | DAIL | CODI NO | CODIONER WANTE | KEI EKEIVEE | 110010 | IAM ANI | AMOUNT | 111 | DOKT HOD |
| 201643 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SAK, FIRDEVS | 15.00 | | 218.70 | I | |
| 201644 | 6/08/12 | 800000 | VISITING NURSE SERVICE | SALADIN, MARIA | 11.00 | | 160.38 | I | |
| 201645 | 6/15/12 | 800000 | VISITING NURSE SERVICE | SALADIN, MARIA | 11.00 | | 160.38 | I | |
| 201646 | 6/29/12 | 800000 | VISITING NURSE SERVICE | SALADIN, MARIA | 22.00 | | 320.76 | I | |
| 201647 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SALADIN, MARIA | 11.00 | | 160.38 | I | |
| 201648 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SALADIN, MARIA | 66.00 | | 962.28 | I | |
| | | | | CUSTOMER | 136.00 | 0.00 | 1,982.88 | | |
| | | | | CATEGORY | 136.00 | 0.00 | 1,982.88 | | |

| RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 247 | 7 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|---------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/C | WALLS (LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201649 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SALVATIERRA, TE | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | | | | | |
| 1 | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITY SALES JRNL # 0289 LOC 001 SUNNYSID | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | | 48 |
|---|------------|---------|-----------------------------------|----------------|-------|---------|------------------------|-----|---------|
| | .2 0205 | 200 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201650 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SAMPOGNA, LUCY | 20.00 | | 291.60 | I | |
| 201651 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SANCHEZ, LIDIA | 7.00 | | 102.06 | I | |
| 201652 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SANCHEZ, LIDIA | 42.00 | | 612.36 | I | |
| | | | | CUSTOMER | 69.00 | 0.00 | 1,006.02 | | |
| | | | | CATEGORY | 69.00 | 0.00 | 1,006.02 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 24 | 19 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201653 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SANCHEZ, MARIA | 30.00 | | 437.40 I | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 250 | | |
|-----------|----------|---------|------------------------|-----------------------------|-------|---------|-------------------------|----|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | UNNYSIDE CITYWIDE REG NY NY | | | ADU ADULT | | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13/1 | .2 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLU | IS | |
| 201654 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SANCHEZ, NILSA | 6.00 | | 87.48 I | | |
| 201655 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SANCHEZ, NILSA | 30.00 | | 437.40 I | _ | |
| | | | | CUSTOMER | 36.00 | 0.00 | 524.88 | | |
| | | | | CATEGORY | 36.00 | 0.00 | 524.88 | - | |

| RUN DATE SALES JRN | 07/11/12 - | PAGE 1 - 251 VCP CHOICE LHCSA | | | | | | | |
|-----------------------|------------|----------------------------------|---------------------------|---------------------------|--------|---------|--------------|-----|---------|
| DALLO OILL | ш т одор | LOC 001 | SUNNYSIDE CITYWIDE S A | REGNY NY ALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201656 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SCOTT, CATHERIN | 8.00 | | 116.64 | I | |
| 201657 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SCOTT, CATHERIN | 48.00 | | 699.84 | I | |
| 201658 | 5/25/12 | 800000 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 6.00 | | 87.48 | I | |
| 201659 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 6.00 | | 87.48 | I | |
| 201660 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 36.00 | | 524.88 | I | |
| 201661 | 6/22/12 | 000008 | VISITING NURSE SERVICE | SERAFIN, WALTER | 8.00 | | 116.64 | I | |
| 201662 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SERAFIN, WALTER | 8.00 | | 116.64 | I | |
| 201663 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SERAFIN, WALTER | 47.75 | | 696.20 | I | |
| 201664 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SERRANO, AGUEDA | 8.00 | | 116.64 | I | |
| 201665 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SERRANO, AGUEDA | 46.00 | | 670.68 | I | |
| 201666 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SHANNON, ELNORA | 7.00 | | 102.06 | I | |
| 201667 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SHANNON, ELNORA | 35.00 | | 510.30 | I | |
| 201668 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SHARMA, DEROPDI | 25.00 | | 364.50 | I | |
| | | | | CUSTOMER | 288.75 | 0.00 | 4,209.98 | | |
| | | | | CATEGORY | 288.75 | 0.00 | 4,209.98 | | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | | 1Y | | | ADU ADULT | - 25 | | |
|------------|---------|---------|--------------------------------------|-------------------|--------------|-------|---------|---------------|------|--------------------|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | SALES RE REFER | | HOURS | TAX AMT | BILL WEEK ENI | TYP | 7/13/12 SURPLUS | |
| 201669 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SIANO, | , ANDREW | 8.75 | | 127.58 | I | | |
| | | | | | CATEGORY | 8.75 | 0.00 | 127.58 | | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 253 | 3 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | r∟ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201670 | 6/29/12 | 000008 | VISITING NURSE SERVICE | SIFFETI, ROHAFZ | 10.00 | | 145.80 I | |
| 201671 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SIFFETI, ROHAFZ | 10.00 | | 145.80 I | |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE 07 SALES JRNL | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING | |
|---------------------------|--------------------|---------------------|---|-----------------------------|---------------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 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 | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 25 | 55 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201674 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SINGH, BADREE | 30.00 | | 437.40 I | |
| 201675 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SINGH, JAMOONIE | 15.00 | | 218.70 I | |
| | | | | CUSTOMER | 45.00 | 0.00 | 656.10 | |
| | | | | CATEGORY | 45.00 | 0.00 | 656.10 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 256 | |
|-----------|----------|---------|------------------------|----------------|-------|---------|-------------------------------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS (LT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 201676 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SOLDATI, RONDA | 10.00 | | 145.80 I | |
| | | | | | | | | |
| | | | | CATEGORY | 10.00 | 0.00 | 145.80 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 57 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201677 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SOPCHEK, SAMUEL | 12.00 | | 174.96 I | |
| | | | | | | | | |
| | | | | CATEGORY | 12.00 | 0.00 | 174.96 | |

| ı | RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 258 |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 201678 | 7/06/12 | 000008 | VISITING NURSE SERVICE | SOTO, MARCELINA | 8.00 | | 116.64 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | 116.64 | |
| ı | | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| | E 07/11/12 - RNL # 0289 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 ADU ADULT | 159 |
|----------|----------------------------|---------|--------------------------------------|-----------------|-------|---------|-------------------------|---------|
| | UVL 0205 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE: | ‡ DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201679 | 7/06/12 | 000008 | VISITING NURSE SERVICE | STALZER, STEPHA | 20.00 | | 291.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING | 7/13/12 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------------------|-------|---------|--|---------|
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201680 | 7/06/12 | 800000 | VISITING NURSE SERVICE | | 7.50 | | 109.35 I | |
| 201681 | 7/06/12 | 000008 | VISITING NURSE SERVICE | STAMBOULIDIS, V | 40.00 | | 583.20 I | |
| | | | | CUSTOMER | 47.50 | 0.00 | 692.55 | |
| | | | | | | | | |
| | | | | CATEGORY | 47.50 | 0.00 | 692.55 | |

| | | | YSIDE CITYWIDE | | | | - | 261 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | | REG NY NY | | | ADU ADULT | T /10 /10 |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201682 | 7/06/12 | 800000 | VISITING NURSE SERVICE | STAMBOULIDIS, V | 7.25 | | 105.71 I | |
| | | | | | | | | |
| | | | | CATEGORY | 7.25 | 0.00 | 105.71 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - HOA HOSPICE ADU | LT |
|-----------------------|--------------------|-----------------------|---|------------------------------------|---------------|---------|-----------------------------|-----------|
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201683 201684 | 7/06/12 7/06/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | STEIN, STEPHANI STEIN, STEPHANI | 3.00 18.00 | | 43.74 I 262.44 I | |
| | | | | CUSTOMER | 21.00 | 0.00 | 306.18 | |
| | | | | CATEGORY | 21.00 | 0.00 | 306.18 | |

| RUN DATE SALES JRN | | | | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 201685 | 7/06/12 | 800000 | VISITING NURSE SERVICE | STENOS, MOSHOUL | 11.00 | | 160.38 I | |
| | | | | CATEGORY | 11.00 | 0.00 | 160.38 | |

| RUN DATE 0' SALES JRNL | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 VCP CHOICE LE | | |
|---------------------------|-------------------------------|----------------------------|--|--|------------------------|---------|---------------------------|-------------|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | | TYP SURPLUS | |
| 201687 201688 | 7/06/12 7/06/12 7/06/12 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | STERGIOU, GLORI STICKELL, BLANC STROBL, ALFRED | 20.00 23.50 6.00 | | 291.60 342.63 87.48 | I I I | |
| 201689 | 7/06/12 | 000008 | VISITING NURSE SERVICE | STROBL, ALFRED CUSTOMER | 30.00 79.50 | 0.00 | 437.40 1,159.11 | I | |
| | | | | CATEGORY | 79.50 | 0.00 | 1,159.11 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 265 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|------------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | OMEW/O WALLS (LT |
| | | | \$ | SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201690 | 6/29/12 | 000008 | VISITING NURSE SERVICE | SUAREZ, TULIA | 4.00 | | 58.32 | I |
| 201691 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SUAREZ, TULIA | 5.00 | | 72.90 | I |
| 201692 | 7/06/12 | 800000 | VISITING NURSE SERVICE | SUAREZ, TULIA | 30.00 | | 437.40 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 39.00 | 0.00 | 568.62 | |
| | | | | | | | | |
| | | | | CATEGORY | 39.00 | 0.00 | 568.62 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | - 26 HCSA | 56 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------|-------|---------|------------------------|--------------|---------|
| | " | | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201693 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TABOADA, DIMAS | 15.00 | | 218.70 | I | |
| 201694 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TABOADA, ELIZAB | 8.00 | | 116.64 | I | |
| 201695 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TABOADA, ELIZAB | 47.50 | | 692.55 | I | |
| | | | | CUSTOMER | 70.50 | 0.00 | 1,027.89 | | |
| | | | | CATEGORY | 70.50 | 0.00 | 1,027.89 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 267 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------|-------------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | HOMEW/O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENI | DING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 201696 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TADDEO, LENA | 8.00 | | 116.64 | I |
| 201697 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TADDEO, LENA | 48.00 | | 699.84 | I |
| 201698 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TAVERAS ARIAS, | 20.00 | | 291.60 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 76.00 | 0.00 | 1,108.08 | |
| | | | | | | | | |
| | | | | CATEGORY | 76.00 | 0.00 | 1,108.08 | |

| | | | YSIDE CITYWIDE | | | | - | - 26 | 58 |
|----------|-----------|---------|------------------------|-----------------|--------|---------|--------------|------|---------|
| SALES JR | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | |
| 201699 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TAVERAS, BERNAR | 12.00 | | 174.96 | I | |
| 201700 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TEJADA, BALDOME | 20.00 | | 291.60 | I | |
| 201701 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TERZIAN, ASDGHI | 6.00 | | 87.48 | I | |
| 201702 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TERZIAN, ASDGHI | 36.00 | | 524.88 | I | |
| 201703 | 6/29/12 | 000008 | VISITING NURSE SERVICE | TINOCO, INES | 14.00 | | 204.12 | I | |
| 201704 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TINOCO, INES | 7.00 | | 102.06 | I | |
| 201705 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TINOCO, INES | 35.00 | | 510.30 | Ī | |
| 201706 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TORO VEGA, LUZV | 4.00 | | 58.32 | Ī | |
| 201707 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TORO VEGA, LUZV | 20.00 | | 291.60 | T | |
| 202707 | ,,00,12 | 00000 | VIDITING NONDE DENVIOE | | | | | | |
| | | | | CUSTOMER | 154.00 | 0.00 | 2,245.32 | | |
| | | | | CODICIEN | 151.00 | 0.00 | 2,213.32 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 154.00 | 0.00 | 2,245.32 | | |

| RUN DATE 07/11/12 - | | | | | | | | - 26 | 59 |
|---------------------|---------|------------------------|---------|--------------|-------|---------|--------------|--------|-----------|
| SALES JRNL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | - | NY | _ | | ADU ADULT | D T110 | F /12 /10 |
| | | | SALES R | EGISTE | R | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201708 7/06/12 | 000008 | VISITING NURSE SERVICE | TORO, | PURA | 12.00 | | 174.96 | I | |
| 201709 7/06/12 | 800000 | VISITING NURSE SERVICE | TORO, | PURA | 72.00 | | 1,049.76 | I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,224.72 | | |
| | | | | CODIONER | 01.00 | 0.00 | 1,221.72 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,224.72 | | |

| RUN DATE | 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 270 |) |
|-----------|----------|------------|------------------------|-----------------|--------|---------|---------------|-------|---------|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | CSA | |
| | | | i | SALES REGISTER | | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP | SURPLUS |
| 201710 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TORRES, EMELINA | 40.00 | | 583.20 | I | |
| 201711 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TORRES, LUZ M | 12.00 | | 174.96 | I | |
| 201712 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TORRES, LUZ M | 71.75 | | 1,046.12 | I | |
| | | | | | 100 55 | | 1 004 00 | | |
| | | | | CUSTOMER | 123.75 | 0.00 | 1,804.28 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 123.75 | 0.00 | 1,804.28 | | |

| | | | YSIDE CITYWIDE | | | | - | 271 |
|-----------|----------|---------|------------------------|---|-------|---------|-------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTE | D | | LTC NURSING HOMEV | |
| | | | | SALES REGISTE | K | | BILL WEEK ENDING | //13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 201713 | 7/06/12 | 000008 | VISITING NURSE SERVICE | - · · · · · · · · · · · · · · · · · · · | 6.00 | | 87.48 I | |
| 201714 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TORRES, MARGOT | 33.50 | | 488.43 I | |
| | | | | CUSTOMER | 39.50 | 0.00 | 575.91 | |
| | | | | COSTOMER | 39.30 | 0.00 | 373.91 | |
| | | | | | | | | |
| | | | | CATEGORY | 39.50 | 0.00 | 575.91 | |

| | 07/11/12 - JL # 0289 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY S A L E S R E G I S T E R | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 272 5 7/13/12 |
|----------|-------------------------|---------|--------------------------------------|--|-------|---------|---|------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 201715 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TOUMA, MATTA | 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 | - 27 | 73 |
|-----------------------|-----------|-----------------------|--------------------------------------|-----------------|--------|---------|------------------------|------|---------|
| SALES OWN | II # 0207 | 100 001 | | SALES REGISTER | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201716 | 6/15/12 | 000008 | VISITING NURSE SERVICE | TRUJILLO, AMPAR | 4.00 | | 58.32 | I | |
| 201717 | 6/22/12 | 800000 | VISITING NURSE SERVICE | TRUJILLO, AMPAR | 8.00 | | 116.64 | I | |
| 201718 | 6/29/12 | 800000 | VISITING NURSE SERVICE | TRUJILLO, AMPAR | 16.00 | | 233.28 | I | |
| 201719 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TRUJILLO, AMPAR | 12.00 | | 174.96 | I | |
| 201720 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TRUONG, TINH | 15.75 | | 229.64 | I | |
| 201721 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TSOLISOS, FOTIN | 8.00 | | 116.64 | I | |
| 201722 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TSOLISOS, FOTIN | 48.00 | | 699.84 | I | |
| | | | | CUSTOMER | 111.75 | 0.00 | 1,629.32 | | |
| | | | | CATEGORY | 111.75 | 0.00 | 1,629.32 | | |

| ı | RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 274 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|--------------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME | W/O WALLS LT |
| ı | | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 201723 | 7/06/12 | 800000 | VISITING NURSE SERVICE | TSUAI, PING | 16.00 | | 233.28 I | |
| | | | | | CATEGORY | 16.00 | 0.00 | 233.28 | |
| 1 | | | | | CATEGORI | 10.00 | 0.00 | 233.20 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 275 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | SA |
| | | | S | ALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201724 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TZOUMAS, EFFIE | 9.00 | | 131.22 | I |
| 201725 | 7/06/12 | 000008 | VISITING NURSE SERVICE | TZOUMAS, EFFIE | 54.00 | | 787.32 | I |
| 201726 | 7/06/12 | 800000 | VISITING NURSE SERVICE | UGURLUYAN, KARA | 1.00 | | 174.96 | I |
| 201727 | 7/06/12 | 800000 | VISITING NURSE SERVICE | UGURLUYAN, KARA | 6.00 | | 1,049.76 | I |
| | | | | CUSTOMER | 70.00 | 0.00 | 2,143.26 | |
| | | | | CATEGORY | 70.00 | 0.00 | 2,143.26 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 276 |
|-----------|------------|------------|------------------------|---------------|-------|---------|------------------|---------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | ; | SALES REGISTE | R | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201728 | 6/29/12 | 000008 | VISITING NURSE SERVICE | URBINA, ANA | 5.00 | | 72.90 I | |
| 201729 | 7/06/12 | 800000 | VISITING NURSE SERVICE | URBINA, ANA | 5.00 | | 72.90 I | |
| 201730 | 7/06/12 | 800000 | VISITING NURSE SERVICE | URBINA, ANA | 30.00 | | 437.40 I | |
| | | | | CUSTOMER | 40.00 | 0.00 | 583.20 | |
| | | | | | | | | |
| | | | | CATEGORY | 40.00 | 0.00 | 583.20 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 177 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | SALES REGIST | E R | | BILL WEEK ENDING | 7/13/12 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| 201731 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VALENCIA, ESTHE | 18.00 | | 262.44 I | | |
| | | | | CATEGORY | 18.00 | 0.00 | 262.44 | | |

| RUN DATE | 07/11/12 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 278 |
|-----------|----------|------------|------------------------|----------------|-------|---------|-------------------|-------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | ARE PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201732 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VALENTI, HELEN | 8.00 | | 116.64 I | |
| | | | | CATEGORY | 8.00 | 0.00 | 116.64 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | 279 |
|-----------------------|--------------------|-----------------------|---|----------------|---------------|---------|---------------------|------------|
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201733 | 6/29/12 | 000008 | VISITING NURSE SERVICE | | 6.00 | | 87.48 I | - |
| 201734 201735 | 7/06/12 6/29/12 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 24.00 3.00 | | 349.92 I 43.74 I | : [|
| 201736 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VARELAS, ANNA | 2.00 | | 29.16 I | · - |
| | | | | CUSTOMER | 35.00 | 0.00 | 510.30 | |
| | | | | CATEGORY | 35.00 | 0.00 | 510.30 | |

| RUN DATE 07/11/1 SALES JRNL # 028 | | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 LTC NURSING H BILL WEEK END | IOMEW/O WALLS (LT |
|--------------------------------------|---------|--|-----------------------------|--------------|---------|--|-------------------|
| INVOICE# DATE | CUST NO | | REFERENCE | HOURS | TAX AMT | | TYP SURPLUS |
| 201737 7/06/1 201738 7/06/1 | | VISITING NURSE SERVICE VISITING NURSE SERVICE | · | 5.50 6.00 | | 80.20 87.48 | I I |
| | | | CUSTOMER | 11.50 | 0.00 | 167.68 | |
| | | | CATEGORY | 11.50 | 0.00 | 167.68 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | - 28 | 31 |
|-----------------------|------------|-----------------------|--------------------------------------|-----------------|-------|---------|-------------------------|------|---------|
| | .2 020) | 200 001 | | SALES REGISTER | | | BILL WEEK ENI | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201739 | 6/08/12 | 000008 | VISITING NURSE SERVICE | VASQUEZ, ARTURO | 7.00 | | 102.06 | I | |
| 201740 | 7/06/12 | 000008 | VISITING NURSE SERVICE | VASQUEZ, ARTURO | 7.00 | | 102.06 | I | |
| 201741 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VASQUEZ, ARTURO | 35.00 | | 510.30 | Τ | |
| | | | | CUSTOMER | 49.00 | 0.00 | 714.42 | | |
| | | | | CATEGORY | 49.00 | 0.00 | 714.42 | | |

| | | | YSIDE CITYWIDE | | | | | - 28 | |
|-----------|-----------|---------|------------------------|-----------------|-------|---------|---------------|------|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING H | | • |
| | | | | SALES REGISTER | | | BILL WEEK ENI | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | |
| 201742 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VASQUEZ, EUSTAG | 4.00 | | 58.32 | I | |
| 201743 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VASQUEZ, EUSTAG | 29.00 | | 422.82 | I | |
| 201744 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VASQUEZ, RAPHAE | 3.00 | | 43.74 | I | |
| 201745 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VASQUEZ, RAPHAE | 18.00 | | 262.44 | I | |
| 201746 | 7/06/12 | 000008 | VISITING NURSE SERVICE | VAZQUEZ, ESTHER | 5.00 | | 72.90 | I | |
| 201747 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VAZQUEZ, ESTHER | 35.00 | | 510.30 | I | |
| | | | | CUSTOMER | 94.00 | 0.00 | 1,370.52 | | |
| | | | | COSTONER | 24.00 | 0.00 | 1,370.32 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 94.00 | 0.00 | 1,370.52 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 283 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-----------------|------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | |
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | IG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201748 | 7/06/12 | 000008 | VISITING NURSE SERVICE | VELASQUEZ, NELL | 4.00 | | 58.32 | |
| 201749 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VELASQUEZ, NELL | 16.00 | | 233.28 | • • |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 LTC NURSING BILL WEEK EN | | |
|-----------------------|--------------------|-----------------------|---|-----------------------------|---------------|---------|---------------------------------------|--------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201750 201751 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 7.00 42.00 | | 102.06 612.36 | I I | |
| | | | | CUSTOMER | 49.00 | 0.00 | 714.42 | | |
| | | | | CATEGORY | 49.00 | 0.00 | 714.42 | | |

| | | | YSIDE CITYWIDE | | | | | 285 |
|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201752 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VERAS, JUANA | 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 | | | HOA HOSPICE AD | - |
|-----------------------|--------------------|-----------------------|---|--------------------------------|-------|---------|------------------|------------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDI | NG 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT I | YP SURPLUS |
| 201753 201754 | 7/06/12 7/06/12 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | VIGORITO, ANN VIGORITO, ANN | 10.00 | | 145.80 145.80 | I I |
| | | | | CUSTOMER | 20.00 | 0.00 | 291.60 | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 287 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------------|--------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING 7/ | /13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | URPLUS |
| 201755 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VILLAPOL, ANNA | 30.00 | | 437.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 437.40 | |

| ı | RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 88 |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 201756 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VISCONTI, JASON | 4.00 | | 58.32 I | |
| | | | | | CATEGORY | 4.00 | 0.00 | 58.32 | |

| | RUN DATE (SALES JRN1 | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 289 ADU ADULT | |
|---|--------------------------|---------|-----------------------|--------------------------------------|----------------|-------|---------|---------------------------|-------|
| ` | 011220 0141 | _ | 200 001 | | SALES REGISTER | | | | 13/12 |
| - | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | RPLUS |
| 2 | 201757 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VITERI, NELLY | 6.00 | | 87.48 I | |
| | | | | | CATEGORY | 6.00 | 0.00 | 87.48 | |

| ı | RUN DATE | 07/11/12 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 190 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|-------------------|---------------|
| ı | SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | I/O WALLS (LT |
| ı | | | | | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | 001750 | T 106 110 | | | | 10.00 | | 0.50 44 - | |
| ı | 201758 | 7/06/12 | 800000 | VISITING NURSE SERVICE | VITO, CARMEN | 18.00 | | 262.44 I | |
| ı | | | | | | | | | |
| ı | | | | | CA EFFCORY | 10.00 | 0.00 | 262.44 | |
| ı | | | | | CATEGORY | 18.00 | 0.00 | 262.44 | |

| RUN DATE 07/11 SALES JRNL # 02 | | | REGNY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI | SA |
|---|------------|--|--|-------------------------|---------|--|------------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201759 6/29 201760 7/06 201761 7/06 | /12 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | VIVACQUA, EMMA VIVACQUA, EMMA VIVACQUA, EMMA | 10.00 10.00 60.00 | | 145.80 145.80 874.80 | I I |
| | | | CUSTOMER | 80.00 | 0.00 | 1,166.40 | |
| | | | CATEGORY | 80.00 | 0.00 | 1,166.40 | |

| | | | YSIDE CITYWIDE | | | | | 292 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|-------------------------------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 7/13/12 |
| | | | | - | | | | , -, |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201762 | 7/06/12 | 000008 | VISITING NURSE SERVICE | VLAHOS, MARIE | 20.00 | | 291.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 291.60 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 293 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|-----------|--|
| SALES JRN | ъ # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | A | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | G 7/13/12 | |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS | |
| | | | | | | | | | |
| 201763 | 7/06/12 | 000008 | VISITING NURSE SERVICE | VOLASTRO, JOHN | 3.00 | | 43.74 I | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | CATEGORY | 3.00 | 0.00 | 43.74 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | - 29 | 94 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|----------------------------|------|---------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK END | TNC | 7/13/12 |
| | | | 5 | SALES REGISIER | | | DILL MEEK END | ING | //13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | |
| 201764 | 7/06/12 | 000008 | VISITING NURSE SERVICE | WERKMEISTER, JO | 20.00 | | 291.60 | I | |
| 201765 | 7/06/12 | 800000 | VISITING NURSE SERVICE | WOODS, JEWEL | 3.00 | | 43.74 | I | |
| 201766 | 7/06/12 | 000008 | VISITING NURSE SERVICE | WOODS, JEWEL | 12.00 | | 174.96 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 35.00 | 0.00 | 510.30 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 35.00 | 0.00 | 510.30 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 295 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201767 | 7/06/12 | 800000 | VISITING NURSE SERVICE | YAGHDJIAN, SIRA | 15.25 | | 222.36 I | |
| | | | | CATEGORY | 15.25 | 0.00 | 222.36 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 96 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201768 | 7/06/12 | 800000 | VISITING NURSE SERVICE | YELLAPAH, DOLLI | 12.00 | | 174.96 I | |
| | | | | CATEGORY | 12.00 | 0.00 | 174.96 | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - 29 | 97 |
|-----------------------|---------|----------|--------------------------------------|-----------------|-------|---------|---------------------|------|---------|
| | - " | | | BALES REGISTER | | | BILL WEEK END | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201769 | 7/06/12 | 000008 | VISITING NURSE SERVICE | YIANNITSIS, JOA | 3.00 | | 43.74 | I | |
| 201770 | 7/06/12 | 000008 | VISITING NURSE SERVICE | ZAMBRANO, CRUZM | 8.00 | | 116.64 | I | |
| 201771 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ZAMBRANO, CRUZM | 48.00 | | 699.84 | I | |
| | | | | CUSTOMER | 59.00 | 0.00 | 860.22 | | |
| | | | | CATEGORY | 59.00 | 0.00 | 860.22 | | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - AMH ADULT MENTA | |
|--------------|-----------|---------|--------------------------------------|----------------|-------|---------|-----------------------------|-----------|
| Bridde Gravi | L 0205 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDIN | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201772 | 7/06/12 | 800000 | VISITING NURSE SERVICE | ZELLE, EVE | 3.00 | | 43.74 I | |
| | | | | CATEGORY | 3.00 | 0.00 | 43.74 | |

RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 299 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES JRNL # 0289 GUI GUILDNET SALES REGISTER BILL WEEK ENDING 7/13/12 ACERNO, CLAIRE 25.00 363.00
ALI, AMRUNISSA 4.00 58.08
ALI, AMRUNISSA 4.00 290.40
ALI, AMRUNISSA 20.00 290.40
ALI, AMRUNISSA 20.00 290.40
ALSTON, ZULINE 45.00 809.36
AMABILE, ANTOIN 1.00 188.72
AMABILE, ANTOIN 6.00 1,132.32
AYALA, ENRIQUE 54.00 925.04
BEGUM, JAMILA 72.00 1,045.44
BUCARO, CONCETT 40.00 580.80
CCARSWELL, LUELL 69.75 1,012.77
CCEPEDA, TOMASA 30.00 435.60
COLAVITI, JEAN 56.00 813.12
COLEMAN, REGINA 34.50 500.44
DIAZ, CARMEN 30.00 435.60
DIAZ, CARMEN 30.00 435.60
DONOSO, MARGARE 18.00 653.40
DIAZ, CARMEN 18.00 595.32
ECKMAN, LOIS 6.00 1,132.32
ECKMAN, LOIS 6.00 551.76
FELICIANO, JOAN 38.00 551.76
FERNANDEZ, ANA 4.00 58.08
FERNANDEZ, ANA 4.00 59.80
FERNANDEZ, ANA 4.00 59.80
FERNANDEZ, ANA 4.00 59.80
FERNANDEZ, ANA 4.00 59.80
FERRARA, ANN 6.00 87.12
GOMEZ, YOLANDA 7.75 112.53
GREENSPAN, ALIC 35.00 69.20
MARTINEZ, EUMA 30.00 435.60
MARTINEZ, EUGENI 78.50 1,139.82
JOHNSON, DOROTH 55.25
MARTINEZ, EMMA 6.00 696.96
MONCHEF, DOROTHY 8.00 161.616
MICHEL, DOROTHY 8.00 162.60
MOSCICKA, JADWI 20.00 290.40
MUSCAT, CARMEN 25.00 363.00
MISSHIWIRZ, ANNE 20.00 290.40
MOSCICKA, JADWI 20.00 290.40
MOSCICKA, JADWI 20.00 290.40
MISSHIWIRZ, EMMA 30.00 435.60
MOSCICKA, JADWI 20.00 290.40
MISSHIWIRZ, EMMA 30.00 58.08
MOSCICKA, JADWI 20.00 290.40
MISSHIWIRZ, EMMA 30.00 58.08
MOSCICKA, JADWI 20.00 290.40
MISSHIWIRZ, ANNE 20.00 290.40
MISSHIWIRZ, ANNE 20.00 290.40
MISSHIWIRZ, ARREN 25.00 363.00
MISSHIWIRZ, ALBER 20.00 290.40
MISSHIWIRZ, ANNE 20.00 290.40
ORTIZ, LAURA 9.00 130.68 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 201773 7/06/12 000010 GUILDNET I 201774 7/06/12 000010 GUILDNET I 201775 7/06/12 000010 GUILDNET 201776 7/06/12 000010 GUILDNET 201777 GUILDNET 7/06/12 000010 201778 GUILDNET 7/06/12 000010 201779 7/06/12 000010 GUILDNET 201780 7/06/12 GUILDNET 000010 201781 7/06/12 000010 GUILDNET 201782 7/06/12 000010 GUILDNET 201783 7/06/12 000010 GUILDNET GUILDNET 201784 7/06/12 000010 201785 7/06/12 000010 GUILDNET 201786 7/06/12 000010 GUILDNET 201787 7/06/12 000010 GUILDNET 201788 7/06/12 000010 GUILDNET 201789 7/06/12 000010 GUILDNET 201790 7/06/12 000010 GUILDNET 201791 7/06/12 000010 GUILDNET 201792 7/06/12 000010 GUILDNET 201793 GUILDNET 7/06/12 000010 201794 GUILDNET 7/06/12 000010 201795 7/06/12 000010 GUILDNET 201796 7/06/12 000010 GUILDNET 201797 7/06/12 000010 GUILDNET 201798 7/06/12 000010 GUILDNET 201799 7/06/12 000010 GUILDNET 201800 7/06/12 000010 GUILDNET 201801 7/06/12 000010 GUILDNET 201802 7/06/12 000010 GUILDNET 201803 7/06/12 000010 GUILDNET 201804 7/06/12 000010 GUILDNET 201805 7/06/12 GUILDNET 000010 201806 7/06/12 000010 GUILDNET 201807 7/06/12 000010 GUILDNET 201808 7/06/12 000010 GUILDNET 201809 7/06/12 000010 GUILDNET 201810 7/06/12 000010 GUILDNET 201811 7/06/12 000010 GUILDNET 201812 GUILDNET 7/06/12 000010 201813 7/06/12 000010 GUILDNET 201814 7/06/12 000010 GUILDNET 201815 7/06/12 000010 GUILDNET 201816 7/06/12 GUILDNET 000010 201817 7/06/12 GUILDNET 000010 201818 7/06/12 000010 GUILDNET 201819 7/06/12 000010 GUILDNET 201820 7/06/12 000010 GUILDNET 7/06/12 000010 GUILDNET 201821

| RUN DATE (| 07/11/12 - L # 0289 | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 2 - GUI GUILDNET | 300 |
|------------|------------------------|----------|--|--|----------|---------|--------------------------|------------|
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | IG 7/13/12 |
| INVOICE# | DATE | | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | TP SURPLUS |
| 201822 | 7/06/12 | 000010 | GUILDNET | ORTIZ, LAURA | 54.00 | | 784.08 | • • |
| 201823 | 7/06/12 | 000010 | GUILDNET | PAPHITIS, RICHA | 32.00 | | 464.64 | |
| 201824 | 7/06/12 | 000010 | GUILDNET | PAZIOULIS, KLEO | 55.00 | | 798.60 | |
| 201825 | 7/06/12 | 000010 | GUILDNET | PENA, WALESKA | 8.00 | | 116.16 | |
| 201826 | 7/06/12 | 000010 | GUILDNET | PENA, WALESKA | 48.00 | | 696.96 I | |
| 201827 | 7/06/12 | 000010 | GUILDNET | PEREZ, MARIA | 24.00 | | 348.48 | |
| 201828 | 7/06/12 | 000010 | GUILDNET | PICHARDO, MARIA | 63.00 | | 914.76 | |
| 201829 | 7/06/12 | 000010 | GUILDNET | PINILLA, VICTOR | 5.00 | | 72.60 | • • |
| 201830 | 7/06/12 | 000010 | GUILDNET | PINILLA, VICTOR | 30.00 | | 435.60 | • • |
| 201831 | 7/06/12 | 000010 | GUILDNET | PRADO, NANCY | 12.00 | | 174.24 | |
| 201832 | 7/06/12 | 000010 | GUILDNET | PROANO, ALICIA | 21.00 | | 325.92 | • • |
| | 7/06/12 | 000010 | GUILDNET | PROANO, BRUNO | 33.00 | | 512.16 | |
| 201834 | 7/06/12 | 000010 | GUILDNET | PRYCE, CLYDIA | 16.00 | | 232.32 | |
| 201835 | 7/06/12 | 000010 | GUILDNET | RAMOS, ESTHER | 16.00 | | 232.32 | |
| 201836 | 7/06/12 | 000010 | GUILDNET | RESTULA, VINCEN | 20.00 | | 290.40 | |
| 201837 | 7/06/12 | 000010 | GUILDNET | REYES, JULIO | 12.00 | | 174.24 | |
| 201838 | 7/06/12 | 000010 | GUILDNET | RIVAS, GERTRUDI | 20.00 | | 290.40 | |
| 201839 | 7/06/12 | 000010 | GUILDNET | RODRIGUEZ, FABI | 24.00 | | 348.48 | • • |
| 201840 | 7/06/12 | 000010 | GUILDNET | RODRIGUEZ, HOLG | 63.00 | | 914.76 | • • |
| 201841 | 7/06/12 | 000010 | GUILDNET | ROJAS, ANGEL | 15.00 | | 232.80 | • • |
| 201842 | 7/06/12 | 000010 | GUILDNET | ROJAS, HAYDEE | 20.00 | | 310.40 | • • |
| 201843 | 7/06/12 | 000010 | GUILDNET | SALJANIN, DILJA | 53.00 | | 769.56 | • • |
| 201844 | 6/29/12 | 000010 | GUILDNET | SANCHEZ, ELIZAB | 46.50 | | 675.18 | • • |
| 201845 | 7/06/12 | 000010 | GUILDNET | SHELTON, AGUEDA | 35.00 | | 508.20 | • • |
| 201846 | 6/29/12 | 000010 | GUILDNET | SOMRAJ, UMILLA | 12.00 | | 174.24 | • • |
| 201847 | 7/06/12 | 000010 | GUILDNET | SOMRAJ, UMILLA | 8.00 | | 116.16 | |
| 201848 | 7/06/12 | 000010 | GUILDNET | VILLACRES, LUZ | 8.00 | | 116.16 | |
| 201849 | 7/06/12 | 000010 | GUILDNET | VLAHOS, MARIE | 64.00 | | 929.28 | |
| 201850 | 7/06/12 | 000010 | GUILDNET | WEISZ, KLARA | 4.00 | | 58.08 I | |
| | 7/06/12 | 000010 | GUILDNET | WEST, BALDWIN | 20.00 | | 290.40 | |
| 201852 | 7/06/12 | 000010 | GUILDNET | WHITE, GLORIA | 8.00 | | 116.16 | |
| 201853 | 7/06/12 | 000010 | GUILDNET | WHITLEY, MYRNA | 16.00 | | 232.32 | |
| 201854 | 7/06/12 | 000010 | GUILDNET | YI, CARLOS | 24.00 | | 348.48 | |
| | 7/06/12 | 000010 | GUILDNET | YIANTSELIS, VIR | 7.00 | | 1,321.04 | |
| 201856 | 7/06/12 | 000010 | GUILDNET | ZARE, GLORIA | 45.50 | | 801.62 | |
| 201857 | 7/06/12 | 000010 | GUILDNET | ZUMAETA, FANNY | 64.00 | | 929.28 1 | : |
| | | | GUILDNET | REFERENCE ORTIZ, LAURA PAPHITIS, RICHA PAZIOULIS, KLEO PENA, WALESKA PENA, WALESKA PEREZ, MARIA PICHARDO, MARIA PINILLA, VICTOR PINILLA, VICTOR PINILLA, VICTOR PRADO, NANCY PROANO, BRUNO PRYCE, CLYDIA RAMOS, ESTHER RESTULA, VINCEN REYES, JULIO RIVAS, GERTRUDI RODRIGUEZ, FABI RODRIGUEZ, FABI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, HAYDEE SALJANIN, DILJA SANCHEZ, ELIZAB SHELTON, AGUEDA SOMRAJ, UMILLA SOMRAJ, UMILLA SOMRAJ, UMILLA VILLACRES, LUZ VLAHOS, MARIE WEISZ, KLARA WEST, BALDWIN WHITE, GLORIA WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIR ZARE, GLORIA ZUMAETA, FANNY CUSTOMER | 2,395.25 | 0.00 | 38,964.11 | |
| | | | | CATEGORY | | | 38,964.11 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE | | | | | PAGE 1 | - 30 |)1 | | |
|---|-----------|---------|--------------------|--|----------|---------|---------------|-----|---------|
| SALES JRN | IL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | HFS HEALTH FI | RST | |
| | | | | SALES REGISTE | 3 | | BILL WEEK END | ING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201858 | 7/06/12 | 000122 | HEALTH FIRST | BEGUM, MANWARA | 28.00 | | 472.64 | I | |
| 201859 | 7/06/12 | 000122 | HEALTH FIRST | BHAIRO, KOWSILI | 32.00 | | 540.16 | I | |
| 201860 | 6/29/12 | 000122 | HEALTH FIRST | BOCHENEC, JOLAN | 48.00 | | 810.24 | I | |
| 201861 | 7/06/12 | 000122 | HEALTH FIRST | CARMONA, LUZ | 40.00 | | 675.20 | I | |
| 201862 | 7/06/12 | 000122 | HEALTH FIRST | CARRION, MARIA | 48.00 | | 810.24 | I | |
| 201863 | 6/22/12 | 000122 | HEALTH FIRST | CEBALLOS, ANA | 52.00 | | 877.76 | I | |
| 201864 | 7/06/12 | 000122 | HEALTH FIRST | CHARITAR, RAMKA | 30.00 | | 506.40 | I | |
| 201865 | 6/29/12 | 000122 | HEALTH FIRST | CORTES DE GALIN | 36.00 | | 607.68 | I | |
| 201866 | 7/06/12 | 000122 | HEALTH FIRST | ESPAILLAT, AMPA | 28.00 | | 472.64 | I | |
| 201867 | 7/06/12 | 000122 | HEALTH FIRST | ESTEVES, JOSE | 42.00 | | 708.96 | I | |
| 201868 | 7/06/12 | 000122 | HEALTH FIRST | FERGERSON, TINA | 12.00 | | 202.56 | I | |
| 201869 | 7/06/12 | 000122 | HEALTH FIRST | FERRERA, FRANCI | 9.00 | | 151.92 | I | |
| 201870 | 7/06/12 | 000122 | HEALTH FIRST | FONTANES, PEDRO | 42.00 | | 708.96 | I | |
| 201871 | 7/06/12 | 000122 | HEALTH FIRST | FRANCISCO, RICH | 56.00 | | 945.28 | I | |
| 201872 | 6/29/12 | 000122 | HEALTH FIRST | FRIAS, BARBARA | 24.00 | | 405.12 | I | |
| 201873 | 6/29/12 | 000122 | HEALTH FIRST | HENRY, BRENDA | 12.00 | | 202.56 | I | |
| 201874 | 7/06/12 | 000122 | HEALTH FIRST | HERRING, CHARLE | 12.00 | | 202.56 | I | |
| 201875 | 7/06/12 | 000122 | HEALTH FIRST | KAUR, HARBANS | 49.00 | | 827.12 | I | |
| 201876 | 7/06/12 | 000122 | HEALTH FIRST | LAZALA, GLADYS | 49.00 | | 827.12 | I | |
| 201877 | 7/06/12 | 000122 | HEALTH FIRST | LOPEZ-RAMIREZ, | 77.00 | | 1,299.76 | I | |
| 201878 | 7/06/12 | 000122 | HEALTH FIRST | MACARENA, SAHAR | 72.00 | | 1,215.36 | I | |
| 201879 | 7/06/12 | 000122 | HEALTH FIRST | MARTIN, ARIANA | 12.00 | | 202.56 | I | |
| 201880 | 7/06/12 | 000122 | HEALTH FIRST | RODRIGUEZ, MARG | 16.00 | | 270.08 | I | |
| 201881 | 7/06/12 | 000122 | HEALTH FIRST | RUIZ JR, SAMUEL | 17.00 | | 286.96 | I | |
| 201882 | 7/06/12 | 000122 | HEALTH FIRST | SALAZAR, LUZ MA | 56.00 | | 945.28 | I | |
| 201883 | 7/06/12 | 000122 | HEALTH FIRST | SPIVEY, PATRICI | 20.00 | | 337.60 | Ī | |
| 201884 | 7/06/12 | 000122 | HEALTH FIRST | ST ROMAINE, CLA | 68.00 | | 1,147.84 | Ī | |
| 201885 | 7/06/12 | 000122 | HEALTH FIRST | SURIEL, GERTRUD | 16.00 | | 270.08 | I | |
| 201886 | 7/06/12 | 000122 | HEALTH FIRST | SURIEL, GERTRUD | 4.00 | | 67.52 | I | |
| 201887 | 7/06/12 | 000122 | HEALTH FIRST | VASQUEZ. OLGA | 18.50 | | 312.28 | Ī | |
| 201888 | 7/06/12 | 000122 | HEALTH FIRST | VEGA, GLORIA | 32.00 | | 540.16 | Ī | |
| 201889 | 7/06/12 | 000122 | HEALTH FIRST | WILLIAMS, RODNE | 18.00 | | 303.84 | I | |
| | | | | CUSTOMER | 1,075.50 | 0.00 | 18,154.44 | | |
| | | | | REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA HERRING, CHARLE KAUR, HARBANS LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VASQUEZ, OLGA VEGA, GLORIA WILLIAMS, RODNE CUSTOMER | 1,075.50 | 0.00 | 18,154.44 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | IYSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E | | | | PAGE 1 | - 3 | 02 |
|-----------|------------|------------|--|-----------------|--------|---------|---------------|------|---------|
| SALES JRN | IL # 0289 | TOC 001 | SUNNYSIDE CITYWIDE REG | NY NY | | | NHP NEIGHBORE | HOOD | HEALTH |
| | | | SALE | S REGISTER | | | BILL WEEK EN | JING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201890 | 6/29/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | AHMED, UMARA | 64.00 | | 1,080.32 | I | |
| 201891 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | AKHTER, SELINA | 45.00 | | 759.60 | I | |
| 201892 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | ARDITTO, PATRIC | 24.00 | | 405.12 | I | |
| 201893 | 6/22/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | CHUKWUJIORAH, T | 57.00 | | 962.16 | I | |
| 201894 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | DARWISH, NADIA | 45.00 | | 759.60 | I | |
| 201895 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | DIAZ, CARMEN | 26.00 | | 438.88 | I | |
| 201896 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | FERNANDEZ, MARI | 12.00 | | 202.56 | I | |
| 201897 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | FLORES, MARITZA | 70.00 | | 1,181.60 | I | |
| 201898 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | HAMPTON, PRISCI | 45.00 | | 759.60 | I | |
| 201899 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | JONES, CYNTHIA | 36.00 | | 607.68 | I | |
| 201900 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | KHALIL, RASHAN | 36.00 | | 607.68 | I | |
| 201901 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | KHAN, FARUQUE | 12.00 | | 202.56 | I | |
| 201902 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | KROLL, KATHERIN | 32.00 | | 540.16 | I | |
| 201903 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | MORALES FERNAD | 42.00 | | 708.96 | I | |
| 201904 | 6/29/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | MOSKOWITZ, RONA | 48.00 | | 810.24 | I | |
| 201905 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | OCASIO, VIRGINI | 22.00 | | 371.36 | I | |
| 201906 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | RODRIGUEZ, JESS | 25.00 | | 422.00 | I | |
| 201907 | 6/29/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | RODRIGUEZ, MARI | 20.00 | | 337.60 | I | |
| 201908 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | SALVATO, MARY | 56.00 | | 945.28 | I | |
| 201909 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | SHEPPARD, ERMA | 68.00 | | 1,147.84 | I | |
| 201910 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | WELLS, WYNORIA | 12.00 | | 202.56 | I | |
| 201911 | 7/06/12 | 000120 | NEIGHBORHOOD HEALTH PROVIDERS | WILSON, SHERYL | 32.00 | | 540.16 | I | |
| | | | NEIGHBORHOOD HEALTH PROVIDERS NEIGHB | | | | | | |
| | | | | CATEGORY | 829.00 | 0.00 | 13,993.52 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 303 |
|-----------|------------|------------|---------------------------|-----------------|--------|---------|-----------------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | FID NY CATHOLIC | /FIDELIS |
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | G 7/13/12 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201012 | 7/06/10 | 000106 | NIVE CARRIOT TO (FIDEL TO | DARTCEA TOOR | 40.00 | | 006 60 1 | |
| 201912 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | BATISTA, JOSE | 49.00 | | 826.63 I | |
| 201913 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | BERGES, MARITZA | 27.00 | | 455.49 I | |
| 201914 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | LITMAN, GAIL | 14.00 | | 236.18 I | |
| 201915 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | MARTINEZ, LUISA | 84.00 | | 1,417.08 I | |
| 201916 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | PANOS, DESPINA | 63.00 | | 1,062.81 | |
| 201917 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | PURNELL, ROSE | 4.00 | | 67.48 I | |
| 201918 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | PURNELL, ROSE | 16.00 | | 269.92 I | |
| 201919 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | SAMOJEDNY, MICH | 30.00 | | 506.10 I | |
| 201920 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | SZE, BECKY | 31.00 | | 522.97 I | |
| 201921 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | VARGAS, RAQUEL | 9.00 | | 151.83 I | |
| 201922 | 7/06/12 | 000126 | NYS CATHOLIC/FIDELIS | VARGAS, RAQUEL | 54.00 | | 910.98 I | |
| | | | | | | | | |
| | | | | CUSTOMER | 381.00 | 0.00 | 6,427.47 | |
| | | | | | | | | |
| | | | | CATEGORY | 381.00 | 0.00 | 6,427.47 | |

| RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 304 | | | | | | | | | | | | |
|--|----------|---------|--------------------|-----------------|--------|---------|--------------|------|---------|--|--|--|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | UHC UNITED H | | 7/12/10 | | | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | | | |
| 201923 | 7/06/12 | 000128 | UNITED HEALTH CARE | CALDERON, MIGDA | 70.00 | | 1,201.20 | I | | | | |
| 201924 | 7/06/12 | 000128 | UNITED HEALTH CARE | MILLAN, ARMIDA | 53.00 | | 909.48 | I | | | | |
| 201925 | 7/06/12 | 000128 | UNITED HEALTH CARE | PAUL, PUTUL | 12.00 | | 205.92 | I | | | | |
| 201926 | 6/22/12 | 000128 | UNITED HEALTH CARE | SAFOS, PATRA | 64.00 | | 1,098.24 | I | | | | |
| 201927 | 7/06/12 | 000128 | UNITED HEALTH CARE | YUSUPOV, PULAT | 8.00 | | 137.28 | I | | | | |
| | | | | | 207.00 | | 2 550 10 | | | | | |
| | | | | CUSTOMER | 207.00 | 0.00 | 3,552.12 | | | | | |
| | | | | | | | | | | | | |
| | | | | CATEGORY | 207.00 | 0.00 | 3,552.12 | | | | | |

| RUN DATE | - , , | | YSIDE CITYWIDE | DDG 1997 | | | 11102 | - 30 | 5 |
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| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | EHP EMBLEM HE BILL WEEK END | | 7/13/12 |
| | | | | SADES KEGISIEK | | | DIDD WEEK END | JING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201020 | 7/06/10 | 000114 | DMDI DM JUDA I MU | CAMPBELL CAPOL | 20.75 | | 200 50 | - | |
| 201928 | 7/06/12 | 000114 | EMBLEM HEALTH | CAMPBELL, CAROL | 20.75 | | 290.50 | 1 | |
| 201929 | 7/06/12 | 000114 | EMBLEM HEALTH | COPE, WILLIE | 84.00 | | 1,176.00 | I | |
| 201930 | 7/06/12 | 000114 | EMBLEM HEALTH | COPELAND, ELISE | 42.00 | | 598.50 | I | |
| 201931 | 7/06/12 | 000114 | EMBLEM HEALTH | HENRIQUEZ, TERE | 20.00 | | 280.00 | I | |
| 201932 | 7/06/12 | 000114 | EMBLEM HEALTH | JACKSON, FRANCE | 35.00 | | 490.00 | I | |
| 201933 | 7/06/12 | 000114 | EMBLEM HEALTH | KEATON, CATHERI | 84.00 | | 1,176.00 | I | |
| 201934 | 7/06/12 | 000114 | EMBLEM HEALTH | REYNOLDS, HARRI | 12.00 | | 168.00 | I | |
| 201935 | 7/06/12 | 000114 | EMBLEM HEALTH | WEATHERS, VERDE | 60.00 | | 840.00 | I | |
| 201936 | 7/06/12 | 000114 | EMBLEM HEALTH | WESTFIELD, BREN | 56.00 | | 784.00 | Ī | |
| | | | | | | | | | |
| | | | | CUSTOMER | 413.75 | 0.00 | 5,803.00 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 413.75 | 0.00 | 5,803.00 | | |

| RUN DATE SALES JRN | - , | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG | NY NY | | | PAGE 1 HIP HEALTH I | - 3(| |
|-----------------------|---------|------------|-----------------------------------|-------|-----------------|--------|---------|------------------------|------|---------|
| SALES OW | H 0207 | 100 001 | SONNISIDE CITIWIDE | SALE | | | | BILL WEEK EN | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201937 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | AHMAD, AMATUL | 8.00 | | 135.04 | I | |
| 201938 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | CIPRIAN, JACQUE | 16.00 | | 270.08 | I | |
| 201939 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | DE JESUS, TIBUR | 63.00 | | 1,063.44 | I | |
| 201940 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | LOYOLA, MARIA | 10.00 | | 168.80 | I | |
| 201941 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | ORR, LOUISE | 25.00 | | 422.00 | I | |
| 201942 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | PARADISE, ANITA | 8.00 | | 135.04 | I | |
| 201943 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | SHAH, HANSIKABE | 5.00 | | 84.40 | I | |
| 201944 | 7/06/12 | 000136 | HEALTH INSURANCE PLAN | OF NY | WILLIAMS, DIANE | 20.00 | | 337.60 | I | |
| | | | | | CUSTOMER | 155.00 | 0.00 | 2,616.40 | | |
| | | | | | CATEGORY | | 0.00 | 2,616.40 | | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NV NV | | | PAGE 1 - MPH METROPLUS H | 307 JEALTH |
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| DALLO OIU | и т одор | LOC UUI | SOMNISIDE CITIWIDE | REG NY NY SALES REGISTER | | | BILL WEEK ENDI | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 201945 | 6/29/12 | 000130 | METROPLUS HEALTH | ANDERSON, BETH | 31.00 | | 531.65 | Γ |
| 201946 | 6/29/12 | 000130 | METROPLUS HEALTH | ARIAS, NORA | 80.00 | | 1,372.00 | [|
| 201947 | 7/06/12 | 000130 | METROPLUS HEALTH | BEDOYA, MONICA | 15.00 | | 257.25 | [|
| 201948 | 6/22/12 | 000130 | METROPLUS HEALTH | BRIGGS, LOUIS | | | 823.20 | [|
| 201949 | 7/06/12 | 000130 | METROPLUS HEALTH | CORDERO, ROSEND | 70.00 | | 1,200.50 | [|
| 201950 | 7/06/12 | 000130 | METROPLUS HEALTH | DAVIS, ANGIE | 133.00 | | 2,280.95 | [|
| 201951 | 4/20/12 | 000130 | METROPLUS HEALTH | DURHAM, CYNTHIA | | | 908.95 | [|
| 201952 | 7/06/12 | 000130 | METROPLUS HEALTH | ESPINOSA, MONIC | 20.00 | | 343.00 | [|
| 201953 | 7/06/12 | 000130 | METROPLUS HEALTH | GALAS, TERESA | 35.00 | | 600.25 | [|
| 201954 | 7/06/12 | 000130 | METROPLUS HEALTH | MURDOCK, GERTRU | 40.00 | | 686.00 | [|
| 201955 | 7/06/12 | 000130 | METROPLUS HEALTH | PERSAD, USHA | 60.00 | | 1,029.00 | [|
| 201956 | 7/06/12 | 000130 | METROPLUS HEALTH | PUCHUELA, MARIA | | | 960.40 | [|
| 201957 | 7/06/12 | 000130 | METROPLUS HEALTH | RAMPERSAID, ALI | 24.00 | | 411.60 | [|
| 201958 | 7/06/12 | 000130 | METROPLUS HEALTH | RYALS, CHARLES | 32.00 | | 548.80 | [|
| 201959 | 7/06/12 | 000130 | METROPLUS HEALTH | SANTORO, MATTHE | | | 514.50 | [|
| 201960 | 7/06/12 | 000130 | METROPLUS HEALTH | SHUMON, NUK-FNU | 28.00 | | 480.20 | [|
| 201961 | 6/29/12 | 000130 | METROPLUS HEALTH | VALLE, BLASINA | | | 1,097.60 | Ε |
| | | | | CUSTOMER | 819.00 | 0.00 | 14,045.85 | |
| | | | | CATEGORY | 819.00 | 0.00 | 14,045.85 | |

| | | | YSIDE CITYWIDE | DEG | NTV NTV | | | - | - 30 | 8 |
|----------------------------|-------------------------------|----------------------------|--|----------------|--|-------------------------|---------|-------------------------------|-------------|---------|
| SALES JRN | L # U289 | TOC 001 | SUNNYSIDE CITYWIDE | REG S A L E | | R | | WEL WELCARE OF BILL WEEK END: | | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | | ГҮР | SURPLUS |
| 201962 201963 201964 | 7/06/12 7/06/12 7/06/12 | 000124 000124 000124 | WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK, | INC. | GENAO, DANIELA GUERRERO, MIRTH MARTINEZ, MARIA | 54.00 41.50 42.00 | | 928.80 713.80 722.40 | I I I | |
| 201965 | 7/06/12 | 000124 | WELCARE OF NEW YORK, | INC. | RAMIREZ, ALIDA | 63.00 | | 1,083.60 | I | |
| | | | | | CUSTOMER | 200.50 | 0.00 | 3,448.60 | | |
| | | | | | CATEGORY | 200.50 | 0.00 | 3,448.60 | | |

| | | | YSIDE CITYWIDE | | | | | PAGE 1 - | |
|-----------|-----------|---------|----------------------|-----------|-----------------|-------|---------|------------------|---------|
| SALES JRI | NL # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG I | | | | NPS NY PRESBYTEI | - |
| | | | | SALES | S REGISTER | | | BILL WEEK ENDING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 001066 | T 105 110 | 000104 | | | | 25 22 | | - | |
| 201966 | 7/06/12 | 000134 | NY-PRESBYTERIAN SYST | EM SELECT | KARASSAVIDES, A | 35.00 | | 600.60 I | |
| | | | | | | | | | |
| | | | | | CATEGORY | 35.00 | 0.00 | 600.60 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - : HCP HEALTHCARE P BILL WEEK ENDING | |
|----------------------------|-------------------------------|----------------------------|--|---|-------------------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 201967 201968 201969 | 7/06/12 7/06/12 7/06/12 | 000148 000148 000148 | HEALTH CARE PATTNERS HEALTH CARE PATTNERS HEALTH CARE PATTNERS | GOMES, AGUSTINA TOWLES, ADA ZAMBRANO, ZOILA | 54.00 20.00 12.00 | | 911.52 I 337.60 I 202.56 I | |
| | | | | CUSTOMER | 86.00 | 0.00 | 1,451.68 | |
| | | | | CATEGORY | 86.00 | 0.00 | 1,451.68 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - AMG AMERIGROUP | |
|-----------------------|-----------|-----------------------|--------------------------------------|-----------------|--------|---------|----------------------------|------------|
| | 2 11 0205 | 200 001 | | SALES REGISTER | | | BILL WEEK ENDI | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 201970 | 6/22/12 | 000132 | AMERIGROUP | DELEON, IRIS | 35.00 | | 590.45 | I |
| 201971 | 7/06/12 | 000132 | AMERIGROUP | ESPERSON, CLAUD | 8.00 | | 134.96 | I |
| 201972 | 7/06/12 | 000132 | AMERIGROUP | FERNANDEZ, NORK | 42.00 | | 708.54 | I |
| 201973 | 7/06/12 | 000132 | AMERIGROUP | GUERRA, LORRAIN | 61.00 | | 1,029.07 | I |
| 201974 | 7/06/12 | 000132 | AMERIGROUP | HARDING, EDNA | 30.00 | | 506.10 | I |
| 201975 | 6/29/12 | 000132 | AMERIGROUP | HAWKINS S, MA | 50.00 | | 843.50 | I |
| 201976 | 7/06/12 | 000132 | AMERIGROUP | PRUITT, JOHNNY | 8.00 | | 135.04 | I |
| 201977 | 7/06/12 | 000132 | AMERIGROUP | WALTERS, BYRON | 25.00 | | 421.75 | I |
| 201978 | 7/06/12 | 000132 | AMERIGROUP | YOUNG, KALEILE | 18.00 | | 303.66 | I |
| | | | | CUSTOMER | 277.00 | 0.00 | 4,673.07 | |
| | | | | CATEGORY | 277.00 | 0.00 | 4,673.07 | |

| | | | YSIDE CITYWIDE | | | | | - | - 31 | .2 |
|-----------|----------|---------|---------------------|----------|-----------------|-------|---------|--------------|--------|-----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | _ | | | | PAR PRIVATE | D T110 | F /12 /10 |
| | | | | SALE | S REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 201979 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | CAGAN, RUMANDO | 8.00 | | 116.00 | I | |
| 201980 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | CAIALA, SALLY | 4.00 | | 58.00 | I | |
| 201981 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | MANIACE, AGNES | 4.00 | | 58.00 | I | |
| 201982 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | MANIACE, VINCEN | 4.00 | | 58.00 | I | |
| 201983 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | MARTIN, RUTH | 8.00 | | 116.00 | I | |
| 201984 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | MONTELIONE, CAL | 8.00 | | 116.00 | I | |
| 201985 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | ORTIZ, EDUARDO | 4.00 | | 58.00 | I | |
| 201986 | 6/22/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | THEOHARIS, ARIS | 4.00 | | 58.00 | I | |
| 201987 | 6/29/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | THEOHARIS, ARIS | 8.00 | | 116.00 | I | |
| 201988 | 7/06/12 | 000002 | SUNNYSIDE COMMUNITY | SERVICES | THEOHARIS, ARIS | 8.00 | | 116.00 | I | |
| | | | | | CUSTOMER | 60.00 | 0.00 | 870.00 | | |
| | | | | | CATEGORY | 60.00 | 0.00 | 870.00 | | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 313 |
|-----------|------------|------------|---------------------------|---------------|-------|---------|-------------------------------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ICS INDEPENDENCE CARE SYSTEMS |
| | | | S A | LES REGISTER | | | BILL WEEK ENDING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 201989 | 7/06/12 | 000006 | INDEPENDENCE CARE SYSTEMS | HAWKINS S, MA | 48.75 | | 658.13 I |
| | | | | CATEGORY | 48.75 | 0.00 | 658.13 |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 314 | |
|-----------|----------|---------|-----------------------------------|-----------------|-------|---------|--------------------------------|----------|
| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE REG S A L E | =:= =:= | | | PAR PRIVATE BILL WEEK ENDING 7 | /13/12 |
| | | | 5 2 2 | | | | BILL WELL ENDING | , 13, 12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | URPLUS |
| 201990 | 7/06/12 | 000040 | DUISIN, CHRISTINE | DUISIN, XENIA | 20.00 | | 310.00 I | |
| 201991 | 7/06/12 | 000049 | ELIZABETH SETON PEDIATRIC CTR | MORSHELINA, NAS | 15.00 | | 206.85 I | |
| 201992 | 7/06/12 | 000078 | MCDERMOTT, LOUISE | MCDERMOTT, LOUI | 8.00 | | 124.00 I | |
| | | | | | | | | |
| | | | | CATEGORY | 43.00 | 0.00 | 640.85 | |

| RUN DATE | 07/11/12 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 31 | L5 |
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| SALES JRN | L # 0289 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CAS CHILDREN | 'S AII | SOCIETY |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 7/13/12 |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 001000 | E /06 /10 | 00000 | G | DIDDIE 1011 | 00 00 | | 210 00 | _ | |
| 201993 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | DUNNE, MYEISHA | 20.00 | | 310.00 | I | |
| 201994 | 6/22/12 | 000088 | CHILDREN'S AID SOCIETY | GIL, GENEVIEVE | 2.00 | | 31.00 | I | |
| 201995 | 6/29/12 | 000088 | CHILDREN'S AID SOCIETY | GIL, GENEVIEVE | 6.00 | | 93.00 | I | |
| 201996 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | GIL, GENEVIEVE | 6.00 | | 93.00 | I | |
| 201997 | 6/29/12 | 000088 | CHILDREN'S AID SOCIETY | GIL, MARANGELI | 6.00 | | 93.00 | I | |
| 201998 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | GIL, MARANGELI | 6.00 | | 93.00 | I | |
| 201999 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | SALAS, HELENA | 4.00 | | 62.00 | I | |
| 202000 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | SALAS, HELENA | 22.50 | | 348.75 | Ī | |
| 202001 | 6/29/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, BRANDON | 8.00 | | 124.00 | T | |
| 202002 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, BRANDON | 4.00 | | 62.00 | T | |
| 202003 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, BRANDON | 24.00 | | 372.00 | T | |
| 202003 | 6/29/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, BRANDON VARGAS, JOHN | 7.00 | | 108.50 | | |
| | | | | • | | | | | |
| 202005 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, JOHN | 4.00 | | 62.00 | | |
| 202006 | 7/06/12 | 000088 | CHILDREN'S AID SOCIETY | VARGAS, JOHN | 16.00 | | 248.00 | Τ | |
| | | | | | | | | | |
| | | | | CUSTOMER | 135.50 | 0.00 | 2,100.25 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 135.50 | 0.00 | 2,100.25 | | |

| RUN DATE SALES JRN | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 31 PAR PRIVATE BILL WEEK ENDING | 6 7/13/12 |
|-----------------------|---------|---------------------|--------------------------------------|-----------------------------|-------|---------|--|--------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 202007 | 7/06/12 | 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 | REGNY NY SALES REGISTER | | | PAGE 1 - ELD ELDERSERVEHE BILL WEEK ENDING | |
|-----------------------|--------------------|-----------------------|--------------------------------------|--------------------------------|----------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 202008 202009 | 7/06/12 7/06/12 | 000101 000101 | ELDERSERVEHEALTH ELDERSERVEHEALTH | BEAN, ELMIRA BLACK, DOROTHY | 25.00 11.75 | | 356.25 I 167.44 I | |
| | | | | CUSTOMER | 36.75 | 0.00 | 523.69 | |
| | | | | CATEGORY | 36.75 | 0.00 | 523.69 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | DEC MY MY | | | PAGE 1 PAR PRIVATE | - 318 |
|-----------------------|--------------------|------------------|--------------------------------------|---------------------------------|---------------|---------|-----------------------|-------------|
| SALES URN | ⊔ # 0209 | LOC 001 | SONNISIDE CITIMIDE | REG NY NY SALES REGISTER | | | BILL WEEK END | ING 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 202010 202011 | 7/06/12 7/06/12 | 000143 000143 | ETTORE COPPOLA ETTORE COPPOLA | COPPOLA, ETTORE COPPOLA, ETTORE | 4.00 14.75 | | 68.00 228.63 | I |
| | | | | CUSTOMER | 18.75 | 0.00 | 296.63 | |
| 202012 | 6/22/12 | 000145 | LARRY EISENBERG | BERGER, TESS | 7.00 | | 108.50 | I |
| | | | | CATEGORY | 25.75 | 0.00 | 405.13 | |

| RUN DATE (| | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG 1 | | | | CCM COMPREHE | | CARE MGMT |
|------------|---------|-----------------------|--------------------------------------|----------|-----------------|--------|---------|--------------|------|-----------|
| | | | | SALE | S REGISTEI | 3 | | BILL WEEK EN | DING | 7/13/12 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 202013 | 6/29/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | BONES, ANA | 8.00 | | 112.80 | I | |
| 202014 | 7/06/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | BONES, ANA | 20.00 | | 282.00 | I | |
| 202015 | 7/06/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | GARCIA, MARIA | 15.50 | | 218.55 | I | |
| 202016 | 7/06/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | PULLIAM, WILLIE | 24.00 | | 338.40 | I | |
| 202017 | 7/06/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | ROSARIO, CELEST | 5.75 | | 81.08 | I | |
| 202018 | 7/06/12 | 000150 | COMPREHENSIVE CARE MAN | IAGEMENT | ROSARIO, CELEST | 30.00 | | 423.00 | I | |
| | | | | | CUSTOMER | 103.25 | 0.00 | 1,455.83 | | |
| | | | | | CATEGORY | 103.25 | 0.00 | 1,455.83 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE REG SUNNYSIDE CITYWIDE REG S A L E | | | | PAGE 1 PAR PRIVATE BILL WEEK EN | - 32 | 7/13/12 |
|----------------------------|-------------------------------|----------------------------|---|---|--------------------------|---------|---------------------------------------|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 202019 202020 202021 | 6/29/12 7/06/12 7/06/12 | 000155 000155 000155 | ROSEMARY JIBAJA ROSEMARY JIBAJA ROSEMARY JIBAJA | JIBAJA, ROSEMAR JIBAJA, ROSEMAR JIBAJA, ROSEMAR | 12.00 24.00 144.00 | | 204.00 408.00 2,268.01 | I I I | |
| | | | | CUSTOMER | 180.00 | 0.00 | 2,880.01 | | |
| 202022 202023 | 6/22/12 7/06/12 | 000165 000165 | ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION | TUCCI, DOROTHY TUCCI, DOROTHY | 4.00 20.00 | | 62.00 310.00 | I I | |
| | | | | CUSTOMER | 24.00 | 0.00 | 372.00 | | |
| 202024 202025 | 7/06/12 7/06/12 | 000167 000167 | AMY L. WELTMAN AMY L. WELTMAN | LUSKIND, FRANCE LUSKIND, FRANCE | 1.00 6.00 | | 204.00 1,134.00 | I I | |
| | | | | CUSTOMER | 7.00 | 0.00 | 1,338.00 | | |
| 202026 202027 202028 | 6/29/12 7/06/12 7/06/12 | 002215 002215 002215 | KEITH SALMON KEITH SALMON KEITH SALMON | LAWRANCE, LILLA LAWRANCE, LILLA LAWRANCE, LILLA | | | 68.00 68.00 254.00 | I I I | |
| | | | | CUSTOMER | 24.00 | 0.00 | 390.00 | | |
| 202029 | 7/06/12 | 003108 | NIGRO, CATHERINE | NIGRO, CATHERIN | 20.00 | | 310.00 | I | |
| 202030 | 7/06/12 | 003743 | VICTOR NICASSIO | NICASSIO, VICTO | 6.00 | | 93.00 | I | |
| 202031 | 7/06/12 | 004784 | CAMILLERI, JOSEPH | CAMILLERI, JOSE | 10.00 | | 135.00 | I | |
| 202032 | 7/06/12 | 007630 | MAUREEN MAIORANA | MAIORANA, MAURE | 7.75 | | 125.94 | I | |
| 202033 | 7/06/12 | 007631 | MICHAEL MAIRANO | MAIORANA, MICHE | 12.00 | | 195.00 | I | |
| 202034 202035 | 7/06/12 7/06/12 | 007883 007883 | ABBAMONTE, RUTH ABBAMONTE, RUTH | ABBAMONTE, RUTH ABBAMONTE, RUTH | 2.00 | | 34.00 65.00 | I I | |
| | | | | CUSTOMER | 6.00 | 0.00 | 99.00 | | |
| 202036 202037 | 7/06/12 7/06/12 | 009498 009498 | LOUIS LE NOACH LOUIS LE NOACH | LENOACH, LOUIS LENOACH, LOUIS | 3.00 6.00 | | 51.00 97.50 | I I | |
| | | | | CUSTOMER | 9.00 | 0.00 | 148.50 | | |
| 202038 | 7/06/12 | 009566 | ELIZABETH CERNY | CERNY, ELIZABET | 25.00 | | 387.50 | I | |
| 202039 | 7/06/12 | 009605 | OLGA OBYMAKO | OBYMAKO, OLGA | 6.00 | | 93.00 | I | |
| 202040 202041 | 7/06/12 7/06/12 | 009752 009752 | PETER CAPORASO PETER CAPORASO | CAPORASO, VINCE CAPORASO, VINCE | 12.00 12.00 | | 204.00 204.00 | I I | |
| | | | | CUSTOMER | 24.00 | 0.00 | 408.00 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE R SUNNYSIDE CITYWIDE R S A I | REG NY NY LES REGISTE | R | | PAGE 2 PAR PRIVATE BILL WEEK ENI | - 32 | 7/13/12 |
|----------------------------|-------------------------------|----------------------------|---|--|-----------------------|---------|--|-------------|--------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | | SURPLUS |
| 202042 | 7/06/12 | 009854 | HELEN TAYLOR | HERNANDEZ, FRAN | 4.00 | | 62.00 | I | |
| 202043 | 7/06/12 | 010269 | ANGELINA MARASA | MARASA, ANGELIN | 9.00 | | 139.50 | I | |
| 202044 | 7/06/12 | 010305 | AZHEIMER'S ASSOCIATION | URRAYA, PIEDAD | 26.00 | | 403.00 | I | |
| 202045 | 7/06/12 | 010352 | BETTIE GIACOMO | GIACOMO, BETTIE | 4.00 | | 62.00 | I | |
| 202046 | 7/06/12 | 010375 | DOMINICA IRAOLA | IRAOLA, LILIAN | 9.00 | | 146.25 | I | |
| 202047 | 7/06/12 | 010377 | DOMINICA IRAOLA | IRAOLA, ANTONIO | 9.00 | | 146.25 | I | |
| 202048 | 7/06/12 | 010529 | STEPHEN WEISS | WEISS, STELLA | 4.00 | | 68.00 | I | |
| 202049 202050 202051 | 6/22/12 7/06/12 7/06/12 | 010530 010530 010530 | DANA SITILDES DANA SITILDES DANA SITILDES | ANSELMI, PETER ANSELMI, PETER ANSELMI, PETER | 4.00 3.75 23.00 | | 62.00 63.75 362.50 | I I I | |
| | | | | CUSTOMER | 30.75 | 0.00 | 488.25 | | |
| 202052 | 7/06/12 | 010677 | ALZHEIMER'S ASSOCIATION | MONTELIONE, CAL | 8.00 | | 124.00 | I | |
| 202053 | 7/06/12 | 010735 | MIGUEL ONATE | ONATE, MIGUEL | 3.00 | | 46.50 | I | |
| 202054 | 7/06/12 | 010753 | GARY KUCHMEISTER | KUCHMEISTER, JO | 47.75 | | 752.13 | I | |
| 202055 | 7/06/12 | 010773 | ALZHEIMER'S ASSOCIATION | MCQUAIL, MAUREE | 16.00 | | 248.00 | I | |
| 202056 202057 | 7/06/12 7/06/12 | 010828 010828 | DEIRDRE DANIELS DEIRDRE DANIELS | DANIELS, DEIRDR DANIELS, DEIRDR | 4.00 4.00 | | 68.00 68.00 | I I | |
| | | | | CUSTOMER | 8.00 | 0.00 | 136.00 | | |
| 202058 | 7/06/12 | 010844 | ALZHEIMER'S ASSOCIATION | GARCIA, JESUS | 12.00 | | 186.00 | I | |
| 202059 | 7/06/12 | 010862 | GREENBAUN MASAKO | GREENBAUN, MASA | | | 46.50 | I | |
| | | | | CATEGORY | 554.25 | 0.00 | 10,029.33 | | |
| | | | | LOCATION | 22,383.69 | 0.00 | 345,053.56 | | |
| | | | | COMPANY | 22,383.69 | | 345,053.56 | | _ |

RUN DATE 07/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 322
SALES JRNL # 0289 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 7/13/12

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

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