RUN DATE 06/27/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 6/29/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS ALVAREZ, ANGELA 199528 6/01/12 000082 SENIOR HEALTH PARTNERS
VASQUEZ, CORNEL
SENIOR HEALTH PARTNERS
VAS SENIOR HEALTH PARTNERS 4.00 57.00 I 199529 6/22/12 000082 SENIOR HEALTH PARTNERS ALVAREZ, ANGELA 4.00 57.00 I 114.00 I 199530 6/15/12 000082 199531 6/22/12 000082 570.00 199532 6/15/12 000082 370.50 199533 6/22/12 000082 441.75 199534 6/22/12 000082 456.00 199535 6/15/12 000082 14.25 199536 6/22/12 000082 456.00 199537 6/22/12 000082 1,400.00 199538 6/15/12 000082 570.00 199539 6/22/12 000082 470.25 199540 6/22/12 000082 1,923.75 199541 6/22/12 000082 427.50 199542 6/22/12 000082 85.50 199543 6/22/12 1,083.00 000082 199544 6/22/12 285.00 000082 199545 6/22/12 000082 356.25 199546 6/22/12 000082 114.00 199547 6/22/12 000082 570.00 199548 6/22/12 000082 114.00 199549 6/22/12 000082 342.00 199550 6/22/12 000082 171.00 199551 6/22/12 57.00 I 000082 \_\_\_\_\_ \_\_\_\_\_ CUSTOMER 646.00 0.00 10,505.75

CATEGORY 646.00 0.00 10,505.75

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	2
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199552	6/22/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	40.00		583.20	I	
199553	6/22/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
				CUSTOMER	52.00	0.00	758.16		
				COSTONER	32.00	0.00	730.10		
				CATEGORY	52.00	0.00	758.16		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	3
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			ADU ADULT BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199554	6/22/12	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	4
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTE	R		BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199555	6/22/12	000008	VISITING NURSE SERVIO	E ADAMES, OLGA	25.00		364.50	I	
199556	6/22/12	800000	VISITING NURSE SERVIO	E ADAMES, RICARDO	35.00		510.30	I	
199557	6/22/12	800000	VISITING NURSE SERVIO	E ADAMS, MYRIAM	70.00		1,020.60	I	
199558	6/15/12	800000	VISITING NURSE SERVIO	E ADUN, JEANETTE	8.00		116.64	I	
199559	6/22/12	800000	VISITING NURSE SERVIO	E ADUN, JEANETTE	47.75		696.20	I	
				CUSTOMER	185.75	0.00	2,708.24		
				 CATEGORY	185.75	0.00	2,708.24		

RUN DATE (	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	5	
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME		
				SALES REGISTER			BILL WEEK ENDING	6/29/12	
TATTOTOTI	DARR	CITCE NO	CHCEOMED NAME	DEFENDA	HOHDG	max anm	AMOUNTE ENTE	GIID DI 11G	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
199560	6/22/12	000008	VISITING NURSE SERVICE	Z ACIITI.AR ZORATO	38 00		554 N4 T		
199300	0/22/12	000000	VIBILING NORDE BERVICE	AGOIDAN, ZONAID	30.00		331.01		
				CATEGORY	38.00	0.00	554.04		
199560	6/22/12	000008	VISITING NURSE SERVICE		38.00	0.00	554.04 I 		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE	L –	6
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE 1		
			S	SALES REGISTER			BILL WEEK E	NDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199561	6/22/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	17.00		247.86	I	
				CATEGORY	17.00	0.00	247.86		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	7
SALES JRN	r∟ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199562	6/22/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	10.00		145.80 I	
				CATEGORY	10.00	0.00	 145.80	

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	8
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
				SALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199563	6/01/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	6.00		87.48	I	
199564	6/22/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	30.50		444.69	I	
199565	6/22/12	800000	VISITING NURSE SERVICE	ALMANZAR, REMIG	4.00		58.32	I	
				CUSTOMER	40.50	0.00	590.49		
				CATEGORY	40.50	0.00	590.49		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 9	
SALES JR	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE AD	ULT	
			5	SALES REGISTER			BILL WEEK ENDI	6/29/1	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLU	S
199566	6/22/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	56.00		816.48	I	
				CATEGORY	56.00	0.00	816.48		_

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	.0
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
			5	BALES REGISTER			BILL WEEK ENI	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199567	6/22/12	000008	VISITING NURSE SERVICE	ANANIA, GLYGERI	23.00		335.35	I	
199568	6/22/12	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	16.00		233.28	I	
				CUSTOMER	39.00	0.00	568.63		
				CATEGORY	39.00	0.00	568.63		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	11 G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199569	6/22/12	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	59.75		871.16 I	
				CATEGORY	59.75	0.00	 871.16	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		12
				SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199570 199571	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE	, -	24.00		349.92 794.61	I	
199571	6/22/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	54.50 27.50		400.96	I	
				CUSTOMER	106.00	0.00	1,545.49		
				CATEGORY	106.00	0.00	1,545.49		

RUN DATE 06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 13
SALES JRNL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK END	ING 6/29/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
199573 6/22/12	000008	VISITING NURSE SERVICE	ANGULO, ELCY	20.00		291.60	I
199574 6/22/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	60.50		882.09	I
			CUSTOMER	80.50	0.00	1,173.69	
			CATEGORY	80.50	0.00	1,173.69	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 1	4
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	-	NY			VCP CHOICE L		
			:	SALES R	EGISTE	R		BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199575	6/15/12	800000	VISITING NURSE SERVICE	AOUN,	ODETTE	12.00		174.96	I	
199576	6/22/12	800000	VISITING NURSE SERVICE	AOUN,	ODETTE	30.00		437.40	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	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 15 ADU ADULT	
SALES ORN	H 0207	100 001		ALES REGISTER			BILL WEEK ENDING 6/29	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
199577	6/22/12	800000	VISITING NURSE SERVICE	APPELL, LAWRENC	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	
				CAILGORI	20.00	0.00	291.00	

ı	RUN DATE (	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	16	
ı	SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	Δ	
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	199578	6/22/12	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	45.75		667.04 I		
ı										
ı										
ı					CATEGORY	45.75	0.00	667.04		
	199578	6/22/12	000008	VISITING NURSE SERVICE	<del></del> -		0.00			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	17
SALES OIL	11 # 0207	HOC 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199579 199580	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	23.00 12.00		335.34 I 174.96 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	.8
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199581	6/22/12	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	49.00		714.42	I	
199582	6/22/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	15.00		218.70	I	
				CUSTOMER	64.00	0.00	933.12		
				COSTOMER	01.00	0.00	755.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	19
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199583	6/22/12	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN			VYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	20
SALES UKN	L # 0267	TOC 001		ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199584	6/22/12	800000	VISITING NURSE SERVICE	BAEZ, JUAN	33.00		481.14 I	
				CATEGORY	33.00	0.00	481.14	

RUN DATE 06/27/12 - SALES JRNL # 0287	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199585 6/22/12 199586 6/22/12 199587 6/22/12 199588 6/22/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BALLAS, VIOLA BAQUERIZO, ANNA BARDEANU, VICTO BATTLE, JEANETT	30.00 56.00 44.75 49.00		437.40 816.48 652.46 714.42	I I I
			CUSTOMER	179.75	0.00	2,620.76	
			CATEGORY	 179.75	0.00	2,620.76	

			YSIDE CITYWIDE				PAGE 1 - 22	2
SALES JRN	L # 0287	LOC 001		REG NY NY			HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199589	6/22/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		23
SALES UKN	L # 0207	HOC 001		SALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199590 199591	6/22/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		142.00 3.00		2,070.36 43.74	I	
				CUSTOMER	145.00	0.00	2,114.10		
				CATEGORY	145.00	0.00	2,114.10		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	24
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HON	MEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
199592	6/22/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	10.00		145.80	I
199593	6/22/12	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	30.00		437.40	I
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE 06/27 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	25
SALES UNIL # 0	207 LOC 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199594 6/22 199595 6/22		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	9.00 20.00		131.22 I 291.60 I	
			CUSTOMER	29.00	0.00	422.82	
			CATEGORY	29.00	0.00	422.82	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	26
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	•
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199596	6/22/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	27
SALES JR	NL # 0287	LOC 001		REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	P SURPLUS
199597	6/22/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	18.25		266.09	Ι
				CATEGORY	18.25	0.00	266.09	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	28
Bridde Grav	1 0207	100 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199598	6/08/12	000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	4.00		58.32 I	
199599 199600	6/22/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BOCANEGRA, GLAD BONILLA, ESPERA	16.00 49.00		233.28 I 714.42 I	
				CUSTOMER	69.00	0.00	1,006.02	
				CATEGORY	69.00	0.00	1,006.02	

			YSIDE CITYWIDE					29
SALES JRI	1L # 0287	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199601	6/22/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	06/27/12 - NL # 0287	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199602	6/22/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
				CATEGORY	25.00	0.00	 364.50	

RUN DATE SALES JRN		LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	31 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199603	6/22/12	800000	VISITING NURSE SERVICE	BOOKAS, ODYSEAS	20.00		291.60 I	
				CATEGORY	20.00	0.00		

			YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	և # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL	
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199604	6/22/12	800000	VISITING NURSE SERVICE	BORSARI, ANTOIN	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199605	6/22/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	· ·
ı					SALES REGISTER			BILL WEEK ENDING	6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	199606	6/22/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30 I	
ı					CATEGORY	35.00	0.00	510.30	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35	
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A	
ı					SALES REGISTER			BILL WEEK ENDING	G 6/29/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
	199607	6/22/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	54.00		787.32 I		
					CATEGORY	54.00	0.00	787.32		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	36
SALES JRN	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199608	6/22/12	800000	VISITING NURSE SERVICE	BROWN, BETTY	2.50		36.45 I	
				CATEGORY	2.50	0.00		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3 VCP CHOICE LHCSA	37
SALES UKN	ш # 0207	TOC 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199609 199610	6/22/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BURGOS, RAFAELA BURNS, MARGARET	6.00 56.00		87.48 I 816.48 I	
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

ı	RUN DATE (	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	38
ı	SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	IE W/O WALLS LT
ı				Ş	SALES REGISTER			BILL WEEK ENDIN	IG 6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	199611	6/22/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		816.48	
					CATEGORY	56.00	0.00	816.48	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	39	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
INVOICE#	DAIL	COSI NO	COSTOMER NAME	KEPEKENCE	1100115	IAA ANI	AMOUNI III	SUKFIUS	
199612	6/22/12	800000	VISITING NURSE SERVICE	CABA, PURA	9.75		142.16 I		
				CATEGORY	9.75	0.00	142.16		

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY			PAGE 1 - ADU ADULT	10
				SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT		YP SURPLUS
199613	6/22/12	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	69.75		1,016.96	I
				CATEGORY	69.75	0.00	1,016.96	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	ALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199614	6/22/12	800000	VISITING NURSE SERVICE	CALDERON, FRANC	43.00		626.95 I	
				CATEGORY	43.00	0.00	626.95	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	42
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	Γ
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199615	6/22/12	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54 I	
				CATEGORY	63.00	0.00	918.54	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	43
SALES JRN	rL # 0287	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199616	6/22/12	800000	VISITING NURSE SERVICE	CAMARGO, BELISA	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			2	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199617	6/22/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		816.48	I
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	45
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199618	6/22/12	000008	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	46
INVOICE#	DATE	CUST NO	CUSTOMER NAME	ALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	6/29/12 SURPLUS
199619	6/22/12	000008	VISITING NURSE SERVICE	CANTO, THERESA	8.00	IAA AMI	116.64 I	SURPLUS
199019	0/22/12	000008	VISITING NURSE SERVICE	CANIO, IRERESA	8.00		110.04 1	
				CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE				PAGE 1 - 47	
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	- 100 110
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199620	6/22/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	83.50		1,217.43 I	
				CATEGORY	83.50	0.00	1,217.43	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	48	
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT	
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	199621	6/22/12	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I		
					CATEGORY	35.00	0.00	510.30		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		49
511225 0144	.2 ,, 020,	200 001		SALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199622	6/22/12	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	54.50		794.61	I	
199623	6/22/12	000008	VISITING NURSE SERVICE	CARDOZA, ANAIDA	25.00		364.50	I	
199624	6/22/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	25.00		364.50		
				CUSTOMER	104.50	0.00	1,523.61		
				CATEGORY	104.50	0.00	1,523.61		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE AD	5 0
				SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199625	4/06/12	800000	VISITING NURSE SERVICE		12.00		174.96	I
199626	6/22/12	000008	VISITING NURSE SERVICE	CARRALERO, ROSA	42.00		612.36	1
				CUSTOMER	54.00	0.00	787.32	
				CATEGORY	54.00	0.00	787.32	

RUN DATE 06/27/12 - SUP SUNNYSIDE CITYWIDE			PAGE 1 - 51
SALES JRNL # 0287 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT
	SALES REGISTER		BILL WEEK ENDING 6/29/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
199627 6/22/12 000008 VISITING NURSE SERVI	CE CARRENO, CRISTI	20.00	291.60 I
	CATEGORY	20.00 0.00	291.60

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	52
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEV	•
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199628	6/22/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	53
SALES JRI	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199629	6/22/12	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE SALES JRN		LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	54 G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
199630	6/22/12	800000	VISITING NURSE SERVICE	CELIO, MARION	6.00		87.48 I	
				CATEGORY	6.00	0.00		

RUN DATE SALES JRN		SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	55 A
Bridde Gra	VE    0207	100 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199631	6/22/12	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	56
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199632	6/22/12	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	17.00		247.86 I	
				CATEGORY	17.00	0.00	 247.86	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	57
DALLS OWN.	L # 0207	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199633	6/22/12	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE (	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	58
SALES JRNI	և # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199634	6/22/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	15.00		218.70 I	
				CATEGORY	15.00	0.00		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199635	6/22/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

						PAGE 1 -	* *
NL # 0287	LOC 001		REG NY NY				DMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDI	ING 6/29/12
DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP SURPLUS
6/22/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	34.00		495.72	I
			CAMEGODY			495.72	
	ENL # 0287	ENL # 0287 LOC 001 DATE CUST NO	DATE CUST NO CUSTOMER NAME	ENL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE 6/22/12 000008 VISITING NURSE SERVICE CHIANETTA, JOSE	ENL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  DATE CUST NO CUSTOMER NAME REFERENCE HOURS 6/22/12 000008 VISITING NURSE SERVICE CHIANETTA, JOSE 34.00	NL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT	ENL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R BILL WEEK ENDS  DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TO  6/22/12 000008 VISITING NURSE SERVICE CHIANETTA, JOSE 34.00 495.72

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	61
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199637	6/22/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	62
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199638	6/22/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1	* *	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	BALES REGISTER			BILL WEEK END	ING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
199639	6/15/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	8.00		116.64	I	
199640	6/22/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	31.50		459.27	I	
199641	6/22/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
199642	6/22/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	24.50		357.22	I	
				CUSTOMER	104.00	0.00	1,516.33		
				CATEGORY	104.00	0.00	1,516.33		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64
SALES JRN	IL # 0287	LOC 001		REG NY NY			LTC NURSING HOMEW	•
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199643	6/22/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

1		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	65
				SALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
19964	4 6/22/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

	06/27/12 - L # 0287			REG NY NY A L E S R E G I S T E R			PAGE 1 LTC NURSING BILL WEEK EN	HOMEW/	56 /O WALLS (LT 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199645 199646 199647 199648	6/22/12 6/22/12 6/22/12 6/22/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	COLLER, FELISA COLLER, JOSE COLON, ANTONIA COLON, ISABEL	20.00 15.00 42.00 18.00		291.60 218.70 612.36 262.44	I I I	
				CUSTOMER	95.00	0.00	1,385.10		
				CATEGORY	 95.00	0.00	1,385.10		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	7
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199649	6/22/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				CATEGORY	168.00	0.00	2,449.44	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	68
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199650	6/22/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	69 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199651	6/22/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	70	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	BALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI IIP	SURPLUS	
199652	6/22/12	800000	VISITING NURSE SERVICE	COVALIU, SIMION	35.25		513.96 I		
				CATEGORY	35.25	0.00	513.96		

			YSIDE CITYWIDE					11102	- 7	1	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	_	NY EGISTER			HOA HOSPICE A	-	6/29/12	
								DIDD WEEK END	,1110		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEI	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
199653	6/22/12	800000	VISITING NURSE SERVICE	COX, 1	PETRA	19.00		277.02	I		
					CATEGORY	19.00	0.00	277.02			

	06/27/12 · NL # 0287		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	72
			S	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199654	6/22/12	800000	VISITING NURSE SERVICE	CROUSE, MARIA	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73	
ı	SALES JRN	և # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME		
ı				i	SALES REGISTER			BILL WEEK ENDING	6/29/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	199655	6/22/12	800000	VISITING NURSE SERVICE	CRUZ, HECTOR	38.75		564.98 I		
					CATEGORY	38.75	0.00			

RUN DATE SALES JRN		LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199656	6/22/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	5
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING E	HOMEW/	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENI	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199657	6/22/12	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	15.00		218.70	I	
199658	6/22/12	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	56.00		816.48	I	
				CUSTOMER	71.00	0.00	1,035.18		
				CATEGORY	71.00	0.00	1,035.18		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	76
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199659	6/22/12	000008	VISITING NURSE SERVICE	DAVIS, LOUELLEN	41.75		608.72	I	
199660	6/22/12	000008	VISITING NURSE SERVICE	DEBAZALAR, ANTO	12.00		174.96	I	
199661	6/15/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	5.00		72.90	I	
199662	6/22/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	20.00		291.60	I	
				CUSTOMER	78.75	0.00	1,148.18		
				CATEGORY	78.75	0.00	1,148.18		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199663 199664 199665	6/15/12 6/22/12 6/22/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DEL CARPIO, FEL DEL CARPIO, FEL DELACRUZ, SEFER	8.00 33.00 38.00		116.64 481.14 554.04	I I I	
				CUSTOMER	79.00	0.00	1,151.82		
				CATEGORY	79.00	0.00	1,151.82		

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		78
SALES UKN	1 # 0207	TOC 001		ALES REGISTER	2		BILL WEEK ENI		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199666	6/22/12	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	30.00		437.40	I	
199667	6/01/12	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	4.00		58.32	I	
199668	6/22/12	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	28.00		408.24	I	
199669	6/22/12	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	26.00		379.08	I	
199670	6/22/12	800000	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I	
199671	6/22/12	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	44.50		648.82	I	
				CUSTOMER	135.50	0.00	1,975.60		
				CATEGORY	135.50	0.00	1,975.60		

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - '	79
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	100670	C 100 110				40.00		500 00 -	
ı	199672	6/22/12	000008	VISITING NURSE SERVICE	DIAZ, HILDA	40.00		583.20 I	
ı									
ı					CAMPRODY	40.00	0.00		
ı					CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	00
DALLES OIGN	H 0207	100 001		ALES REGISTE	3		BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
199673	6/22/12	000008	VISITING NURSE SERVICE	DIAZ, MARIA	34.50		503.01	I
199674	6/22/12	800000	VISITING NURSE SERVICE	DIAZ, OLGA	46.25		674.33	I
199675	6/22/12	800000	VISITING NURSE SERVICE	DIAZ, ROSA	42.00		612.36	I
199676	6/22/12	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	52.00		758.16	I
199677	6/22/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	36.00		524.88	I
199678	6/22/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	16.00		233.28	I
				CUSTOMER	226.75	0.00	3,306.02	
				CATEGORY	226.75	0.00	3,306.02	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	81
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			i	SALES REGISTER	1		BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199679	6/22/12	000008	VISITING NURSE SERVICE	DOMINICK, GINA	41.50		605.07	I
199680	6/01/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	7.00		102.06	I
199681	6/15/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	7.00		102.06	I
199682	6/22/12	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	33.00		481.14	I
				CUSTOMER	88.50	0.00	1,290.33	
				CATEGORY	88.50	0.00	1,290.33	

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	82
SALES JRI	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199683	6/22/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

			YSIDE CITYWIDE				PAGE 1 -	83
SALES J	RNL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100604	6/22/12	000000	VICIBING MIDGE GEDVICE	EGIEGADAN MADI	44.00		641 F2 T	
199684	6/22/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	44.00		641.53 I	
				CATEGORY	44.00	0.00	641.53	

				YSIDE CITYWIDE				PAGE 1 -	84
5	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
				2	SALES REGISTER			BILL WEEK ENDING	G 6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
1	199685	6/22/12	000008	VISITING NURSE SERVICE	EDELMAN, MILDRE	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	85
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199686	6/22/12	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
				CATEGORY	4.00	0.00	 58.32	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	86
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			i	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199687	6/22/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	87
SALES JRN	ъ # 0287	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199688	6/22/12	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 -	88
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199689	6/22/12	800000	VISITING NURSE SERVICE	ESPIN, CESAR	54.00		787.32 I	
				CATEGORY	54.00	0.00	787.32	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	89
SALES OIGN	L # 0207	10C 001		ALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199690 199691	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ESPINAL, JOSE EVERETT, SHIRLE	9.00 21.00		131.22 3 306.18 3	• • •
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

PAGE 1 – 90
ADU ADULT
BILL WEEK ENDING 6/29/12
T AMOUNT TYP SURPLUS
1,049.76 I
1,049.76

			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
199693	6/22/12	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	15.00		218.70	I
				CATEGORY	15.00	0.00	218.70	

RUN DATE (		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADULT	92
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199694	6/22/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	93
511110 0141	2 11 0207	200 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199695	6/22/12	800000	VISITING NURSE SERVICE	FAY, JULIA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	94
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			:	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
100606	6 (00 (10	00000			40.00		502.00 -	
199696	6/22/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	303.20	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	95
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199697	6/22/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	L # 0287	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199698	6/22/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 9'	7
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199699	6/22/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	98
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199700	6/22/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	53.50		780.03 I	
				CATEGORY	53.50	0.00	780.03	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	99
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199701	6/22/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		00 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199702	6/22/12	000008	VISITING NURSE SERVICE		35.00		510.30	I	
199703 199704	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 35.00		174.96 510.30	I	
	-,,								
				CUSTOMER	82.00	0.00	1,195.56		
							1 105 56		
				CATEGORY	82.00	0.00	1,195.56		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.01
SALES JRN	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199705	6/22/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	55.25		805.55 I	
				CATEGORY	55.25	0.00	805.55	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	02
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199706	6/22/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	47.00		685.26 I	
				CATEGORY	47.00	0.00	 685.26	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	)3
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199707	6/22/12	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	32.00		466.56	I	
199708	6/22/12	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	26.00		379.08	I	
				CUSTOMER	58.00	0.00	845.64		
				CATEGORY	 58.00	0.00	 845.64		
1				CALEGORY	00.00	0.00	845.04		

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY			VCP CHOICE L		
			_	SALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199709 199710	6/22/12 6/22/12	800000	VISITING NURSE SERVICE	GAID, ASILA	35.00		510.30 451.98	I	
199711	6/22/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALARZA, JOSE GALLARDO, ZOILA	31.00 42.00		612.36	I	
199712	6/22/12	000008	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I	
				CUSTOMER	117.00	0.00	1,705.86		
				CATEGORY	117.00	0.00	1,705.86		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10!	5
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199713	6/22/12	000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	38.50		561.33 I	
199714	6/15/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32 I	
199715	6/22/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	19.75		287.96 I	
				CUSTOMER	62.25	0.00	907.61	
				CATEGORY	62.25	0.00	907.61	

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 106 ADU ADULT BILL WEEK ENDING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199716	6/22/12	800000	VISITING NURSE SERVICE	GARCIA, CONCEPC	42.75		623.30 I	
				CATEGORY	42.75	0.00	623.30	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 107 HOA HOSPICE ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199717	6/22/12	800000	VISITING NURSE SERVICE	GARCIA, JESUS	20.00		291.60 I	
				CATEGORY	20.00	0.00	 291.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	18
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199718	6/22/12	000008	VISITING NURSE SERVICE	GARCIA, OLGA	25.00		364.50	I	
199719	6/22/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	32.00		466.56	I	
				CUSTOMER	57.00	0.00	831.06		
				CODIONER	37.00	0.00	031.00		
				CATEGORY	57.00	0.00	831.06		

			YSIDE CITYWIDE				PAGE 1 - 1	.09
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199720	6/22/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.50		721.71 I	
				CATEGORY	49.50	0.00	721.71	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 AUR ADULT REHAB (	NLY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING  AMOUNT TYP	6/29/12 SURPLUS
199721	6/22/12	000008	VISITING NURSE SERVICE	GILBERT, LILIAN	15.00		218.70 I	
				 CATEGORY	15.00	0.00	218.70	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	111
SALES JRN	ъ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199722	6/22/12	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	112 SA
			\$	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199723	6/22/12	000008	VISITING NURSE SERVICE		44.25		645.17	I -
199724	6/22/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		364.50	
				CUSTOMER	69.25	0.00	1,009.67	
				CATEGORY	69.25	0.00	1,009.67	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	.3
SALES JRN	ъ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	•
			5	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199725	6/22/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I	
199726	6/22/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	33.00		481.14	I	
				CUSTOMER	68.00	0.00	991.44		
				CODIONER	00.00	0.00	JJ1.11		
				CATEGORY	68.00	0.00	991.44		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	114
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	ALES REGISTER			BILL WEEK ENDIN	G 6/29/12
T1770 T G7 II	53.00	GTTGT 370	GUGEOVED MANG		******		3.40TPTE ETT	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199727	6/22/12	000008	VISITING NURSE SERVICE	GONGORA, MARUJA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 115
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENI	OING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
199728	6/22/12	000008	VISITING NURSE SERVICE	GONZALEZ, CARLO	7.00		102.06	I
199729	6/22/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	24.00		349.92	I
				CUSTOMER	31.00	0.00	451.98	
				CATEGORY	31.00	0.00	451.98	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	6	
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH			
			5	SALES REGISTER			BILL WEEK END	ING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
199730	6/22/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	6.00		87.48	I		
				CATEGORY	6.00	0.00	87.48			

RUN DATE ( SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	117
			9	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199731	6/22/12	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	37.75		550.40 I	
				CATEGORY	37.75	0.00	550.40	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 13 LTC NURSING HOMEW, BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199732 199733 199734 199735	6/22/12 6/01/12 6/08/12 6/22/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GONZALEZ, ELSA GOVERDOVSKIY, N GOVERDOVSKIY, N GOVERDOVSKIY, N	30.00 3.00 3.00 21.00		437.40 I 43.74 I 43.74 I 306.18 I	
				CUSTOMER	57.00	0.00	831.06	
				CATEGORY	57.00	0.00	831.06	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
BALLED OIGN	L # 0207	100 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
199736	6/01/12	000008	VISITING NURSE SERVICE	·- ·	4.00		58.32	I
199737 199738	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GOYES, ELBA GRAVER, EDNA	28.00 40.00		408.24 583.20	I I
				CUSTOMER	72.00	0.00	1,049.76	
				CATEGORY	72.00	0.00	1,049.76	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	20
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199739	6/22/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	21
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS	ADULT POPUL
			i	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100540	6 (00 (10	000000		appearing appear	40 85		E10 E0 =	
199740	6/22/12	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	48.75		710.78 I	
				CATEGORY	48.75	0.00	710.78	
				CATEGORI	10.75	0.00	710.70	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	22
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199741	6/22/12	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	72.00		1,049.76 I	
				CATEGORY	72.00	0.00	1,049.76	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 123	<b>,</b>
511225 0141	2 11 020	200 001		SALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
199742 199743	6/22/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUTHRIE, LORETH GUTIERREZ, ANGE	8.75 83.00		127.58 1,210.14	I I	
				CUSTOMER	91.75	0.00	1,337.72		
				CATEGORY	91.75	0.00	1,337.72		

RUN DATE	06/27/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	124
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199744	6/22/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	14.00		204.12 I	
				CATEGORY	14.00	0.00	204.12	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	125
SALES JRN	ъ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
				SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199745	6/22/12	000008	VISITING NURSE SERVICE	HENAO, VICTORIA	24.00		349.92	I
199746	6/22/12	800000	VISITING NURSE SERVICE	HENDY, BERNICE	29.00		422.82	I
				CUSTOMER	53.00	0.00	772.74	
				CATEGORY	53.00	0.00	772.74	

RUN DATE SALES JRN		SUP SUNN	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	126
	_ "			ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199747	6/22/12	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			TYSIDE CITYWIDE	556 357			PAGE 1 - 1	127
SALES JRN	IL # U28/	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199748	6/22/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199749 199750 199751	6/22/12 6/22/12 6/22/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HERRERA, ANGELA HERRERA, HORACI HUNGRIA, SABINA	12.00 12.00 40.00		174.96 I 174.96 I 583.20 I	
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	9
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199752	6/22/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	130
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199753	6/22/12	000008	VISITING NURSE SERVICE	ICIANO, ALFREDO	5.00		72.90 I	
				CATEGORY	5.00	0.00	72.90	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			11102	- 131 AIDS ADULT POPUL
SALES URN	ш # 0207	TOC 001		SALES REGISTER			BILL WEEK EN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
199754 199755	6/01/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	7.00 45.00		102.06 656.10	I T
100100	0/22/12	000000	VISITING NORSE SERVICE	·				
				CUSTOMER	52.00	0.00	758.16	
				CATEGORY	52.00	0.00	758.16	

			YSIDE CITYWIDE				PAGE 1 -	132
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	6 (00 (10
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199756	6/22/12	800000	VISITING NURSE SERVICE	INSERRA, CATHER	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L33	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
199757	6/22/12	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I		
				CATEGORY	30.00	0.00	437.40		

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.34
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199758	6/15/12	000008	VISITING NURSE SERVICE	JACSO, ERZSEBET	13.00		189.54 I	
199759	6/22/12	000008	VISITING NURSE SERVICE	•	15.00		218.70 I	
						0.00	400 24	
				CUSTOMER	28.00	0.00	408.24	
				CATEGORY	28.00	0.00	408.24	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	35
ı	SALES JRN	L # 0287	LOC 001		REG NY NY			LTC NURSING HOMEW	•
ı				i	SALES REGISTER			BILL WEEK ENDING	6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	199760	6/22/12	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	46.75		681.62 I	
					CATEGORY	46.75	0.00	681.62	

RUN DATE 06/27/	/12 - SUP SUN	YSIDE CITYWIDE				PAGE 1	13	36
SALES JRNL # 02	287 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE I	HCSA	
		S	ALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE# DATE	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199761 6/22/	/12 000008	VISITING NURSE SERVICE	JARA DEURUCHIM,	10.00		145.80	I	
199762 6/22/	/12 000008	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I	
199763 6/22/	/12 000008	VISITING NURSE SERVICE	JEWAT, LUCILLE	74.50		1,086.21	I	
199764 6/22/	/12 000008	VISITING NURSE SERVICE	JHAVERI, RAMESH	25.25		368.15	I	
			CUSTOMER	121.75	0.00	1,775.12		
			CATEGORY	121.75	0.00	1,775.12		

		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				
		S	SALES REGISTER			BILL WEEK ENDING	6/29/12
DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
6/22/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
						1,020.60	
	L # 0287	L # 0287 LOC 001  DATE CUST NO	DATE CUST NO CUSTOMER NAME	L # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  DATE CUST NO CUSTOMER NAME REFERENCE  6/22/12 000008 VISITING NURSE SERVICE JIANNARAS, ANNA	L # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  DATE CUST NO CUSTOMER NAME REFERENCE HOURS 6/22/12 000008 VISITING NURSE SERVICE JIANNARAS, ANNA 70.00	L # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT	L # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R  DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP  6/22/12 000008 VISITING NURSE SERVICE JIANNARAS, ANNA 70.00 1,020.60 I

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	138	
	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEV		
				·	SALES REGISTER			BILL WEEK ENDING	6/29/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	199766	6/22/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	15.50		225.99 I		
					CATEGORY	15.50	0.00	225.99		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 139	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 6,	/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
199767	6/22/12	800000	VISITING NURSE SERVICE	JIMENEZ, BETTY	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	40
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199768	6/22/12	000008	VISITING NURSE SERVICE	JOHNSON, DOROTH	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 LTC NURSING 1 BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199769 199770	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	20.00		291.60 437.40	I I	
				CUSTOMER	50.00	0.00	729.00		
				CATEGORY	50.00	0.00	729.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 14	.2
	,, , , , , , , , , , , , , , , , , ,			SALES REGISTER			BILL WEEK END		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199771	6/22/12	000008	VISITING NURSE SERVICE	KAUR, SARD	12.00		174.96	I	
199772	6/22/12	800000	VISITING NURSE SERVICE	KAUR, SHARAN	46.50		677.98	I	
199773	6/22/12	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	18.50		269.73	I	
				CUSTOMER	77.00	0.00	1,122.67		
				CATEGORY	77.00	0.00	1,122.67		

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 143 ADU ADULT BILL WEEK ENDING 6/29	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	
199774	6/22/12	800000	VISITING NURSE SERVICE	KEINATH, WALTER	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
SALES UKN	ц # UZO7	100 001		SALES REGIST	E R		BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199775	6/22/12	800000	VISITING NURSE SERVICE	KHAN, MARGARET	16.00		233.28 I	
				G1 TT GCD V				
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE					- 14	15
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		C 100 110
				SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199776	6/22/12	000008	VISITING NURSE SERVICE	KILIMLIAN, PEPR	48.00		699.84	I	
199777	6/22/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		583.20	I	
				CUSTOMER	88.00	0.00	1,283.04		
				COSTONER	88.00	0.00	1,203.04		
				CATEGORY	88.00	0.00	1,283.04		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 146 ADU ADULT BILL WEEK ENDING 6/29/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
199778	6/22/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

١	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	7
١	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı					SALES REGISTER			BILL WEEK ENDING	6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	199779	6/22/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	56.00		816.48 I	
					CATEGORY	56.00	0.00	 816.48	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	48
	.2    0207	200 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199780	6/22/12	800000	VISITING NURSE SERVICE	LASAK, MICHAEL	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	DMEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	TYP SURPLUS
199781 199782	6/22/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.00 15.75		291.60 229.64	I I
				CUSTOMER	35.75	0.00	521.24	
				CATEGORY	 35.75	0.00	 521.24	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 150
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK END	ING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
								_
199783	6/22/12	800000	VISITING NURSE SERVICE	LEON, EDELMIRA	6.00		87.48	I
							05.40	
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
			Ş	SALES REGISTER			BILL WEEK ENDI	ING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199784	6/22/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48	I
199785	6/22/12	800000	VISITING NURSE SERVICE	-,	66.00		962.28	I
199786	6/22/12	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	23.00		335.34	I
				CUSTOMER	145.00	0.00	2,114.10	
				CATEGORY	145.00	0.00	2,114.10	

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	52
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	199787	6/22/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	23.50		342.63 I	
ı									
ı									
ı					CATEGORY	23.50	0.00	342.63	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	3
SALES JRN	r∟ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		,
			\$	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199788	6/15/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I	
199789	6/22/12	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	48.00		699.84	I	
199790	6/22/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	36.00		524.88	I	
				CUSTOMER	92.00	0.00	1,341.36		
				CATEGORY	92.00	0.00	1,341.36		

RUN DATE (	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.54
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199791	6/22/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	69.50		1,013.31 I	
				CATEGORY	69.50	0.00	1,013.31	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1.	55
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199792	6/22/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	56
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199793	6/22/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	29.75		433.76 I	
199794	6/22/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	11.50		167.67 I	
				CUSTOMER	41.25	0.00	601.43	
				CATEGORY	41.25	0.00	601.43	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	157
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199795	6/22/12	000008	VISITING NURSE SERVICE	LOPEZ, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE				-	158
SALES JRN	ı∟ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	C / 20 / 10
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199796	6/22/12	000008	VISITING NURSE SERVICE	LOPEZDELCASTIL,	69.75		1,016.96 I	
199797	6/22/12	800000	VISITING NURSE SERVICE	LOZADA, LAURA	9.00		131.22 I	
				CUSTOMER	78.75	0.00	1,148.18	
				CATEGORY	78.75	0.00	1,148.18	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	9
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA'	TE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199798	6/22/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	19.75		287.96	I	
199799	6/22/12	800000	VISITING NURSE SERVICE	LYMN, ANGIE	24.50		357.21	I	
				CUSTOMER	44.25	0.00	645.17		
				COSTOMER	44.25	0.00	045.17		
				CATEGORY	44.25	0.00	645.17		

			NYSIDE CITYWIDE				PAGE 1 -	160
SALES	JRNL # 0287	LOC 001		REG NY NY			ADU ADULT	
			i	SALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVO	CE# DATE	CIICT NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
TIVVO	CE# DAIE	COSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT III	SURPLUS
19980	00 6/22/12	000008	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		597.78 I	
1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00000	VIBILING HOUSE BENVIOL	iniodizii, dilili	11.00		337.76	
				CATEGORY	41.00	0.00	597.78	
				CATEGORY	41.00	0.00	597.78	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB	-
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199801	6/22/12	800000	VISITING NURSE SERVICE	MADDALENA, CECE	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	
1				CAILGORI	0.00	0.00	07.40	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	2
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199802	6/22/12	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 16 HCSA	53
	2 11 020	200 001		ALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199803 199804	6/22/12	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	84.00		1,224.72	I	
199804	6/22/12	800000	VISITING NURSE SERVICE	MANGAN, JOHN	19.00		277.02	Τ	
				CUSTOMER	103.00	0.00	1,501.74		
				CATEGORY	103.00	0.00	1,501.74		

RUN DATE			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 164 ADU ADULT	
SALES UKN.	ш # 0207	TOC 001		SALES REGISTER			BILL WEEK ENDING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199805	6/22/12	800000	VISITING NURSE SERVICE	MANNINO, CALOGE	17.00		247.86 I	
				GAMPIGODY	17.00			
				CATEGORY	17.00	0.00	247.86	

	DATE 06/27/12 S JRNL # 0287		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVC	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
1998	06 6/22/12	800000	VISITING NURSE SERVICE	MANNINO, FRANCE	7.00		1,224.72 I	
				CATEGORY	7.00	0.00	1,224.72	

RUN DATE ( SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199807 199808	6/15/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		4.00 36.00		58.32 524.88	I I	
				CUSTOMER	40.00	0.00	583.20		
				CATEGORY	40.00	0.00	583.20		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	57
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
			\$	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199809	6/22/12	000008	VISITING NURSE SERVICE	MARGOLIS, GERTR	15.00		218.70	I	
199810	6/22/12	800000	VISITING NURSE SERVICE	MARINO, ANN	30.00		437.40	I	
				CUSTOMER	45.00	0.00	656.10		
				COSTOMER	45.00	0.00	050.10		
				CATEGORY	45.00	0.00	656.10		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTA	
			2	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199811	6/22/12	800000	VISITING NURSE SERVICE	MARKHAM, RUDOLP	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	169
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			i	SALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199812	6/22/12	000008	VISITING NURSE SERVICE	MARKS, ANN	48.00		699.85 I	
199813	6/22/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	10.00		145.80 I	
				CUSTOMER	58.00	0.00	845.65	
				CATEGORY	58.00	0.00	845.65	

RUN DATE SALES JRN		LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEV BILL WEEK ENDING	V/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199814	6/22/12	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	- 171	
BALLS OIL	11 H 0207	HOC 001		ALES REGISTER			BILL WEEK END		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS	
199815 199816	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTE, JOSE MARTIN, ELAUCAD	4.00		58.32 131.22	I I	
				CUSTOMER	13.00	0.00	189.54		
				CATEGORY	13.00	0.00	189.54		

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	172
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199817	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ OSORI,	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	73
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			·	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199818	6/15/12	000008	VISITING NURSE SERVICE	MARTINEZ, CAMIL	3.00		43.74	I	
199819	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	12.00		174.96	I	
				CUSTOMER	15.00	0.00	218.70		
				CATEGORY	15.00	0.00	218.70		

			YSIDE CITYWIDE				PAGE 1 -	- : -
SALES JRN	L # 0287	LOC 001		REG NY NY			CCL CONGREGATE C	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199820	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	60.00		874.80 I	
				CATEGORY	60.00	0.00	874.80	

		06/27/12 - L # 0287	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199	821	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, FEDOR	25.50		371.80 I	
					CATEGORY	25.50	0.00	371.80	

RUN DATE (	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	176
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199822	6/15/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	6.00		87.48 I	
199823	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	24.00		349.92 I	
199824	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	24.00		349.92 I	
199825	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	84.00		1,224.72 I	
				CUSTOMER	138.00	0.00	2,012.04	
				CATEGORY	138.00	0.00	2,012.04	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1'	77	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
199826	6/22/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04 I		
				CATEGORY	38.00	0.00	554.04		
				CATHOORT	30.00	0.00	331.01		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	178
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199827 199828	6/15/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	8.00 39.00		116.64 I 568.62 I	
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00	685.26	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	9
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199829	6/22/12	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54	I	
199830	6/22/12	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44	I	
				CUSTOMER	231.00	0.00	3,367.98		
				CATEGORY	231.00	0.00	3,367.98		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199831	6/22/12	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	47.00		685.26 I	
				CATEGORY	47.00	0.00	685.26	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 18 ADU ADULT	
TM TO T CE H	DAME	GUGE NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TT 7 7 MT	BILL WEEK ENDING	6/29/12
INVOICE#	DATE 6/22/12	O00008	VISITING NURSE SERVICE		15.00	TAX AMT	AMOUNT TYP	SURPLUS
199032	0/22/12	000000	VISITING NORSE SERVICE	MCKAI, DOKOIIII			210.70 1	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	182
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199833	6/22/12	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	21.50		313.47 I	
199834	6/22/12	800000	VISITING NURSE SERVICE	MEJIA, MARINA	12.00		174.96 I	
				CUSTOMER	33.50	0.00	488.43	
				CATEGORY	33.50	0.00	488.43	

RUN	I DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	183
SAL	LES JRN	L # 0287	LOC 001		REG NY NY			LTC NURSING HOM	
				:	SALES REGISTER			BILL WEEK ENDIN	NG 6/29/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TY TRUOMA	P SURPLUS
199	835	6/22/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	30.25		441.05	[
					CATEGORY	30.25	0.00	441.05	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 18 ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199836	6/22/12	800000	VISITING NURSE SERVICE	MENDEZ, ADA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 185 LAD NURSING HOME W/ BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	1.00		14.58 I 116.64 I	
199030	0/22/12	000000	VISITING NORSE SERVICE	,				
				CUSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	86
SALES JRN	L # 0287	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199839	6/22/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	77.00		1,122.67 I	
				CATEGORY	77.00	0.00	1,122.67	

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 - 187 LTC NURSING HOMEW/O WALLS (L'BILL WEEK ENDING 6/29/12	Т
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199840	6/22/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	39.00		568.62 I	
				CATEGORY	39.00	0.00	568.62	

			YSIDE CITYWIDE				PAGE 1 - 188	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING 6	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
199841	6/22/12	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN				REG NY NY			ADU ADULT	189
INVOICE#	DATE	CUST NO		SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING	
199842	6/22/12	000008	VISITING NURSE SERVICE	MILEO, MARY	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	0
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199843	6/15/12	000008	VISITING NURSE SERVICE	MONSERRAT, DORI	2.00		29.16	I	
199844	6/22/12	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	6.00		87.48	I	
199845	6/22/12	000008	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40	I	
199846	6/22/12	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30	I	
				CUSTOMER	73.00	0.00	1,064.34		
				CATEGORY	73.00	0.00	1,064.34		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	191
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199847	6/22/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 192	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 6/29/12	
T1770 T GT	D	G11GE 110	GUGEROVED MANE				MOTHER THE GUDDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199848	6/22/12	000008	VISITING NURSE SERVICE	MOURAS, ANNA	10.00		145.80 I	
199040	0/22/12	000008	VISITING NORSE SERVICE	MOURAS, ANNA	10.00		143.00 1	
				CATEGORY	10.00	0.00	145.80	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	93
SALES JRN	ъ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199849	6/22/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	94
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAI	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199850	6/22/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	195
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199851	6/22/12	000008	VISITING NURSE SERVICE	NELLINI, MARY	42.00		612.36	I
199852	6/22/12	800000	VISITING NURSE SERVICE	NICKELL, JEAN	9.00		131.22	I
199853	6/22/12	800000	VISITING NURSE SERVICE	NICOLELIS, LUCY	10.00		145.80	I
				CUSTOMER	61.00	0.00	889.38	
				CATEGORY	61.00	0.00	889.38	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	96
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGIST	E R		BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199854	6/22/12	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	45.75		667.04 I	
				CATEGORY	45.75	0.00	667.04	

ı	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	197
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	100055	6 / 0 0 / 1 0				- 4 00		T0T 00 -	
ı	199855	6/22/12	000008	VISITING NURSE SERVICE	NIETO RAMOS, JO	54.00		787.32 I	
ı									
ı									
ı					CATEGORY	54.00	0.00	787.32	

RUN DATE 06/27/1	.2 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 19	8
SALES JRNL # 028	FOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199856 6/22/1	.2 000008	VISITING NURSE SERVICE	NIEVES, NANCY	27.00		393.66 I	
199857 6/22/1	.2 000008	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60 I	
			CUSTOMER	47.00	0.00	685.26	
			CAREGODY	47.00	0.00	685.26	
			CATEGORY	47.00	0.00	085.20	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	9
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199858	6/22/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	20.75		302.54	I	
199859	6/22/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		495.72	I	
				CUSTOMER	54.75	0.00	798.26		
				CODICIEN	31.73	0.00	730120		
				CATEGORY	54.75	0.00	798.26		

			YSIDE CITYWIDE				PAGE 1	- 20	00
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		C 100 110
			i	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199860	6/22/12	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	42.00		612.36	I	
199861	6/22/12	800000	VISITING NURSE SERVICE	OCHOA, LUIS	38.75		564.98	I	
				CUSTOMER	80.75	0.00	1,177.34		
				CATEGORY	80.75	0.00	1,177.34		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	201
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199862	6/22/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	29.00		422.82 I	
				CATEGORY	29.00	0.00	422.82	

RUN DATE 06 SALES JRNL	5/27/12 - SUP SUNN # 0287 LOC 001		EG NY NY ES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	6/29/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199864 6	5/22/12 000008 5/22/12 000008 5/22/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORTEGA, CARLOS OSPINA, ANA PANASKAROLIDIS,	16.00 4.00 10.00		233.28 I 58.32 I 145.80 I	
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	203
SALES JR	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDIN	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199866	6/22/12	800000	VISITING NURSE SERVICE	PAOLONI, MARY	15.00		218.70	<u> </u>
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 20	)4
	_			LES REGISTER			BILL WEEK END		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199867	6/22/12	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I	
199868	6/22/12	800000	VISITING NURSE SERVICE	PAPOUTSIS, MARY	9.00		131.22	I	
199869	6/22/12	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
199870	6/22/12	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I	
199871	6/22/12	000008	VISITING NURSE SERVICE	PENA, VICTORIA	42.00		612.36	I	
199872	6/22/12	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	20.00		291.60	I	
199873	6/22/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	48.00		699.84	I	
199874	6/22/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	35.75		521.24	I 	
				CUSTOMER	263.75	0.00	3,845.48		
				CATEGORY	263.75	0.00	3,845.48		

RUN DATE (	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 205
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
199875	6/22/12	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		437.40 I
					20.00		425 40
				CATEGORY	30.00	0.00	437.40

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 206	
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			:	SALES REGISTER			BILL WEEK ENDING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199876	6/22/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	34.75		506.66 I	
				CATEGORY	34.75	0.00	506.66	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC NY NY			PAGE 1 VCP CHOICE LE	- 20	)7
SALES URN	L # UZ87	TOC 001		REGNY NY ALES REGISTER			BILL WEEK ENI		6/29/12
			5		-		DIDD WEEK EN	21110	0/25/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199877	6/22/12	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	53.75		783.68	I	
199878	6/15/12	800000	VISITING NURSE SERVICE	PIZARRO, BARBAR	2.75		40.10	I	
199879	6/22/12	000008	VISITING NURSE SERVICE	PIZARRO, BARBAR	5.25		76.55	I	
199880	6/22/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	29.75		433.76	I	
199881	6/22/12	000008	VISITING NURSE SERVICE	PLACIDO, MERCED	39.75		579.56	I	
199882	6/22/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88	I	
				CUSTOMER	167.25	0.00	2,438.53		
					167.05	0.00	2 420 52		
				CATEGORY	167.25	0.00	2,438.53		

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY A L E S R E G I S T E R				208 MEW/O WALLS (LT NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
199883	6/22/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20	I
				CATEGORY	40.00	0.00	583.20	

RUN DATE ( SALES JRN1			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 20 ADU ADULT	19
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199884	6/22/12	800000	VISITING NURSE SERVICE	PREVOST, IRENE	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 210 CSA
			S	SALES REGISTER			BILL WEEK END	ING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
199885	6/08/12	000008	VISITING NURSE SERVICE	PUISELLO, CIRA	8.00		116.64	I
199886	6/15/12	000008	VISITING NURSE SERVICE	PUISELLO, CIRA	3.00		43.74	I
199887	6/22/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	27.25		397.31	
				CUSTOMER	38.25	0.00	557.69	
				CATEGORY	38.25	0.00	557.69	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	11
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAI	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199888	6/22/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	212
SALES OWN	L # 0207	100 001		ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199889	6/22/12	800000	VISITING NURSE SERVICE	QUINTERO, INES	18.00		262.44 I	
				CATECODY	19 00			
				CATEGORY	18.00	0.00	262.44	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 213 LTC NURSING HOMEW/O WA	TTC /TT
SALES URN	IL # 0267	LOC UUI		ALES REGISTER			BILL WEEK ENDING 6/2	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
199890	6/22/12	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	06/27/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 214	
SALES JE	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PEDIATRIC	
				SALES REGISTER			BILL WEEK ENDING 6/29/12	
INVOICE	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199891	6/22/12	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	39.75		579.56 I	
				CATEGORY	39.75	0.00	 579.56	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER			PAGE 1 - 21 LTC NURSING HOMEW/ BILL WEEK ENDING	O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199892	6/22/12	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

			YSIDE CITYWIDE				-	216
SALES JRN	L # U287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	NG 6/20/12
			۵	ALES REGISTER			BILL WEEK ENDI	NG 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199893	6/22/12	800000	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	- 21	L7
511225 0141	.2    020	200 001		ALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199894	6/22/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96	I	
199895	6/22/12	800000	VISITING NURSE SERVICE	RANDAZZO, ROSAL	19.75		287.96	I	
199896	6/15/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	3.00		43.74	I	
199897	6/22/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	3.00		43.74	I	
199898	6/22/12	800000	VISITING NURSE SERVICE	REINA, JOSE	12.00		174.96	I	
199899	6/22/12	800000	VISITING NURSE SERVICE	RICCA, MARIE	20.00		291.60	I	
199900	6/22/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	16.00		233.28	I	
				CUSTOMER	85.75	0.00	1,250.24		
				CATEGORY	85.75	0.00	1,250.24		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	18
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199901	6/22/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE C			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	219
SALES URNI	J # UZ87	LOC 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199902 199903	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• •	19.75 16.00		287.96 I 233.28 I	
199903	0/22/12	000000	VISITING NORSE SERVICE	KIVERA, ERNESIO	10.00		233.20 1	
				CUSTOMER	35.75	0.00	521.24	
				CATEGORY	35.75	0.00	521.24	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	220
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199904	6/22/12	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	21
SALES UKN	L # 0207	LOC 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199905	6/22/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

١	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	222
١	SALES JRN	ъ # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
١				5	SALES REGISTER			BILL WEEK ENDING	6/29/12
١									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١									
١	199906	6/22/12	800000	VISITING NURSE SERVICE	RIVERA, WANDA	36.25		528.53 I	
١									
١									
ı					CATEGORY	36.25	0.00	528.53	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	23
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199907	6/22/12	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	224
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	·
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199908	6/22/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

			YSIDE CITYWIDE				PAGE	1 - 2	25
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE		
			5	SALES REG	ISTER		BILL WEEK E	NDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEREN	CE HO	OURS TAX	AMT AMOUNT	TYP	SURPLUS
199909	6/22/12	800000	VISITING NURSE SERVICE	RODRIGUE	Z, FERM 19	9.25	280.67	ľ	
				CA	TEGORY 19	9.25 0	.00 280.65		

	E 06/27/12 - RNL # 0287		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	226
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE:	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199910	6/22/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, GRIS	8.50		123.93 I	
				CATEGORY	8.50	0.00	123.93	

			TYSIDE CITYWIDE	DEC NV NV			PAGE 1 - 2	==:
SALES JRN	IL # U287	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199911	6/22/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE (	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	28
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			5	SALES REGISTER	2		BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199912	6/22/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	 1,224.72	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEN BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199913 199914	6/15/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	8.25 25.00		120.29 I 364.50 I	
				CUSTOMER	33.25	0.00	484.79	
				CATEGORY	33.25	0.00	484.79	

ı	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 230	
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				S	SALES REGISTER			BILL WEEK ENDING 6	/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
	199915	6/22/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	48.50		707.13 I	
ı					CATEGORY	48.50	0.00	707.13	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	231
SALES JRN	L # 0287	LOC 001		REG NY NY			LTC NURSING HOME	•
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIL	COSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI IIP	SURPLUS
199916	6/22/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROOU	40.00		583.20 I	
	*,,							
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	232 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199917	6/22/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, YLMA	32.00		466.56 I	
				CATEGORY	32.00	0.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 233 LTC NURSING HOMEW/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
199918	6/22/12	800000	VISITING NURSE SERVICE	ROLON, JUANITA	48.00		699.84 I
				CATEGORY	48.00	0.00	699.84

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 234	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 6/29/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
199919	6/22/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 235	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			:	SALES REGISTER			BILL WEEK ENDING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
199920	6/22/12	800000	VISITING NURSE SERVICE	ROMO, FLOR	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 236	
SALES JRI	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 6	/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
199921	6/22/12	800000	VISITING NURSE SERVICE	ROQUE, GLORIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	237
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199922	6/22/12	800000	VISITING NURSE SERVICE	ROSA, ANA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	238
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199923	6/22/12	800000	VISITING NURSE SERVICE	ROSA, LUZ E	55.75		812.84 I	
				CATEGORY	55.75	0.00	812.84	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 23	39
SALES UKN	ш # 0207	LOC 001		SALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199924	6/22/12	000008	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28	I	
199925	6/22/12	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	30.00		437.40	I	
199926	6/01/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	5.00		72.90	I	
199927	6/22/12	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	15.00		218.70	I	
199928	6/22/12	800000	VISITING NURSE SERVICE	ROSARIOBREU, EM	25.00		364.50	I	
				CUSTOMER	91.00	0.00	1,326.78		
				CATEGORY	91.00	0.00	1,326.78		

			YSIDE CITYWIDE				PAGE 1 - 24	10
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	C / C O / T O
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199929	6/22/12	000008	VISITING NURSE SERVICE	RUBIN, EVGENY	16.00		233.28 I	
199930	6/22/12	800000	VISITING NURSE SERVICE	RUECKHER, PATRI	15.00		218.70 I	
				CUSTOMER	31.00	0.00	451.98	
				CODIONEIC	31.00	0.00	131.70	
				CATEGORY	31.00	0.00	451.98	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	241	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			\$	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
199931	6/22/12	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I		
				CATEGORY	47.00	0.00	685.26		

ı	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	42
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	199932	6/22/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	23.75		346.28 I	
ı									
ı									
ı					CATEGORY	23.75	0.00	346.28	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ·	- 243	
	"			SALES REGISTER			BILL WEEK END	ING 6/	29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SUI	RPLUS
199933	6/22/12	000008	VISITING NURSE SERVICE	RUSSO, MONICA	69.75		1,016.96	I	
				CATEGORY	69.75	0.00	1,016.96		

			NYSIDE CITYWIDE	REG NY NY				244
SALE	S JRNL # U287	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING HO	
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
1999	34 6/22/12	000008	VISITING NURSE SERVICE	SAAVEDRA, STELL	33.75		492.08	I
				CATEGORY	33.75	0.00	492.08	

			YSIDE CITYWIDE	DDG 1911				- 24	15
SALES JRN	L # U287	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE L		6/29/12
							DILL WELL LIN	211.0	0,25,12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199935	6/22/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	5.00		72.90	I	
199936	6/22/12	000008	VISITING NURSE SERVICE	•	72.75		1,060.70	I	
				CUSTOMER	77.75	0.00	1,133.60		
				COBTOMER	77.75	0.00	1,133.00		
				CATEGORY	77.75	0.00	1,133.60		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	246
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199937	6/22/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				PAGE 1	- 24	7
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199938	6/22/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	20.00		291.60	I	
199939	6/22/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		714.42	I	
				CUSTOMER	69.00	0.00	1,006.02		
							,		
				CA THE CODY			1 006 00		
1				CATEGORY	69.00	0.00	1,006.02		

- 1				YSIDE CITYWIDE					48
	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
					SALES REGISTER			BILL WEEK ENDING	6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	199940	6/22/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
					CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2	49
SALES OWN	L # 0207	100 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199941	6/22/12	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				PAGE 1		0
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	ALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199942	6/22/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	56.00		816.48	I	
199943	6/22/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I	
199944	6/22/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	48.00		699.84	I	
199945	6/22/12	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	55.75		812.84	I	
199946	6/22/12	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	35.00		510.30	I	
199947	6/22/12	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	19.25		280.68	I	
				CUSTOMER	250.00	0.00	3,645.02		
				CATEGORY	250.00	0.00	3,645.02		

			YSIDE CITYWIDE				PAGE 1 - 25	1
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199948	6/22/12	000008	VISITING NURSE SERVICE	SHUBERT, ANN	4.00		58.32 I	
199949	6/22/12	800000	VISITING NURSE SERVICE	SIANO, ANDREW	9.00		131.22 I	
				CUSTOMER	13.00	0.00	189.54	
				CATEGORY	13.00	0.00	189.54	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	52
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199950	6/22/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE (		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	253
				SALES REGISTER			BILL WEEK ENDING	., .,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199951	6/22/12	800000	VISITING NURSE SERVICE	SIMONE, FLORENC	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	254
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199952	6/22/12	000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40 I	
199953	6/22/12	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	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199954	6/22/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

ı	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	56
ı	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
ı				S	SALES REGISTER			BILL WEEK ENDING	6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	199955	6/22/12	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
ı					CATEGORY	12.00	0.00	174.96	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	257
SALES JRN	NL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	BALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199956	6/22/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25	8
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGIST	E R		BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100055	C 100 110				4 00		50.00 -	
199957	6/22/12	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	4.00		58.32 I	
				G3 TTT GODII	4.00			
				CATEGORY	4.00	0.00	58.32	

	06/27/12 - NL # 0287		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	259
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199958	6/22/12	000008	VISITING NURSE SERVICE	STALZER, STEPHA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRI			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	SA
INVOICE#	DATE 6/22/12	CUST NO	CUSTOMER NAME VISITING NURSE SERVICE	REFERENCE STAMBOULIDIS, V	HOURS	TAX AMT	AMOUNT TY 816.48 I	P SURPLUS
199939	0/22/12	000008	VISITING NURSE SERVICE	CATEGORY	56.00	0.00	816.48	· 

			YSIDE CITYWIDE				PAGE 1 - 26	1
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199960	6/22/12	000008	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 262 ADU ADULT BILL WEEK ENDING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
199961	6/22/12	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	10.00		145.80 I
				CATEGORY	10.00	0.00	145.80

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			2	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP	SURPLUS
199962	6/22/12	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	16.00		233.28	I	
199963	6/22/12	800000	VISITING NURSE SERVICE	STICKELL, BLANC	36.25		528.53	I	
199964	6/22/12	000008	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88	I	
				CUSTOMER	88.25	0.00	1,286.69		
				CATEGORY	88.25	0.00	1,286.69		

ı	RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	64	
	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW		
					SALES REGISTER			BILL WEEK ENDING	6/29/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	199965	6/22/12	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	35.50		517.59 I		
					CATEGORY	35.50	0.00	517.59		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	55
BILLED OIG	.1    0207	100 001		SALES REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199966 199967	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TABOADA, DIMAS TABOADA, ELIZAB	3.50 70.25		51.03 1,024.26	I I	
				CUSTOMER	73.75	0.00	1,075.29		
				CATEGORY	73.75	0.00	1,075.29		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 266
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDI	ING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
199968	6/22/12	000008	VISITING NURSE SERVICE	TADDEO, LENA	56.00		816.48	I
199969	6/15/12	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	4.00		58.32	I
199970	6/22/12	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	19.75		287.96	I
				CUSTOMER	79.75	0.00	1,162.76	
				CATEGORY	79.75	0.00	1,162.76	

			YSIDE CITYWIDE					267
SALES JRN	L # 0287	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199971	6/22/12	000008	VISITING NURSE SERVICE	TAVERAS, BERNAR	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 268
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA
			S	SALES REGISTER			BILL WEEK END	ING 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
199972	6/22/12	000008	VISITING NURSE SERVICE	TEJADA, BALDOME	20.00		291.60	I
199973	6/22/12	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	42.00		612.36	I
199974	6/22/12	000008	VISITING NURSE SERVICE	TINOCO, INES	28.00		408.24	I
199975	6/22/12	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	28.00		408.24	I
				CUSTOMER	118.00	0.00	1,720.44	
				CATEGORY	118.00	0.00	1,720.44	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	207
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
199976	6/22/12	800000	VISITING NURSE SERVICE	TORO, PURA	83.75		1,221.08	I
				CATEGORY	83.75	0.00	1,221.08	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 27	70
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199977	6/22/12	000008	VISITING NURSE SERVICE	TORRES, EMELINA	40.00		583.20	I	
199978	6/22/12	800000	VISITING NURSE SERVICE	TORRES, LUZ M	84.00		1,224.72	I	
				CUSTOMER	124.00	0.00	1,807.92		
				CATEGORY	124.00	0.00	1,807.92		

	06/27/12 - NL # 0287		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : LTC NURSING HOME	271 W/O WALLS (LT
511225 014	0207	200 001		SALES REGISTER			BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199979	6/22/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 272	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 6/29/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
199980	6/22/12	800000	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

	DATE 06/ ES JRNL #		SUP SUNNY LOC 001	SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVO	DICE# D	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
1999	981 6/	/22/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	56.00		816.48	
					CATEGORY	56.00	0.00	816.48	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	274
SALES JRN	L # 0287	LOC 001		REG NY NY			LAD NURSING HOME	
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199982	6/22/12	800000	VISITING NURSE SERVICE	TSUAI, PING	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	275
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199983	6/22/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	63.00		918.54 I	
				CATEGORY	63.00	0.00	918.54	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	276
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199984	6/22/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	5.00		874.80 I	
				CATEGORY	5.00	0.00	874.80	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	277	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			5	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
100005	C 100 110						242 22 -		
199985	6/22/12	000008	VISITING NURSE SERVICE	UGURLUYAN, KARA	2.00		349.92 I		
				GA EDGODY	2 00	0.00	240.00		
				CATEGORY	2.00	0.00	349.92		

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	278
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	· ·
				SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199986	6/22/12	800000	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	279
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199987	6/22/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

ı	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 280	
١	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	5/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	199988	6/22/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	9.25		134.87 I	
					CATEGORY	9.25	0.00	134.87	

			YSIDE CITYWIDE	5-10 No.			PAGE 1	- 28	1
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK END:	ING	6/29/12
									-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
199989	6/22/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	30.00		437.40	I	
199990	6/22/12	000008	VISITING NURSE SERVICE	VALLEJO, VERENA	1.00		14.58	I	
199991	6/22/12	800000	VISITING NURSE SERVICE	VARELAS, ANNA	15.50		226.00	I	
				CUSTOMER	46.50	0.00	677.98		
				CATEGORY	46.50	0.00	 677.98		

RUN DATE (	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	282
SALES JRNI	և # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			Ş	SALES REGISTER	3		BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199992	6/22/12	000008	VISITING NURSE SERVICE	VAROL, ELMAS	5.75		83.84 I	
199993	6/22/12	000008	VISITING NURSE SERVICE	VAROL, MUSTAFA	6.00		87.48 I	
				CUSTOMER	11.75	0.00	171.32	
							171 20	
				CATEGORY	11.75	0.00	171.32	

RUN DATE (	06/27/12 -	- SUP SUNN	IYSIDE CITYWIDE					PAGE 1	. – 28	83	
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA		
			S	SALES	REGISTER			BILL WEEK EN	DING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
199994	6/22/12	800000	VISITING NURSE SERVICE	VA	SQUEZ, ARTURO	49.00		714.42	I		
1					CATEGORY	49.00	0.00	714.42			

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			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
199996	6/22/12 6/22/12 6/22/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VASQUEZ, EUSTAG VASQUEZ, RAPHAE VAZQUEZ, ESTHER	33.00 20.50 40.00		481.14 298.89 583.20	I I
				CUSTOMER	93.50	0.00	1,363.23	
				CATEGORY	93.50	0.00	1,363.23	

RUN DATE (	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	285
SALES JRNI	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTE:	R		BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
199998	6/22/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	16.00		233.28 I	
				 CATEGORY	16.00	0.00	233.28	

RUN DATE	06/27/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	286
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
			S	BALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
199999	6/22/12	800000	VISITING NURSE SERVICE	VELEZ, MIRYAM	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE (		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	287
Brilles order	L    0207	100 001		SALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
200000	6/22/12	800000	VISITING NURSE SERVICE	VELOZ, EMILIO	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	288
SALES JRN	L # 0287	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
200001	6/22/12	800000	VISITING NURSE SERVICE	VENTURA, ROSA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE					- 289	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			S	SALES REGISTER			BILL WEEK ENDI	ING 6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	)
200002	6/22/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.75		594.14	I	
				CATEGORY	40.75	0.00	594.14		

RUN DATE 06/27/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0287 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		PAGE 1 - 290 HOA HOSPICE ADULT
	SALES REGISTER		BILL WEEK ENDING 6/29/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
200003 6/22/12 000008 VISITING NURSE SERVICE	VIGORITO, ANN	20.00	291.60 I
	 CATEGORY	20.00 0.00	291.60

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 291	L
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
200004	6/22/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

	RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	292
	SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE (	CARE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	G 6/29/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	200005	6/22/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
1					CATEGORY	4.00	0.00	58.32	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	293
511225 0141	2 11 020,	200 001		SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
200006	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VITERI, NELLY VITERI, NELLY	3.00 3.00		43.74 I 43.74 I	
200007	0/22/12	000000	VIDITING NORDE BERVICE	CUSTOMER	6.00	0.00	87.48	
				COSTONER	0.00	0.00	07.40	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	194	
SALES JRN	L # 0287	LOC 001		REG NY NY			LTC NURSING HOMEW		
			•	SALES REGISTER			BILL WEEK ENDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
200008	6/22/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40 I		
				CATEGORY	30.00	0.00	437.40		

- 1				YSIDE CITYWIDE				PAGE 1 - 2	
	SALES JRN	L # 0287	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				_				DIDD WEEK ENDING	0/25/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	200009	6/22/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	69.75		1,016.96 I	
					CATEGORY	69.75	0.00	1,016.96	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	296
	- "			ALES REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
200010	6/22/12	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	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 VCP CHOICE LH	- 29	7
	2 11 020	200 001		SALES REGISTER			BILL WEEK END		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200011	6/22/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
200012	6/22/12	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	3.00		43.74		
				CUSTOMER	6.00	0.00	87.48		
				CATEGORY	6.00	0.00	87.48		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 29	8
	_	200 001		ALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200013	6/22/12	000008	VISITING NURSE SERVICE	WERKMEISTER, JO	20.00		291.60	I	
200014 200015	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	WHITE, PATRICK WOODS, JEWEL	6.00 15.00		87.48 218.70	I I	
	-,,								
				CUSTOMER	41.00	0.00	597.78		
				CATEGORY	41.00	0.00	597.78		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 29	9
SALES OWN	11 # 0207	ПОС 001		SALES REGISTER			BILL WEEK END		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200016 200017	6/15/12 6/22/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	YAGHDJIAN, SIRA YAGHDJIAN, SIRA	4.00 16.00		58.32 233.28	I I	
				CUSTOMER	20.00	0.00	291.60		
				CATEGORY	20.00	0.00	291.60		

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	300
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
200018	6/22/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 -	301
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 6/29/12
				SALES REGISIER			DILL MEEK ENDIN	G 0/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
000010	6 / 0 0 / 1 0	000000			2 50		F1 02 T	
200019	6/22/12 6/22/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.50 48.00		51.03 I 699.84 I	
200020	0/22/12	000000	VISITING NORSE SERVICE	ZAMBRANO, CROZM				
				CUSTOMER	51.50	0.00	750.87	
				CATEGORY	51.50	0.00	750.87	

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 302	
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL HEALT	H
			:	SALES REGISTER			BILL WEEK ENDING 6/2	9/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
000001	6 (00 (10						101 00 -	
200021	6/22/12	800000	VISITING NURSE SERVICE	ZELLE, EVE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 06/27/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 303 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES JRNL # 0287 GUI GUILDNET SALES REGISTER BILL WEEK ENDING 6/29/12 ACERNO, CLAIRE 20.00 290.40
ALI, AMRUNISSA 24.00 348.48
AMABILE, ANTOIN 7.00 1,321.04
AVALA, ENRIQUE 52.00 775.04
BEGUM, JAMILLA 72.00 1,045.44
BEGUM, JAMILLA 72.00 1,045.44
BUCARO, CONCETT 27.00 392.04
CARSWELL, LUELL 70.00 1,016.40
CEPEDA, TOMASA 30.00 435.60
COLAVITTI, URAN 48.00 696.96
COLEMAN, REGINA 26.00 377.52
DIAZ, ALICIA 38.00 551.76
DIAZ, CARMEN 30.00 435.60
COLEMAN, LOIS 7.00 348.49
EARLINGTON, ALB 41.00 558.32
ECKHWAN, LOIS 7.00 1,321.04
ESPINOZA, MARIA 45.00 663.40
EEPOSITO, ALFON 31.75 461.01
FELICIANO, JOAN 38.00 551.76
FERRANDEZ, ANA 24.00 348.48
FERRARA, ANN 42.00 609.84
FERRARA, ANN 42.00 609.84
FERRARY, JOSEPHIN 70.00 1,016.40
GOMEZ, YOLANDA 7.50 108.20
HUSTIU, SILVIA 6.00 87.12
JIMENEZ, EUGENI 79.50 1,154.34
JOHNSON, DOROTH 63.00 914.76
MARTINEZ, EUGENI 79.50 1,154.34
JOHNSON, DOROTH 63.00 914.76
MARTINEZ, GLORI 25.00 363.00
MICHEL, DOROTHY 49.00 435.60
MARTINEZ, GLORI 25.00 363.00
MICHEL, DOROTHY 49.00 58.08
MORA, PAULA 4.00 58.08
MORA, PAULA 4.00 58.00
MARTINEZ, GLORI 25.00 363.00
MICHEL, DOROTHY 49.00 711.48
MOSCICKA, JADWI 40.00 58.08
MORA, PAULA 4.00 58.09
MORA, MARTIA 4.00 58.08
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, MARTIA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, MARTIA 4.00 58.09
MORA, PAULA 4.00 58.09
MORA, MARTIA 4.00 58.09 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 200022 6/22/12 000010 GUILDNET I 200023 6/22/12 000010 GUILDNET I 200024 6/22/12 000010 GUILDNET 200025 6/22/12 000010 GUILDNET 200026 GUILDNET 2/24/12 000010 GUILDNET 200027 6/22/12 000010 200028 6/22/12 000010 GUILDNET 200029 6/22/12 000010 GUILDNET 200030 6/22/12 000010 GUILDNET 200031 6/22/12 000010 GUILDNET GUILDNET 200032 6/22/12 000010 200033 6/22/12 000010 GUILDNET 200034 6/22/12 000010 GUILDNET 200035 6/22/12 000010 GUILDNET 200036 6/22/12 000010 GUILDNET 200037 6/22/12 000010 GUILDNET 200038 6/22/12 000010 GUILDNET 200039 6/22/12 000010 GUILDNET 200040 6/22/12 000010 GUILDNET 200041 6/22/12 000010 GUILDNET 200042 GUILDNET 6/22/12 000010 200043 GUILDNET 6/22/12 000010 200044 6/22/12 000010 GUILDNET 200045 6/22/12 000010 GUILDNET 200046 6/22/12 000010 GUILDNET 200047 6/08/12 000010 GUILDNET 200048 6/22/12 000010 GUILDNET 200049 6/22/12 000010 GUILDNET 200050 6/22/12 000010 GUILDNET 200051 6/22/12 000010 GUILDNET 200052 6/22/12 000010 GUILDNET 200053 6/22/12 000010 GUILDNET 200054 6/22/12 000010 GUILDNET 200055 6/22/12 000010 GUILDNET 200056 6/22/12 000010 GUILDNET 200057 6/22/12 000010 GUILDNET 200058 6/01/12 000010 GUILDNET 200059 6/22/12 000010 GUILDNET 200060 6/22/12 000010 GUILDNET 200061 000010 GUILDNET 6/22/12 200062 6/22/12 000010 GUILDNET 200063 6/22/12 000010 GUILDNET 200064 6/22/12 000010 GUILDNET 200065 6/22/12 000010 GUILDNET 200066 6/22/12 GUILDNET 000010 200067 6/22/12 000010 GUILDNET 200068 6/22/12 000010 GUILDNET 200069 6/22/12 000010 GUILDNET 6/22/12 200070 000010 GUILDNET

			YSIDE CITYWIDE					PAGE 2	- 30	04
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				GUI GUILDNET		
				SALES REG	ISTER			BILL WEEK EN	DING	6/29/12
TMTOTOTH	DATE	CUST NO	CHCHOMED NAME						mv.	GIIDDI IIG
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENC	CE	HOURS	IAX AMI	AMOUNT	IIP	SURPLUS
200071	6/22/12	000010	GUILDNET	PICHARDO	, MARIA	63.00		914.76	I	
200072	6/22/12	000010	GUILDNET	PINILLA,	VICTOR	34.75		504.57	I	
200073	6/22/12	000010	GUILDNET	PROANO, A	ALICIA	21.00		325.92	I	
200074	6/22/12	000010	GUILDNET	PROANO, I	BRUNO	32.00		496.64	I	
200075	6/22/12	000010	GUILDNET	PRYCE, CI	LYDIA	16.00		232.32	I	
200076	6/22/12	000010	GUILDNET	RAMOS, ES	STHER	15.00		217.80	I	
200077	6/22/12	000010	GUILDNET	RESTULA.	VINCEN	20.00		290.40	I	
200078	6/22/12	000010	GUILDNET	RIVAS, GI	ERTRUDI	20.00		290.40	I	
200079	6/22/12	000010	GUILDNET	RODRIGUE	Z, FABI	28.00		406.56	I	
200080	6/22/12	000010	GUILDNET	RODRIGUE	Z, HOLG	63.00		914.76	I	
200081	6/22/12	000010	GUILDNET	ROJAS, A	NGEL	15.00		232.80	I	
200082	6/22/12	000010	GUILDNET	ROJAS, HA	AYDEE	20.00		310.40	Ī	
200083	6/22/12	000010	GUILDNET	RUBIANO.	MARIA	3.00		43.56	Ī	
200084	6/22/12	000010	GUILDNET	SALJANIN	, DIL <sub>U</sub> JA	60.75		882.09	Ī	
200085	6/22/12	000010	GUILDNET	SANCHEZ	ELIZAB	42.75		620.73	Ī	
200086	6/22/12	000010	GUILDNET	SHELTON.	AGUEDA	35.00		508.20	Ī	
200087	6/22/12	000010	GUILDNET	SOMRAJ. I	TMTT.T.A	12.00		174.24	Ī	
200088	6/22/12	000010	GUILDNET	SOTIRIOU	. CHRIS	10.00		145.20	Ī	
200089	6/22/12	000010	GUILDNET	TOROSSIA	N. PARI	1.00		14.52	Ī	
200090	6/22/12	000010	GUILDNET	VILLACRES	S. LUZ	8.00		116.16	Ī	
200091	6/22/12	000010	GUILDNET	VLAHOS. N	MARTE	44.00		638.88	Ī	
200092	6/22/12	000010	GUILDNET	VLAHOS.	MARTE	8.00		116.16	Ī	
200093	6/22/12	000010	GUILDNET	WEISZ. KI	LARA	8.00		116.16	Ī	
200094	6/22/12	000010	GUILDNET	WEST. BAI	LDMIN	16.00		232.32	Ī	
200095	6/22/12	000010	GUILDNET	WHITE G	LORTA	15 00		217 80	Ī	
200096	6/22/12	000010	GUILDNET	WHITE, C	MYRNA	8 00		116 16	Ī	
200097	6/22/12	000010	GUILDNET	YI. CARL	OS.	24.00		348.48	Ī	
200098	6/22/12	000010	GUILDNET	YIANTSEL	IS. VIR	7.00		1.321.04	Ī	
200099	6/22/12	000010	GUILDNET	ZARE GLO	ORTA	48 00		696 96	Ī	
200100	6/22/12	000010	GUILDNET	ZIMAETA	FANNY	64.00		929.28	Ī	
200100	V/22/12	300010		Zometa,						
				PICHARDO PINILLA, PROANO, A PROANO, A PROANO, A PROANO, A PROANO, A PROANO, A RESTULA, RIVAS, GI RODRIGUE: RODRIGUE: ROJAS, AI ROJAS, HA RUBIANO, SALJANIN SANCHEZ, SHELTON, SOMRAJ, U SOTIRIOU TOROSSIAI VILLACRE: VLAHOS, I WEISZ, KI WEST, BAI WHITLEY, YI, CARL YIANTSEL: ZARE, GLO ZUMAETA, CUS	STOMER 2	,367.25	0.00	AMOUNT  914.76 504.57 325.92 496.64 232.32 217.80 290.40 406.56 914.76 232.80 310.40 43.56 882.09 620.73 508.20 174.24 145.20 14.52 116.16 638.88 116.16 116.16 232.32 217.80 116.16 232.32 217.80 116.16 38.48 1,321.04 696.96 929.28		
				CA:	regory 2	,367.25	0.00	38,138.19		

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30	)5
SALES JRN	JL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH FI	RST	
				SALES REGISTER	?		BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REG NY NY S A L E S R E G I S T E I	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200101	6/22/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
200102	6/22/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
200103	6/22/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
200104	6/22/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
200105	6/22/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
200106	6/22/12	000122	HEALTH FIRST	CEBALLOS, ANA	24.00		405.12	I	
200107	6/22/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
200108	6/15/12	000122	HEALTH FIRST	CORTES DE GALIN	48.00		810.24	I	
200109	6/22/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	29.00		489.52	I	
200110	6/22/12	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
200111	6/22/12	000122	HEALTH FIRST	FERGERSON, TINA	12.00		202.56	I	
200112	6/22/12	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
200113	6/22/12	000122	HEALTH FIRST	FONTANES, PEDRO	45.00		759.60	I	
200114	6/22/12	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
200115	6/22/12	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
200116	6/15/12	000122	HEALTH FIRST	HENRY, BRENDA	20.00		337.60	I	
200117	6/22/12	000122	HEALTH FIRST	HERRING, CHARLE	4.00		67.52	I	
200118	6/22/12	000122	HEALTH FIRST	KAUR, HARBANS	50.00		844.00	I	
200119	6/22/12	000122	HEALTH FIRST	LAZALA, GLADYS	49.00		827.12	I	
200120	6/22/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	68.00		1,147.84	I	
200121	6/22/12	000122	HEALTH FIRST	MACARENA, SAHAR	75.00		1,266.00	I	
200122	6/22/12	000122	HEALTH FIRST	MARTIN, ARIANA	8.00		135.04	I	
200123	6/22/12	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
200124	6/22/12	000122	HEALTH FIRST	RUIZ JR, SAMUEL	17.00		286.96	I	
200125	6/22/12	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
200126	6/22/12	000122	HEALTH FIRST	SPIVEY, PATRICI	20.00		337.60	I	
200127	6/15/12	000122	HEALTH FIRST	ST ROMAINE, CLA	87.00		1,468.56	I	
200128	6/22/12	000122	HEALTH FIRST	SURIEL, GERTRUD	24.00		405.12	I	
200129	6/22/12	000122	HEALTH FIRST	VASOUEZ, OLGA	10.00		168.80	I	
200130	6/22/12	000122	HEALTH FIRST	VEGA, GLORIA	32.00		540.16	I	
200131	6/22/12	000122	HEALTH FIRST	WILLIAMS, RODNE	24.00		405.12	I	
				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	1,091.00	0.00	18,416.08		
				CATEGORY	1,091.00	0.00	18,416.08		

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	ספר ו	NV NV			PAGE 1	- 30	)6 15
DALLS OWN	11 # 0207	HOC 001	SOUNTSIDE CITIWIDE	SALE	S REGISTER			BILL WEEK ENI	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200132	6/22/12	000120	NEIGHBORHOOD HEALTH PENEIGHBORHOOD HEALTH PE	ROVIDERS	AHMED, UMARA	56.00		945.28	I	
200133	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	ARDITTO, PATRIC	30.00		506.40	Ī	
200134	6/08/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	CHUKWUJIORAH. T	50.00		844.00	Ī	
200135	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	DARWISH, NADIA	45.00		759.60	Ī	
200136	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
200137	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
200138	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
200139	6/22/12	000120	NEIGHBORHOOD HEALTH PF	ROVIDERS	HAMPTON, PRISCI	44.00		742.72	I	
200140	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	JONES, CYNTHIA	27.00		455.76	I	
200141	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	KHALIL, RASHAN	36.00		607.68	I	
200142	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	KHAN, FARUQUE	84.00		1,417.92	I	
200143	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	KROLL, KATHERIN	28.00		472.64	I	
200144	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	MORALES FERNAD	42.00		708.96	I	
200145	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	OCASIO, VIRGINI	20.00		337.60	I	
200146	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	RODRIGUEZ, JESS	20.00		337.60	I	
200147	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
200148	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	SALVATO, MARY	40.00		675.20	I	
200149	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
200150	5/25/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	WELLS, WYNORIA	75.25		1,270.22	I	
200151	6/22/12	000120	NEIGHBORHOOD HEALTH PR	ROVIDERS	WILSON, SHERYL	38.00		641.44	I	
					CUSTOMER	819.25	0.00	13,828.94		
					CATEGORY		0.00	13,828.94		

			YSIDE CITYWIDE				11102	- 30	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHO		
				SALES REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200152	6/22/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
200153	6/22/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	21.00		354.27	I	
200154	6/22/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	32.00		539.84	I	
200155	6/15/12	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	10.00		168.70	I	
200156	6/22/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.08	I	
200157	6/22/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81	I	
200158	6/22/12	000126	NYS CATHOLIC/FIDELIS	PURNELL, ROSE	28.00		472.36	I	
200159	6/22/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	40.00		674.80	I	
200160	6/22/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	31.00		522.97	I	
200161	6/22/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81	I	
				CUSTOMER	421.00	0.00	7,102.27		
				CATEGORY	421.00	0.00	7,102.27		

RUN DATE	06/27/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30	8
SALES JRN	rL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			UHC UNITED HE	ALTH	
				SALES REGISTER			BILL WEEK END	ING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200162	6/22/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	I	
200163	6/22/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	53.00		909.48	I	
200164	6/22/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	15.00		257.40	I	
200165	6/22/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	48.00		823.68	I	
200166	6/22/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I	
				CUSTOMER	214.00	0.00	3,672.24		
				CATEGORY	214.00	0.00	3,672.24		

			YSIDE CITYWIDE	DEC NV NV			11100	- 30	9
SALES JRN	ш # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			EHP EMBLEM HE BILL WEEK END		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200167	6/22/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	18.25		255.50	I	
200168	6/22/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
200169	6/22/12	000114	EMBLEM HEALTH	COPELAND, ELISE	18.00		256.50	I	
200170	6/22/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	16.00		224.00	I	
200171	6/22/12	000114	EMBLEM HEALTH	HENRIQUEZ, TERE	20.00		280.00	I	
200172	6/22/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	35.00		490.00	I	
200173	6/22/12	000114	EMBLEM HEALTH	KEATON, CATHERI	83.75		1,172.50	I	
200174	6/22/12	000114	EMBLEM HEALTH	WEATHERS, VERDE	60.00		840.00	I	
200175	6/22/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00	I	
				CUSTOMER	391.00	0.00	5,478.50		
				CATEGORY	391.00	0.00	5,478.50		

RUN DATE			YSIDE CITYWIDE	222				11102	- 31	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG				HIP HEALTH I		
			•	SALE	S REGISTER			BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200176	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	AHMAD, AMATUL	20.00		337.60	I	
200177	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	CIPRIAN, JACQUE	16.00		270.08	I	
200178	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	54.00		911.52	I	
200179	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	63.00		1,063.44	I	
200180	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	50.00		844.00	I	
200181	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	31.00		523.28	I	
200182	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	SHAH, HANSIKABE	5.00		84.40	I	
200183	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	20.00		337.60	I	
200184	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	20.00		337.60	I	
200185	6/22/12	000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	12.00		202.56	I	
					CUSTOMER	291.00	0.00	4,912.08		
					CATEGORY	291.00	0.00	4,912.08		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - MPH METROPLUS H	
	.2 ,, 020,	200 001	5011115155 011111151	REG NY NY S 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
200186	6/22/12	000130	METROPLUS HEALTH	AKHTER, SELINA			617.40 I	
200187	6/22/12	000130	METROPLUS HEALTH	ANDERSON, BETH	26.00		445.90 I	
200188	6/22/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20 I	
200189	6/22/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	14.00		240.10 I	
200190	6/22/12	000130	METROPLUS HEALTH	BRACERO, HELEN	48.00		823.20 I	
200191	6/22/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS	36.00		617.40 I	
200192	6/22/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50 I	
200193	6/22/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	133.00		2,280.95 I	
200194	6/22/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	12.00		205.80 I	
200195	6/22/12	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25 I	
200196	6/22/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00 I	
200197	6/22/12	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65 I	
200198	6/22/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA RAMPERSAID, ALI	56.00		960.40 I	
200199	6/22/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	24.00		411.60 I	
200200	6/22/12	000130	METROPLUS HEALTH	RYALS, CHARLES	8.00		137.20 I	
200201	6/22/12	000130	METROPLUS HEALTH	SANTORO, MATTHE	42.00		720.30 I	
200202	6/22/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20 I	
200203	5/25/12	000130	METROPLUS HEALTH	VALLE, BLASINA	37.00		634.55 I	
				CUSTOMER	784.00	0.00	13,445.60	
				CATEGORY	784.00	0.00	13,445.60	

			YSIDE CITYWIDE					PAGE 1 -	312
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG				WEL WELCARE OF	
				SALE	S REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
200204	6/22/12	000124	WELCARE OF NEW YORK,	INC.	GENAO, DANIELA	44.00		756.80 I	
200205	6/22/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH	49.00		842.80 I	
200206	6/22/12	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	42.00		722.40 I	
200207	6/22/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	63.00		1,083.60 I	
					CUSTOMER	198.00	0.00	3,405.60	
					CATEGORY	198.00	0.00	3,405.60	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	313
SALES JRN	IL # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG N				NPS NY PRESBYTE	
				SALES	S REGISTER			BILL WEEK ENDIN	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
200208	6/22/12	000134	NY-PRESBYTERIAN SYSTEM	1 SELECT	KARASSAVIDES, A	35.00		600.60 I	
					CATEGORY	35.00	0.00	600.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1	- 31	.4
	.2    020,	200 001		SALES	REGISTER			BILL WEEK EN		6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200209	6/22/12	000132	AMERIGROUP	ESI	PERSON, CLAUD	16.00		269.92	I	
200210	6/22/12	000132	AMERIGROUP	FE	RNANDEZ, NORK	42.00		708.54	I	
200211	6/22/12	000132	AMERIGROUP	GUI	ERRA, LORRAIN	63.00		1,062.81	I	
200212	6/22/12	000132	AMERIGROUP	HAI	RDING, EDNA	30.00		506.10	I	
200213	6/22/12	000132	AMERIGROUP	HAI	WKINS S, MA	63.00		1,062.81	I	
200214	6/22/12	000132	AMERIGROUP	PRI	UITT, JOHNNY	8.00		135.04	I	
200215	6/22/12	000132	AMERIGROUP	WAI	LTERS, BYRON	25.00		421.75	I	
200216	6/22/12	000132	AMERIGROUP	YOT	UNG, KALEILE	18.00		303.66	I	
					CUSTOMER	265.00	0.00	4,470.63		
					CATEGORY	 265.00	0.00	4,470.63		

RU	N DATE	06/27/12 -	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1	- 31	.5
SA	LES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			PAR PRIVATE		
				S A L E	S REGISTER			BILL WEEK END	ING	6/29/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME						SURPLUS
	0217	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	BLESSINGER, DOU	12.00		174.00	I	
	0218	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	CAGAN, RUMANDO	8.00		108.00	I	
	0219	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	GRECH, JANE	8.00		116.00	I	
	0220	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	KOZHUSHICO, ROZ	4.00		58.00	I	
	0221	6/15/12	000002	SUNNYSIDE COMMUNITY SERVICES	MANIACE, AGNES	2.00		29.00	I	
	0222	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	MANIACE, AGNES	6.00		87.00	I	
	0223	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	MANIACE, VINCEN	6.00		87.00	I	
	0224	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	MARINOS, IRENE	4.00		54.00	I	
	0225	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	MARTIN, RUTH	8.00		108.00	I	
	0226	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	MONTELIONE, CAL	8.00		108.00	I	
	0227	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	ROCSIN, FLORICA	11.25		163.13	I	
	0228	5/11/12	000002	SUNNYSIDE COMMUNITY SERVICES	TEODORU, MIRELL	4.00		58.00	I	
	0229	5/25/12	000002	SUNNYSIDE COMMUNITY SERVICES	TEODORU, MIRELL	4.00		58.00	I	
	0230	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	TEODORU, MIRELL	8.00		116.00	I	
	0231	4/20/12	000002	SUNNYSIDE COMMUNITY SERVICES	TUCCI, DOROTHY	2.00		29.00	I	
20	0232	6/22/12	000002	SUNNYSIDE COMMUNITY SERVICES	BLESSINGER, DOU CAGAN, RUMANDO GRECH, JANE KOZHUSHICO, ROZ MANIACE, AGNES MANIACE, AGNES MANIACE, VINCEN MARINOS, IRENE MARTIN, RUTH MONTELIONE, CAL ROCSIN, FLORICA TEODORU, MIRELL TEODORU, MIRELL TEODORU, MIRELL TUCCI, DOROTHY TUCCI, DOROTHY	4.00		58.00	I	
					CUSTOMER	99.25	0.00	1,411.13		
20	0233	6/22/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	16.00		248.00	I	
20	0234	6/22/12	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	5.00		68.95	I	
	0235	6/22/12	000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR	MORSHELINA, NAS	9.00		124.11	Ī	
					CUSTOMER					
20	0236	6/22/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
					CATEGORY		0.00	1,976.19		
1										

RUN DATE O SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - CAS CHILDREN'S BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
200238 200239	6/22/12 6/22/12 6/22/12 6/22/12	000088 000088 000088 000088	CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY CHILDREN'S AID SOCIETY	DUNNE, MYEISHA SALAS, HELENA VARGAS, BRANDON VARGAS, JOHN	25.00 24.00 27.50 22.00		387.50 I 372.00 I 426.25 I 341.00 I	
				CUSTOMER	98.50	0.00	1,526.75	
				CATEGORY	98.50	0.00	1,526.75	

			YSIDE CITYWIDE					-	. – 31	.7	
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			PAR PRIVATE		c (00 (10	
				SALES	REGISTER			BILL WEEK EN	IDING	6/29/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
200241	6/22/12	000098	MILDRED PANSE	P.F	ANSE, MILDRED	20.00		310.00	I		
					CATEGORY	20.00	0.00	310.00			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVEHE BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
200242 200243	6/22/12 6/22/12	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	20.00 11.50		285.00 I 163.88 I	
				CUSTOMER	31.50	0.00	448.88	
				CATEGORY	31.50	0.00	448.88	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - PAR PRIVATE	
				SALES REGISTER			BILL WEEK ENDING	G 6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
200244	6/22/12	000143	ETTORE COPPOLA	COPPOLA, ETTORE	19.50		307.88 I	
200245	6/22/12	000145	LARRY EISENBERG	BERGER, TESS	18.00		306.00 I	
				CATEGORY	37.50	0.00	613.88	

RUN DATE	06/27/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 32	0
SALES JRN	L # 0287	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			CCM COMPREHEN	ISIVE	CARE MGMT
				SALE	S REGISTER			BILL WEEK ENI	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200246	6/22/12	000150	COMPREHENSIVE CARE	MANAGEMENT	GARCIA, MARIA	40.00		564.00	I	
200247	6/22/12	000150	COMPREHENSIVE CARE	MANAGEMENT	MELAMED, ESTER	16.00		225.60	I	
200248	6/22/12	000150	COMPREHENSIVE CARE	MANAGEMENT	PULLIAM, WILLIE	24.00		338.40	I	
200249	6/22/12	000150	COMPREHENSIVE CARE	MANAGEMENT	ROSARIO, CELEST	36.00		507.60	I	
					CUSTOMER	116.00	0.00	1,635.60		
					CATEGORY	116.00	0.00	1,635.60		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1 PAR PRIVATE BILL WEEK EN	- 32 DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200250	6/22/12	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I	
200251	6/22/12	000165	ALZHEIMER'S ASSOCIATION	TUCCI, DOROTHY	28.00		434.00	I	
200252	6/22/12	000167	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
200253	6/22/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
200254	6/22/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	16.00		248.00	I	
200255	6/22/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I	
200256	6/22/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	20.00		270.00	I	
200257	6/22/12	006337	STEPHEN EDEL	EDEL, CANDACE	78.50		1,240.76	I	
200258	6/22/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I	
200259	6/22/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I	
200260	6/22/12	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	2.00		31.00	I	
200261	6/22/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
200262	6/22/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	25.00		387.50	I	
200263	6/22/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	6.00		93.00	I	
200264	6/22/12	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
200265	6/22/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	4.00		62.00	I	
200266	6/22/12	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I	
200267	6/22/12	010352	BETTIE GIACOMO	GIACOMO, BETTIE	4.00		62.00	I	
200268	6/22/12	010375	DOMINICA IRAOLA	IRAOLA, LILIAN	15.00		243.75	I	
200269	6/22/12	010377	DOMINICA IRAOLA	IRAOLA, ANTONIO	15.00		243.75	I	
200270	6/22/12	010529	STEPHEN WEISS	WEISS, STELLA	4.00		68.00	I	
200271 200272	5/25/12 6/22/12	010530 010530	DANA SITILDES DANA SITILDES	ANSELMI, PETER ANSELMI, PETER	4.00 23.25		62.00 372.38	I	
				CUSTOMER	27.25	0.00	434.38		
200273	6/22/12	010677	ALZHEIMER'S ASSOCIATION	MONTELIONE, CAL	8.00		124.00	I	

RUN DATE (		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 2 PAR PRIVATE	- 32	22
SALES UKIN	L # U207	LOC UUI	SUNNISIDE CITIWIDE	SALES REGIST	E R		BILL WEEK EN	DING	6/29/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
200274	6/22/12	010735	MIGUEL ONATE	ONATE, MIGUEL	6.00		93.00	I	
200275	6/22/12	010753	GARY KUCHMEISTER	KUCHMEISTER, JC	32.00		496.00	I	
200276	6/22/12	010766	MILDRED EDELMAN	EDELMAN, MILDRE	10.00		155.00	I	
				CATEGORY	566.75	0.00	10,182.64		
				LOCATION	22,012.75	0.00	339,494.66		
				COMPANY	22,012.75	0.00	339,494.66		

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SALES JRNL # 0287 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER

BILL WEEK ENDING 6/29/12

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

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