RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY
SALES REGISTER

PAGE 1 - 1 SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 12/02/11

					E K		DIDD MEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174424	11/18/11	000082	SENIOR HEALTH PARTNE	ERS ALVAREZ, ANGELA	4.00		52.40	I	
174425	10/28/11	000082	SENIOR HEALTH PARTNE	ERS ALVAREZ, ANGELA	4.00		52.40	I	
174426	11/18/11	000082	SENIOR HEALTH PARTNE	ERS ALVAREZ, ANGELA	4.00		52.40	I	
174427	11/25/11	000082	SENIOR HEALTH PARTNE	ERS BROOKS, NATALII	18.00		235.80	I	
174428	11/25/11	000082	SENIOR HEALTH PARTNE	ERS CARRILLO, MARIA	A 27.75		363.53	I	
174429	11/25/11	000082	SENIOR HEALTH PARTNE	ERS COLON, RAYMUNDA	40.00		524.00	I	
174430	11/25/11	000082	SENIOR HEALTH PARTNE	ERS DABU, JUANITA	12.00		157.20	I	
174431	11/25/11	000082	SENIOR HEALTH PARTNE	ERS DABU, JUANITA	4.00		52.40	I	
174432	11/25/11	000082	SENIOR HEALTH PARTNE	ERS FENTON, JESSIE	4.00		52.40	I	
174433	11/25/11	000082	SENIOR HEALTH PARTNE	ERS FENTON, JESSIE	4.00		52.40	I	
174434	11/18/11	000082	SENIOR HEALTH PARTNE	ERS GUTIERREZ, LUC	45.00		589.50	I	
174435	11/25/11	000082	SENIOR HEALTH PARTNE SENIOR HEALTH PARTNE	ERS HARIDIN, KHAMAT	33.00		432.30	I	
174436	11/25/11	000082	SENIOR HEALTH PARTNE	ERS HARIDIN, RAMDIA	135.00		1,768.50	I	
174437	11/25/11	000082	SENIOR HEALTH PARTNE	ERS HERNANDEZ, FRAM	16.00		209.60	I	
174438	11/25/11	000082	SENIOR HEALTH PARTNE	ERS MOROCHO, MANUEI	75.25		985.78	I	
174439	11/25/11	000082	SENIOR HEALTH PARTNE	ERS PERALTA, RAMONA	76.00		995.60	I	
174440	11/25/11	000082	SENIOR HEALTH PARTNE	ERS RODRIGUEZ, MARI	16.00		209.60	I	
174441	11/25/11	000082	SENIOR HEALTH PARTNE	ERS SIERRA, MIRIAM	10.00		131.00	I	
174442	11/25/11	000082	SENIOR HEALTH PARTNE	ERS SIMON, LUPE	6.00		78.60	I	
174443	11/25/11	000082	SENIOR HEALTH PARTNE SENIOR HEALTH PARTNE	ERS TORRESCAMPOS, C	T 40.00		524.00	I	
174444	11/25/11	000082	SENIOR HEALTH PARTNE	ERS VASQUEZ, CORNEI	8.00		104.80	I	
174445	11/25/11	000082	SENIOR HEALTH PARTNE	ERS VIDOT-LINARES,	40.00		524.00	I	
174446	11/25/11	000082	SENIOR HEALTH PARTNE	ERS WOO, LUZ	12.00		157.20	I	
174447	11/25/11	000082	SENIOR HEALTH PARTNE	ERS WOO, LUZ	4.00		52.40	I	
				ERS ALVAREZ, ANGELE ERS ALVAREZ, ANGELE ERS ALVAREZ, ANGELE ERS ALVAREZ, ANGELE ERS BROOKS, NATALII ERS CARRILLO, MARIE ERS CARRILLO, MARIE ERS DABU, JUANITA ERS DABU, JUANITA ERS FENTON, JESSIE ERS FENTON, JESSIE ERS GUTIERREZ, LUC: ERS HARIDIN, KHAMA: ERS HARIDIN, KHAMA: ERS HARIDIN, RAMDIE ERS HENANDEZ, FRAM ERS HERNANDEZ, FRAM ERS PERALTA, RAMONE ERS PERALTA, RAMONE ERS SIERRA, MIRIAM ERS SIERRA, MIRIAM ERS SIERRA, MIRIAM ERS SIMON, LUPE ERS VASQUEZ, CORNEI ERS VASQUEZ, CORNEI ERS WOO, LUZ ERS WOO, LUZ CUSTOMER	638.00	0.00	8,357.81		
				CATEGORY	638.00	0.00	8,357.81		

RUN DATE 11/30/11			·				2
SALES JRNL # 0257	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174448 11/25/11	000008	VISITING NURSE SERVICE	ABBOTT, FAY	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 11/30/11 -	- SUP SUNNYS	SIDE CITYWIDE				PAGE 1	. –	3
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		10/00/11
		:	SALES REGISTER			BILL WEEK EN	IDING	12/02/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174449 11/25/11		/ISITING NURSE SERVICE	ABINANTI, IRENE	55.75		812.84	I	
174450 11/25/11	000008 V	ISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
			CUSTOMER	67.75	0.00	987.80		
			CATEGORY	67.75	0.00	987.80		

			YSIDE CITYWIDE				PAGE 1 -	4
SALES JRNL	# 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174451 11	1/25/11	800000	VISITING NURSE SERVICE	ACUNA, JOSE	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	5
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		S	ALES REGISTE	R		BILL WEEK EN	DING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174452 11/25/11	000008	VISITING NURSE SERVICE	ADAMES, OLGA	15.00		218.70	т	
			•				<u>+</u>	
174453 11/25/11	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	1	
174454 11/25/11	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	69.50		1,013.31	I	
174455 11/25/11	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	24.00		349.92	I	
174456 11/25/11	800000	VISITING NURSE SERVICE	AFZAL, AMIR	8.00		116.64	I	
			CUSTOMER	151.50	0.00	2,208.87		
			CATECODY	151.50	0.00	2 200 07		
			CATEGORY	151.50	0.00	2,208.87		

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 6
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	\$	SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174457 11/25/11	000008 VISITING NURSE SERVICE	AGUILAR, ZORAID	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

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SA
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P SURPLUS
N

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWI	DE REGNY NY SALES REGISTE	R	PAGE 1 - LTC NURSING HO BILL WEEK ENDI	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT T	TYP SURPLUS
174469 11/25/11 174470 11/25/11	000008 VISITING NURSE SE 000008 VISITING NURSE SE	· · · · · · · · · · · · · · · · · · ·	15.50 57.75	225.99 842.00	I I
		CUSTOMER	73.25 0.00	1,067.99	
		 CATEGORY	73.25 0.00	1,067.99	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE						PAGE	1 –	9
SALES JRN	ъ # 0257	LOC 001	SUNNYSIDE CITY		-	NY			VCP CHOICE		
				S A I	LES R	EGISTE	R		BILL WEEK E	NDING	12/02/11
TATTOTOTOTI	DAME	CIICE NO	CHOMOMED MAME		D.T.T.	DENGE	HOUDG	max and	7.140173777	m.r.	GIID DI HG
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174471	11/25/11	000008	VISITING NURSE	CEDVICE	∧ OTIN	ODETTE	20.00		291.60	т	
1/44/1	11/25/11	000008	VISITING NURSE	SERVICE	AOUN,	ODETTE	20.00		291.00		
						CATEGORY	20.00	0.00	291.60		

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 10
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT
		SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174472 11/25/11	000008 VISITING NURSE SERVICE	ARIAS, CARLOTA	38.50	561.33 I
		CATEGORY	38.50 0.00	561.33

	11/30/11 NL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		11
				SALES REGISTER			BILL WEEK ENI	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174473 174474	11/25/11 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	45.75 4.00		667.04 58.32	I	
1/44/4	11/25/11	000008	VISITING NURSE SERVICE	ASGNAR, MUNAMMA	4.00		50.32		
				CUSTOMER	49.75	0.00	725.36		
				CATEGORY	49.75	0.00	725.36		

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
174475 11/18/11 174476 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, _	7.00 49.00		102.06 714.42	I I
			CUSTOMER	56.00	0.00	816.48	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/	/30/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	13
SALES JRNL ‡	# 0257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
		S	ALES REGISTER			BILL WEEK EN	DING	12/02/11
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174477 11/	/25/11 000008	VISITING NURSE SERVICE	AVILA, ENIDIA	15.75		229.64	I	
			CATEGORY	15.75	0.00	229.64		

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	14
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	MEW/O WALLS (LT
		S	A L E S R E G I S T E R			BILL WEEK ENDIN	NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174478 11/25/11	800000	VISITING NURSE SERVICE	AZAD, ABUL	17.75		258.80	I
			CATEGORY	17.75	0.00	258.80	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	15
			SALES REGISTER			BILL WEEK ENDING	
		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174479 11/25/11	800000	VISITING NURSE SERVICE	AZZARA, MICHELE	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	16
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174480	11/25/11	800000	VISITING NURSE SERVICE	BAEZ, JUAN	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		YP SURPLUS
174481 11/25/11 174482 11/25/11 174483 11/25/11 174484 11/25/11 174485 11/25/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BALLAS, VIOLA BAQUERIZO, ANNA BARDEANU, VICTO BATTLE, JEANETT BECERRA, FELIPE	25.00 53.50 45.00 44.50 35.50		364.50 780.05 656.10 648.81 517.59	I I I
1/4405 11/25/11	000008	VISITING NURSE SERVICE	CUSTOMER	203.50	0.00	2,967.05	
			CATEGORY	203.50	0.00	2,967.05	

RUN DA	re 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- :	18
SALES	JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTER			BILL WEEK ENI	DING	12/02/11
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174486	11/25/11	000008	VISITING NURSE SERVICE	BEGUM, IQBAL	4.00		58.32	I	
174487	11/25/11	800000	VISITING NURSE SERVICE	BELLOROFONTE, M	128.00		1,866.24	I	
				CUSTOMER	132.00	0.00	1,924.56		
							_,,,		
				CATEGORY	132.00	0.00	1,924.56		

			YSIDE CITYWIDE				-	19
SALES JRNI	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	G 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
174488 1	11/25/11	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 20 LTC NURSING HOMEW/O WALLS (BILL WEEK ENDING 12/02/11	(LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174489 11/18/11 174490 11/25/11 174491 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BETHUNE, HARRYD BETHUNE, HARRYD BHAWNANI, BISHU	5.00 25.00 30.00		72.90 I 364.50 I 437.40 I	
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	21
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174492 11/25/11	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	29.00		422.82 I	
174493 10/21/11	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	4.00		58.32 I	
174494 11/25/11	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	20.00		291.60 I	
			CUSTOMER	53.00	0.00	772.74	
			CATEGORY	53.00	0.00	772.74	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 22 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE H	HOURS TAX AMT	AMOUNT TYP SURPLUS
174495 11/25/11	000008 VISITING NURSE SERVIC	E BLANCAFLOR, PUR 3	39.00	568.62 I
		CATEGORY 3	39.00 0.00	568.62

RUN DATE 11/30/11 SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
174496 11/25/11	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	16.00		233.28 I		
			CATEGORY	16.00	0.00	233.28		

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	24
SALES UNIL # 0257	LOC UUI		SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174497 11/25/11 174498 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 21.00		131.22 306.18	I I
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DA	ATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	25
SALES	JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174499	9 11/25/11	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 26
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHA	-
				SALES REGIST	E R		BILL WEEK END	ING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
174500	11/25/11	800000	VISITING NURSE SERVICE	BOPP, ANNA	6.00		87.48	I
				CATEGORY	6.00	0.00	 87.48	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174501 11/25/11	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
			CATEGORY	12.00	0.00		

RUN DATE 11/30/11 - SALES JRNL # 0257			NY NY			PAGE 1 LTC NURSING H		-
			S REGISTER			BILL WEEK END		•
INVOICE# DATE	CUST NO CUSTOM	ER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174502 11/25/11	000008 VISITI	NG NURSE SERVICE	BOYADJIAN, ZARO	29.00		422.82	I	
			CATEGORY	29.00	0.00	422.82		

RUN DATE 11/30/11 SALES JRNL # 0257		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	
		:	SALES REGISTER			BILL WEEK END	DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174503 11/25/11	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	63.00		918.54	Ī
174504 11/25/11 174505 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BURGOS, RAFAELA BURNS, MARGARET	6.00 56.00		87.48 816.48	I I
			CUSTOMER	125.00	0.00	1,822.50	
			CUSTOMER	125.00	0.00	1,022.50	
			CATEGORY	125.00	0.00	1,822.50	

RUN DATE 11/30/11 -	- SUP SUNI	YSIDE CITYWIDE				PAGE 1 -	30
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
		S	ALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174506 11/25/11	000008	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/30/11 -						PAGE 1 - 31	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/02/1	L1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
174507 11/25/11	000008	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80 I	
174508 11/25/11	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	40.00		583.20 I	
			CUSTOMER	50.00	0.00	729.00	
			CATEGORY	50.00	0.00	729.00	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 32 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174509 11/25/11	000008 VISITING NURSE SERVICE	CALDERON, ELISA	8.00		116.64 I
		CATEGORY	8.00	0.00	116.64

RUN DATE 11/30/11 -						PAGE 1	55
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH	
		•	SALES REGISIER			DILL MEEK END	ING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
154510 11/05/11				46 55		601 60	_
174510 11/25/11 174511 11/25/11	000008 000008	VISITING NURSE SERVICE		46.75 42.00		681.62 612.36	<u></u>
1/4511 11/25/11	000008	VISITING NURSE SERVICE	CALDERON, VIRGI	42.00		012.30	1
			CUSTOMER	88.75	0.00	1,293.98	
						1 002 00	
			CATEGORY	88.75	0.00	1,293.98	

RUN DATE 11/30/11 -			DEC MI			PAGE 1 -	
SALES JRNL # 0257	LOC 001		REG NY NY SALES REGISTER			HOA HOSPICE ADU: BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174512 11/25/11	000008	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54 I	
			CATEGORY	63.00	0.00	918.54	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		S	ALES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174513 11/25/11	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/30/						-	36
SALES JRNL # 02	57 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/02/11
			SALES REGISIER			DILL WEEK ENDING	3 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174514 11/25/	11 000008	VISITING NURSE SERVICE	CANO, ADELINA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/3	80/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	37
SALES JRNL #	0257 LOC 001		REG NY NY			VCP CHOICE LHC	
		5	SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174515 11/2	25/11 000008	VISITING NURSE SERVICE	CAPORASO, VINCE	81.50		1,188.27	Ι
			CATEGORY	81.50	0.00	1,188.27	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 38 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174516 11/25/11	000008 VISITING NURSE SERVICE	CARBAJAL, MERCE	29.00	422.82 I
		CATEGORY	29.00 0.00	422.82

-	11/30/11 NL # 0257	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		39
	141 0257	100 001		SALES REGISTER			BILL WEEK EN		12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174517	11/25/11	000008	VISITING NURSE SERVICE	CARDONA, MARIA	20.00		291.60	I	
174518	11/25/11	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	55.75		812.84	I	
174519	11/04/11	000008	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
174520	11/04/11	000008	VISITING NURSE SERVICE	CARELA-REYES, M	23.00		335.34	I	
174521	11/18/11	000008	VISITING NURSE SERVICE	CARELA-REYES, M	20.00		291.60	I	
174522	11/25/11	000008	VISITING NURSE SERVICE	CARELA-REYES, M	15.00		218.70	I	
174523	11/25/11	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	30.00		437.40	I	
				CUSTOMER	168.75	0.00	2,460.38		
				CATEGORY	168.75	0.00	2,460.38		

RUN DATE 11/30/11 -			DEC MY NV			PAGE 1 -	- 40	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	ING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	
174524 11/25/11	800000	VISITING NURSE SERVICE	CARTAFALSA, NEL	69.50		1,013.31	I	
			CATEGORY	69.50	0.00	1,013.31		

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 41 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174525 10/28/11 174526 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 55.50		116.64 I 809.20 I
			CUSTOMER	63.50	0.00	925.84
			CATEGORY	63.50	0.00	925.84

RUN DATE 11/30/11 -						PAGE 1 -	42
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
		•	SALES KEGISIEK			BILL MEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
154505 11/10/11				00 00		001 60 -	
174527 11/18/11 174528 11/25/11	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.00		291.60 I 291.60 I	
174320 11/23/11	000008	VISITING NORSE SERVICE	CEBALLOS, CLEME	20.00		291.00 1	
			CUSTOMER	40.00	0.00	583.20	
			CA ELICODY	40.00	0.00		
			CATEGORY	40.00	0.00	583.20	

	DATE 11/30/11 ES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		43 12/02/11
INV	OICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ΓΥΡ	SURPLUS
174	529 11/25/11	800000	VISITING NURSE SERVICE	CELIO, MARION	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 4	4
SALES JRNI	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			S	ALES REGISTER			BILL WEEK ENI	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
154500					05 00		264 50	_	
174530	11/25/11	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	25.00		364.50	I	
				GAERGODY	25 00	0.00	264 50		
				CATEGORY	25.00	0.00	364.50		

RUN DAT	E 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 45
SALES J	RNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174531	11/25/11	800000	VISITING NURSE SERVICE	CERNY, ELIZABET	9.00		131.22 I
				CATEGORY	9.00	0.00	131.22

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 46 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174532 11/25/11	000008 VISITING NURSE SERVICE	CHAPPLE, VICKIE	2.50		36.45 I
		CATEGORY	2.50	0.00	 36.45

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		47
		\$	SALES REGISTER			BILL WEEK END	ING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174533 11/25/11 174534 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CHARLES PIERRE, CHAUCA, PEDRO	18.00 56.00		262.44 816.48	I I	
174535 11/25/11	800000	VISITING NURSE SERVICE	CHIPA, PANAGIOT	9.00		131.22	I	
			CUSTOMER	83.00	0.00	1,210.14		
			CATEGORY	83.00	0.00	1,210.14		

RUN DATE 11/30/11 -		YSIDE CITYWIDE				PAGE 1 -	48
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
		S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174536 11/25/11	800000	VISITING NURSE SERVICE	CHO, MOGEE	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 11/30/11		YSIDE CITYWIDE				PAGE 1	- 49
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
			SALES REGISTER			BILL WEEK END	OING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174537 11/25/11	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	48.75		710.78	I
174538 11/25/11	800000	VISITING NURSE SERVICE	CHU, MOLLY	32.00		466.56	I
174539 11/25/11	800000	VISITING NURSE SERVICE	CHUCK, ENA	22.00		320.76	I
			CUSTOMER	102.75	0.00	1,498.10	
			CATEGORY	102.75	0.00	1,498.10	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	50
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
		S	ALES REGISTER		:	BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174540 11/25/11	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/30/11 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	51
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			SALES REGISTER			BILL WEEK ENDING	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
174541 11/25/11	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	
			CATEGORI	4.00	0.00	30.32	

RUN DATE 11/30/11 -	SUP SUNNYSIDE C	CITYWIDE				PAGE 1	- 5	2
SALES JRNL # 0257	LOC 001 SUNNY	YSIDE CITYWIDE REG	NY NY			LTC NURSING	HOMEW/	O WALLS (LT
		SALE	S REGISTER			BILL WEEK EN	DING	12/02/11
INVOICE# DATE	CUST NO CUSTOM	MER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174542 11/25/11	000008 VISITI	ING NURSE SERVICE	COLLER, FELISA	15.75		229.64	I	
174543 11/25/11	000008 VISITI	ING NURSE SERVICE	COLLER, JOSE	14.00		204.12	I	
174544 11/25/11	000008 VISITI	ING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I	
174545 11/25/11	000008 VISITI	ING NURSE SERVICE	COLON, ISABEL	17.00		247.86	I	
			CUSTOMER	88.75	0.00	1,293.98		
					0.00	1 202 00		
			CATEGORY	88.75	0.00	1,293.98		

				YSIDE CITYWIDE				PAGE 1 - 53	
5	SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
				S	SALES REGISTER			BILL WEEK ENDING 12	2/02/11
١.									
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
Ι.						1.50 00		0 440 44 -	
-	174546	11/25/11	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
					CATEGORY	168.00	0.00	2,449.44	

RUN DATE 11/30/11 -	SUP SUN	NYSIDE CITYWIDE]	PAGE 1 –	54
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY]	LTC NURSING HOM	EW/O WALLS (LT
		S	ALES REGISTER]	BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174547 11/25/11	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174548 11/25/11	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	19.50		284.31 I	
			CATEGORY	19.50	0.00	284.31	

RUN DATE 11/30/11 -			DDG NV NV				56
SALES URNL # 0257	LOC UUI	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174549 11/25/11	800000	VISITING NURSE SERVICE	COSTA, ARSENE	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 57
SALES JRI	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174550	11/25/11	800000	VISITING NURSE SERVICE	E COTTON, MARCUS	12.00		174.96 I
				CA EECODY	10.00	0.00	174.06
				CATEGORY	12.00	0.00	174.96

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE	1 - 58
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			HOICE LHCSA
	:	SALES REGISTER		BILL	WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	AX AMT	AMOUNT TYP SURPLUS
174551 11/25/11	000008 VISITING NURSE SERVICE	COVALIU, SAVETA	25.00		364.50 I
174552 11/25/11	000008 VISITING NURSE SERVICE	COVALIU, SIMION	20.00		291.60 I
		CUSTOMER	45.00	0.00	 656.10

			45.00		
		CATEGORY	45.00	0.00	656.10

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JUS

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 60 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	AMOUNT TYP SURPLUS
174554 11/18/11 174555 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		2.00 31.75	29.16 I 462.92 I
		CUSTOMER	33.75 0.00	492.08
		CATEGORY	33.75 0.00	492.08

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 61 VCP CHOICE LHCSA	
SALES ORD # 0237	HOC 001		SALES REGISTER			BILL WEEK ENDING 12/02	2/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	PLUS
174556 11/25/11 174557 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.75 24.00		229.64 I 349.92 I	
			CUSTOMER	39.75	0.00	579.56	
			CATEGORY	39.75	0.00	579.56	

RUN DATE 1 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	62
SALES URNL	# 0257	LOC 001		SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174558 1	1/25/11	800000	VISITING NURSE SERVICE	DAHUT, DOROTHY	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	
1/4558 1	1/25/11	000008	VISITING NURSE SERVICE	CATEGORY	10.00	0.00	145.80 1 	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 63 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174559 11/25/11 174560 11/25/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	•	22.50 55.00	328.05 I 801.90 I
		CUSTOMER	77.50 0.00	1,129.95
		CATEGORY	77.50 0.00	 1,129.95

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
154561	11 /05 /11						0.7.40	
174561	11/25/11	000008	VISITING NURSE SERVICE	DAVILA, TOMASA	6.00		87.48 I	
				CAREGODY	6 00	0.00	07.40	
1				CATEGORY	6.00	0.00	87.48	

	- SUP SUNNYSIDE CITYWIDE	222		PAGE 1 - 65
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		VCP CHOICE LHCSA BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM'	r AMOUNT TYP SURPLUS
174562 11/25/11	000008 VISITING NURSE SERVICE	DAVIS, LOUELLEN	42.00	612.36 I
1,1002 11,20,11	vibiline noner benviol	2111127, 20022222	12.00	12.55
		CATEGORY	42.00 0.00	0 612.36

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	66 G 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174563 11/25/11	000008 VISITING NURSE SERVICE	DE LIEUW, LIGIA	4.00		58.32 I	
		CATEGORY	4.00	0.00	58.32	

			YSIDE CITYWIDE	DEC MY MY			PAGE 1 -	67
SALES JRN	IL # U25/	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LAD NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174564	11/25/11	800000	VISITING NURSE SERVICE	DEL CARPIO, FEL	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE 11/30/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	68
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
		S	ALES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
111101011	0001 110	000101111111111111111111111111111111111		1100110		11100111 11	
174565 11/25/11	000008	VISITING NURSE SERVICE	DELACRUZ, MANUE	47.00		685.26 I	
			CATEGORY	47.00	0.00	685.26	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING	- 69 HOMEW/O WALLS (LT DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174566 11/11/11 174567 11/25/11 174568 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DELACRUZ, SEFER DELACRUZ, SEFER DELAROSA, CORAL	6.00 38.00 35.00		87.48 554.04 510.30	I I
			CUSTOMER	79.00	0.00	1,151.82	
			CATEGORY	79.00	0.00	1,151.82	

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 70	
SALES JRN	ı∟ # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
				SALES REGISTER			BILL WEEK END	ING 12/02/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS	
174569	11/25/11	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	17.50		255.15	I	
174570	11/18/11	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	24.00		349.92	I	
174571	11/25/11	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	20.00		291.60	I	
				CUSTOMER	61.50	0.00	896.67		
				CATEGORY	61.50	0.00	896.67		

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE				PAGE 1 - 71
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174572 11/25/11	000008 VISITING NURSE SERVICE	E DELUCA, ANTIONE	28.00		408.24 I
		CATEGORY	28.00	0.00	408.24

- 1	RUN DATE :			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	72 EW/O WALLS (LT
					SALES REGISTER			BILL WEEK ENDING	- , - ,
	INVOICE#	DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
	174573	11/25/11	000008	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30 I	
					CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 -	73
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER	2		BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174574	11/25/11	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	35.75		521.24 I	
				CATEGORY	35.75	0.00	521.24	

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	74
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		\$	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174575 11/25/11	800000	VISITING NURSE SERVICE	DIAZ, HILDA	18.75		273.38 I	
			CATEGORY	18.75	0.00	273.38	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE		NY E G I S T E	R		PAGE 1 VCP CHOICE LI BILL WEEK EN	HCSA	75 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174576 11/25/11 174577 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	MARIA OLGA	34.00 36.00		495.72 524.88	I	
				CUSTOMER	70.00	0.00	1,020.60		
				- CATEGORY	70.00	0.00	1,020.60		

	SUP SUNNYSIDE CITYWIDE				PAGE 1 - 76	
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174578 11/25/11	000008 VISITING NURSE SERVICE	E DIAZ, ROSA	12.00		174.96 I	
		CATEGORY	12.00	0.00	174.96	

RUN DATE 11/30/11 SALES JRNL # 0257			REG NY NY			PAGE 1 -	77
SALES URNL # U25/	LOC 001		REGNY NY SALES REGISTEI	R		VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174579 11/25/11	000008	VISITING NURSE SERVICE	DIAZ, ROSA	24.00		349.92	- -
174580 11/25/11 174581 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	DILLUVIO, MATTI DOMINGUEZ, MARI	70.00 42.00		1,020.60 1 612.36 1	• • •
171301 11723711	000000	VIBILING NORSE BERVICE	DOMINGUEZ, MARCI				
			CUSTOMER	136.00	0.00	1,982.88	
			CATEGORY	136.00	0.00	1,982.88	

RUN DATE 11/30/11 - SUP	SUNNYSIDE CITYWIDE				PAGE 1 – 78	
SALES JRNL # 0257 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY		:	LAD NURSING HOME W/O WALLS	LT
	S	ALES REGISTER		;	BILL WEEK ENDING 12/02/11	
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174582 11/25/11 0000	008 VISITING NURSE SERVICE	DOMINICK, GINA	20.25		295.25 I	
		CATEGORY	20.25	0.00	295.25	
		CATEGORY	20.25	0.00	 295.25	

RUN DATE 11/	/30/11 - SU	P SUNNYS	SIDE CITYWIDE				PAGE 1 -	79
SALES JRNL ‡	# 0257 LO	C 001	SUNNYSIDE CITYWIDE R	REG NY NY			LTC NURSING HOM	•
			S A I	LES REGISTER			BILL WEEK ENDIN	NG 12/02/11
INVOICE# I	DATE CU	ST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
174583 11/	/25/11 00	0008 V	VISITING NURSE SERVICE	DOMINICK, GINA	16.00		233.28	I
				CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	80
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174584 11/25/11	800000	VISITING NURSE SERVICE	DUGLUS, MAY RUT	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE			PAGE 1 -	81
SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY			LTC NURSING HOMEW	I/O WALLS (LT
SALES REGIS	STER		BILL WEEK ENDING	12/02/11
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174505 11 /05 /11 000000 WIGITING WIDGE GEDVICE DIMNY GRIT	33.00		401 14 +	
174585 11/25/11 000008 VISITING NURSE SERVICE DUTAN, SELIN	NDA 33.00		481.14 I	
CATEGO	ORY 33.00	0.00	481.14	

RUN DATE 11/30/11 SALES JRNL # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 8 CCL CONGREGATE CAR	32 RE PROGRAM
	200 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174586 11/25/11	000008	VISITING NURSE SERVICE	DUVERGE, MARIA	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 11/30,	/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	83
SALES JRNL # 02	257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		5	SALES REGISTER			BILL WEEK ENDIN	IG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174587 11/25	/11 000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	29.00		422.82	-
			CATEGORY	29.00	0.00	422.82	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNI LOC 001		REG NY NY			PAGE 1 - ADU ADULT	- 84	
BILLED GIAVE II 6237	100 001		ALES REGISTER			BILL WEEK END	ING 12	2/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP S	SURPLUS
174588 11/25/11	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	3.75		54.68	I	
			CATEGORY	3.75	0.00	54.68		

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	85
SALES JRN	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			S	SALES REGISTER			BILL WEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174589	11/25/11	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	3.75		54.68	I	
				CATEGORY	3.75	0.00	54.68		

RUN	DATE 11/30/11	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 86	
SALE	S JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRA	M
				SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	5
1745	90 11/25/11	. 000008	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	87
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
				SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174591	11/25/11	000008	VISITING NURSE SERVICE	ESPINOSA, CLORI	16.00		233.28	I
174592	11/25/11	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	15.00		218.70	Ι
				CUSTOMER	31.00	0.00	451.98	
				CATEGORY	31.00	0.00	451.98	

RUN DATE	11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	88
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
				SALES REGISTE	R		BILL WEEK ENI	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174593	11/25/11	000008	VISITING NURSE SERVICE	FADEN, ROBIN	54.00		787.32	I	
174594	11/25/11	800000	VISITING NURSE SERVICE	FAMBIATOS, PARA	8.75		127.58	I	
174595	11/25/11	800000	VISITING NURSE SERVICE	FAY, JULIA	9.00		131.22	I	
174596	11/25/11	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	63.00		918.54	I	
174597	11/25/11	800000	VISITING NURSE SERVICE	FERNANDEZ, ENRI	27.00		393.66	I	
				CUSTOMER	161.75	0.00	2,358.32		
				CATEGORY	161.75	0.00	2,358.32		

RUN DATE 1	1/30/11 -	SUP SUNNY	YSIDE CITYWIDE				PAGE 1 - 89)
SALES JRNL	# 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				SALES REGISTER			BILL WEEK ENDING 1	.2/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174598 1	1/25/11	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	90
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	10/00/11
		SALES REGISTER		1	BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174599 11/25/11	000008 VISITING NURSE SERVIC	E FEDNANDEZ MATT	48.00		699.84 I	
1/4599 11/25/11	000008 VISITING NURSE SERVIC	E FERNANDEZ, MATI	40.00		033.84 1	
		CATEGORY	48.00	0.00	699.84	

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE				PAGE 1 -	91
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174600 11/25/11	000008 VISITING NURSE SERVI	CE FERREIRO, JOSEP	12.00		174.96 I	
			10.00		184.06	
		CATEGORY	12.00	0.00	174.96	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 92 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174601 11/11/11 174602 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	8.50 44.00		123.93 I 641.52 I	
			CUSTOMER	52.50	0.00	765.45	
			CATEGORY	52.50	0.00	765.45	

RUN DATE 11/30/1	.1 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 9	3
SALES JRNL # 025	57 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
		S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174603 11/25/1	1 000008	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
			CATEGORY	6.00	0.00	 87.48	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	. –	94
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTE	R		BILL WEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
154604	11 (05 (11	000000		DOLL DEED DOCUM	06.00		250 00	_	
174604	11/25/11	000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	26.00		379.08	1	
				CATECODY	26.00	0.00	379.08		
				CATEGORY	20.00	0.00	3/9.08		

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - S CCL CONGREGATE CAN BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174605 11/18/11 174606 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		7.00 28.00		102.06 I 408.24 I	
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174607 11/25/11 174608 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		35.00 1.00		510.30 I 14.58 I	
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				PAGE 1 -	97
SALES JRN	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174609	11/25/11	800000	VISITING NURSE SERVICE	FRANKEL, LISA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 98
SALES JRNL # 0257		REG NY NY		LTC NURSING HOMEW/O WALLS (LT
		SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174610 11/25/11	000008 VISITING NURSE SERVICE	FRED, EULALIA	56.00	816.48 I
		CATEGORY	56.00 0.00	816.48

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWID	E				PAGE	1 -	99
SALES JRNL # 0257	LOC 001 SUNNYSIDE C					VCP CHOICE		
		SALES	REGISTER			BILL WEEK	ENDING	12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAM	E	REFERENCE	HOURS	TAX AMT	AMOUN	r TYP	SURPLUS
174611 11/25/11	000008 VISITING NUR	SE SERVICE F	REDERICK, AMEL	16.00		233.2	3 I	
			 CATEGORY	 16.00	0.00	233.2	 3	

RUN DATE 11/30/11 - SALES JRNL # 0257		REGNY NY SALES REGISTER		PAGE 1 - 100 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174612 11/25/11	000008 VISITING NURSE SERVICE	FREIJOSO, ROSA	42.25	616.01 I
		CATEGORY	42.25 0.00	616.01

RUN DATE 11/	30/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	101
SALES JRNL #	0257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE (CARE PROGRAM
		S	SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# D.	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174613 11/	25/11 000008	VISITING NURSE SERVICE	FRIAS, BARBARA	2.00		29.16 I	
			CATEGORY	2.00	0.00		

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	102
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174614 11/25/11	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 103 VCP CHOICE LHCSA
BILLES SIGNE II 0237	100 001		SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174615 11/25/11 174616 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALLARDO, ZOILA GALLINA, VIRGIN	36.00 9.75		524.88 I 142.16 I
			CUSTOMER	45.75	0.00	667.04
			CATEGORY	45.75	0.00	667.04

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 1(LTC NURSING HOMEW, BILL WEEK ENDING	O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP	SURPLUS
174617 11/25/11 174618 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	37.50 8.00	546.75 I 116.64 I	
		CUSTOMER	45.50 0	.00 663.39	
		CATEGORY	45.50 0	.00 663.39	

		NYSIDE CITYWIDE				PAGE 1 -	105
SALES JRNL # (1257 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/02/11
						DILL WELK ENDING	12/02/11
INVOICE# DAT	CE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174619 11/25	5/11 000008	VISITING NURSE SERVICE	GARCIA, ADRIANO	34.75		506.66 I	
			CATEGORY	34.75	0.00	506.66	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 1	106
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA	
		SALES REGISTER		BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	TYP AMOUNT TYP	SURPLUS
174620 11/25/11	000008 VISITING NURSE SERVICE	GARCIA, JOSEFIN	56.00	816.48 I	
		CATEGORY	56.00 0.0	816.48	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				- 107 HOMEW/O WALLS (LT
		\$	SALES REGISTER			BILL WEEK ENI	DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174621 11/25/11	000008	VISITING NURSE SERVICE	GARCIA, OLGA	24.00		349.92	I
174622 11/25/11	800000	VISITING NURSE SERVICE	GARY, MIKE	20.75		302.54	I
174623 11/11/11	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	8.00		116.64	I
174624 11/25/11	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	31.00		451.98	I
			CUSTOMER	83.75	0.00	1,221.08	
			CATEGORY	83.75	0.00	1,221.08	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 108 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174625 11/25/11	000008 VISITING NURSE SERVICE	GEORGE, MARY	1.00	14.58 I
		CATEGORY	1.00 0.00	14.58

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 109 VCP CHOICE LHCSA BILL WEEK ENDING 12/02/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
174626 11/18/11 174627 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.00 35.00		72.90 I 510.30 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174628 11/25/11	000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	43.75		637.88 I	
			CATEGORY	43.75	0.00	637.88	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 111 ADU ADULT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174629 11/25/11	000008 VISITING NURSE SERVICE	GLYPTIS, ARIADN	3.00		43.74 I	
		CATEGORY	3.00	0.00	43.74	

RUN DATE 11/30/11 - S						PAGE 1 -	
SALES JRNL # 0257 I	LOC 001	SUNNYSIDE CITYWIDE REG				CCL CONGREGATE C	
		SALE	S REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174630 11/25/11 0	000008	VISITING NURSE SERVICE		48.00		699.84 I	
1/4630 11/25/11 (000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	48.00		099.84 1	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 11/30	/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 1	13
SALES JRNL # 0:	257 LOC 001		REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174631 11/25	/11 000008	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	20.00		291.60 I	
			CATEGORY	20.00	0.00		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			E 1 - 11 NURSING HOMEW L WEEK ENDING	O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	AX AMT	AMOUNT TYP	SURPLUS
174632 11/25/11 174633 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	·	25.00 33.00		364.50 I 481.14 I	
		CUSTOMER	58.00	0.00	845.64	
		CATEGORY	58.00	0.00	845.64	

RUN DATE 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	115
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	L
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174634 11/25/11	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	31.00		451.98 I	
			CATEGORY	31.00	0.00	451.98	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 116 LTC NURSING HOMEW/O W BILL WEEK ENDING 12/	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
174635 11/25/11	000008	VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 11 ADU ADULT	
		·	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174636 11/25/11 174637 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	15.00 6.00		218.70 I 87.48 I	
			CUSTOMER	21.00	0.00	306.18	
			CATEGORY	21.00	0.00	306.18	

RUN DATE 11/30/11 SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 118 VCP CHOICE LHCSA BILL WEEK ENDING 12/0)2/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
174638 11/18/11 174639 11/25/11 174640 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GOYES, ELBA	20.00 16.00 37.00		291.60 I 233.28 I 539.46 I	
			CUSTOMER	73.00	0.00	1,064.34	
			CATEGORY	73.00	0.00	1,064.34	

			YSIDE CITYWIDE					- 1	
SALES JRN	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LAA LOMBARDI BILL WEEK EN		
				SALES KEGISIEK			DILL MEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174641	11 /10 /11	000000	VICINING MIDGE CEDVICE	CDECCINE ADMOI	7 00		100.06	_	
-	11/18/11 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	7.00 41.75		102.06 608.72	I	
	,,								
				CUSTOMER	48.75	0.00	710.78		
				CATEGORY	48.75	0.00	710.78		

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 12 ADU ADULT	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	SURPLUS
174643 11/25/11		VISITING NURSE SERVICE	GUERRERO, SUSAN	9.00	1111 1111	131.22 I	2011 202
			CATEGORY	9.00		 131.22	

RUN DATE 11 SALES JRNL	1/30/11 - SUP SUNN # 0257 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	
SALES OWNE	# 0237 LOC 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
	1/25/11 000008 1/25/11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUEVARA, ELENA GUTIERREZ, ANGE	72.00 32.00		1,049.76 466.56	I I
			CUSTOMER	104.00	0.00	1,516.32	
			CATEGORY	104.00	0.00	1,516.32	

			YSIDE CITYWIDE				PAGE 1 - 1	122
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
	D3.000	GTTGT 170	arramoved vivin	D===D=114=	*******		31401DT	GIID DI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174646	11/25/11	000008	VISITING NURSE SERVICE	HENAO, BEATRIZ	13.00		189.54 I	
1/4040	11/25/11	000006	VISITING NURSE SERVICE	d HENAU, BEAIRIZ	13.00		109.54	
				CATEGORY	13.00	0.00	189.54	
				CHILDON	13.00	0.00	107.51	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - : VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174647 11/25/11	800000	VISITING NURSE SERVICE	HENDY, BERNICE	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 11/30/11 -		SIDE CITYWIDE				PAGE 1 - 124	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/	02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
174648 11/25/11	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	56.00		816.48 I	
174649 11/25/11	800000	VISITING NURSE SERVICE	HERNANDEZ, MARI	32.00		466.56 I	
			CUSTOMER	88.00	0.00	1,283.04	
			CATEGORY	88.00	0.00	1,283.04	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI		O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174650 11/25/11 174651 11/25/11 174652 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HERRERA, ANGELA HERRERA, HORACI HUNGRIA, SABINA	29.75 36.75 41.50		433.76 535.82 605.07	I I I	
			CUSTOMER	108.00	0.00	1,574.65		
			CATEGORY	108.00	0.00	1,574.65		

RUN DAT	E 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	26
SALES J	RNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174653	11/25/11	800000	VISITING NURSE SERVICE	HUTNER, ELEANOR	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174654 11/25/11	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 -			556 191			-	- 128
SALES URNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			BILL WEEK END	OME W/O WALLS LT ING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174655 11/25/11	000008	VISITING NURSE SERVICE	ICIANO, ALFREDO	25.50		371.79	I
			CATEGORY	25.50	0.00	371.79	

		NYSIDE CITYWIDE					129
SALES JRNL #	0257 LOC 001		REG NY NY			LAA LOMBARDI AI	
			SALES REGISTER			BILL WEEK ENDIN	NG 12/02/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
174656 11/2	25/11 000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	37.00		539.46	
			CATEGORY	37.00	0.00	539.46	

	- SUP SUNNYSIDE CITY LOC 001 SUNNYSIDE	E CITYWIDE REG	NY NY S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK END:	
INVOICE# DATE	CUST NO CUSTOMER 1	JAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
174657 11/25/11	000008 VISITING 1	NURSE SERVICE	INSERRA, CATHER	48.00		699.84	I
			CATEGORY	48.00	0.00	699.84	

RUN DATE 11/30/11 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	L31
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	ALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174658 11/25/11	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/30/11 - SALES JRNL # 0257		SIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI	HOMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOM	IER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174659 11/25/11 174660 11/25/11		NG NURSE SERVICE	JAGDE, MARIA JAKLITSCH, ELIZ	35.00 38.00		510.30 554.04	I I
			CUSTOMER	73.00	0.00	1,064.34	
			CATEGORY	73.00	0.00	1,064.34	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 133 VCP CHOICE LHCSA BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS
174661 11/25/11	000008 VISITING NURSE SERVICE	JARA, DELIA	10.00	145.80 I
		CATEGORY	10.00 0.0	 0

RUN DATE 11/30/11 - SALES JRNL # 0257		UNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174662 11/11/11 174663 11/25/11		SITING NURSE SERVICE SITING NURSE SERVICE	JHAVERI, RAMESH JHAVERI, RAMESH	4.00 20.00		58.32 I 291.60 I	
			CUSTOMER	24.00	0.00	349.92	
			CATEGORY	24.00	0.00	349.92	

	DATE 11/30/11 ES JRNL # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - :	Γ
TNV	DICE# DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	12/02/11 SURPLUS
1746		000008	VISITING NURSE SERVICE		70.00		1,020.60 I	20
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/30/11 - SALES JRNL # 0257		REGNY NY SALES REGISTER			PAGE 1 - 136 LTC NURSING HOMEW/O WA BILL WEEK ENDING 12/0	•
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	PLUS
174665 11/25/11	000008 VISITING NURSE SERVICE	JIMENEZ, ALTAGR	5.00		72.90 I	
		CATEGORY	5.00	0.00	72.90	

				YSIDE CITYWIDE				PAGE 1 -	137
SA	LES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	- 10/00/11
				2	SALES REGISTER			BILL WEEK ENDING	G 12/02/11
IN	WOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
17	4666	11/25/11	000008	VISITING NURSE SERVICE	JOHNSON, DOROTH	16.00		233.28 I	
					CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 -		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 138 LTC NURSING HOMEW/C	
SALES URILL # 0237	LOC UUI		SALES REGISTER			BILL WEEK ENDING 1	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174667 11/25/11	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	24.75		360.86 I	
			CATEGORY	24.75	0.00	 360.86	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174668 11/04/11 174669 11/25/11 174670 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SHARAN KAUR, SHARAN KEARNEY, LORRAI	4.00 40.00 20.00		58.32 I 583.20 I 291.60 I	-
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 140 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO (CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174671 11/04/11 174672 11/25/11		VISITING NURSE SERVICE VISITING NURSE SERVICE		4.00 4.00		58.32 I 58.32 I
			CUSTOMER	8.00	0.00	116.64
			CATEGORY	8.00	0.00	116.64

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
174673 11/25/11 174674 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		69.75 5.00		1,016.96 72.90	I I
			CUSTOMER	74.75	0.00	1,089.86	
			CATEGORY	74.75	0.00	1,089.86	

RUN DA'	ΓΕ 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	142
SALES .	JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB	ONLY
			Ş	SALES REGISTER			BILL WEEK ENDING	G 12/02/11
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
174675	11/25/11	800000	VISITING NURSE SERVICE	KOSSMANN, CAROL	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L43
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174676	11/25/11	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NYSALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	144 G 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174677 11/25/11 174678 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	KOWLCZYK, GERTR LARA-MORA, BELE	32.00 46.25		466.56 I 674.33 I	
		CUSTOMER	78.25	0.00	1,140.89	
		CATEGORY	78.25	0.00	1,140.89	

RUN DATE 11/30/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 145	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING 12/02/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
154650 11/05/11						001 60 -	
174679 11/25/11	800000	VISITING NURSE SERVICE	LE, HO	20.00		291.60 I	
			CA EECODY			201 60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30/11 -	SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	146
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174680 11/25/11	800000	VISITING NURSE SERVICE	LEE, GOCK HAN	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174681 11/25/11 174682 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	20.00 16.00		291.60 233.28	I I
		CUSTOMER	36.00	0.00	524.88	
		CATEGORY	36.00	0.00	524.88	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 148 VCP CHOICE LHCSA BILL WEEK ENDING 12/0:	2/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
174683 11/25/11	800000	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/30/	11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	149
SALES JRNL # 02	57 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174604 11/05/	11 000000	TITATETNA NEDAR ARRITAR	T THADEC MUDIAM	20 00		001 CO T	
174684 11/25/	11 000008	VISITING NURSE SERVICE	LINARES, MYRIAM	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	
			CAILGORI	20.00	0.00	291.00	

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE				PAGE 1 - 150
SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174685 11/25/11 000008 VISITING NURSE SERVICE	E LIRIANO, FRANCI	68.00		991.44 I
	CATEGORY	68.00	0.00	991.44

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	151
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174686 11/25/11	800000	VISITING NURSE SERVICE	LIZZUL, GIUSEPP	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWI	DE REGNY NY SALES REGISTER		PAGE 1 - 152 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174687 11/25/11 174688 11/25/11	000008 VISITING NURSE SE 000008 VISITING NURSE SE	, , , , , , , , , , , , , , , , , , , ,	56.00 32.00	816.48 I 466.56 I
		CUSTOMER	88.00 0.00	1,283.04
		CATEGORY	88.00 0.00	1,283.04

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174689 11/25/11	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	70.00		1,020.60	I
			CATEGORY	70.00	0.00	1,020.60	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY BALES REGISTER		PAGE 1 - 154 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174690 11/25/11	000008 VISITING NURSE SERVICE	LONDONO, MARIA	30.00	437.40 I
		CATEGORY	30.00 0.00	437.40

			YSIDE CITYWIDE				PAGE 1 - 155	
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174691	11/25/11	000008	VISITING NURSE SERVICE	LOOR, MAURA	12.00		174.96 I	
174692	11/25/11	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	34.75		506.66 I	
				CUSTOMER	46.75	0.00	681.62	
				CATEGORY	46.75	0.00	681.62	

	SUP SUNNYSIDE CITY LOC 001 SUNNYSID	WIDE E CITYWIDE REG	NY NY			PAGE 1 ADU ADULT	- 156
BALES ORNE # 0257	LOC UUI SUNNISID.	S A L E					DING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174693 11/25/11 174694 11/25/11		NURSE SERVICE NURSE SERVICE	LOPEZ, GRACIELA LOPEZ, JUAN C	9.00 9.00		131.22 131.22	I I
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 157
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
		SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AN	TT AMOUNT TYP SURPLUS
174695 11/25/11	000008 VISITING NURSE SERVICE	LOPEZ, MARIA	39.50	575.91 I
		CATEGORY	39.50 0.0	575.91

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 19 HOA HOSPICE ADULT BILL WEEK ENDING	
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174696	11/25/11	800000	VISITING NURSE SERVICE	LOPEZ, RAFAEL	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP SURPLUS
174697 11/25/11 174698 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LOPEZ, VIDA LORIA, DIANA	48.00 24.00		699.84 349.92	I
			CUSTOMER	72.00	0.00	1,049.76	
			CATEGORY	72.00	0.00	1,049.76	

RUN DATE 11/30/11 -						PAGE 1 - 160	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	_
			SALES REGISTER			BILL WEEK ENDING 12/02	/ 11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
174699 11/18/11	000008	VISITING NURSE SERVICE	LUCES, LETICIA	8.00		116.64 I	
174700 11/25/11	800000	VISITING NURSE SERVICE	LUCES, LETICIA	15.75		229.64 I	
174701 11/25/11	800000	VISITING NURSE SERVICE	LYMN, ANGIE	25.00		364.50 I	
			CUSTOMER	48.75	0.00	710.78	
			CATEGORY	48.75	0.00	710.78	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	161
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174702	11/25/11	000008	VISITING NURSE SERVICE	MACCHIA, CATHY	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REG	ISTER		LTC NURSING H	- 162 HOMEW/O WALLS (LT DING 12/02/11
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFEREN	CE HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174703 11/25/11	000008 VI	SITING NURSE SERVICE	MACK, BE	TTY 30.00		437.40	I
			CA'	 TEGORY 30.00	0.00	437.40	

- 1			SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
	174704	11/25/11	800000	VISITING NURSE SERVICE	MADEMARIANO, LU	3.00		43.74	I
					CATEGORY	3.00	0.00	43.74	

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 164	
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	
			S	SALES REGISTER			BILL WEEK ENDING 12/02	2/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURF	PLUS
174705	11/25/11	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174706 11/25/11 174707 11/25/11 174708 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAGNANI, VINCEN MANGAN, JOHN MANNINO, FRANCE	72.00 20.00 76.25		1,049.76 291.60 1,111.73	I I I
			CUSTOMER	168.25	0.00	2,453.09	
			CATEGORY	168.25	0.00	2,453.09	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 166 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174709 11/25/11 174710 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	42.00 19.25		612.36 I 280.67 I	
		CUSTOMER	61.25	0.00	893.03	
		CATEGORY	61.25	0.00	893.03	

RUN DATE 11/30	/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 1	67
SALES JRNL # 0	257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174711 11/25	/11 000008	VISITING NURSE SERVICE	MARINO, ANN	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174712 11/25/11	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 169
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174713 11/25/11	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	42.00		612.36 I
			CATEGORY	42.00	0.00	612.36

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 170
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174714 11/25/11	800000	VISITING NURSE SERVICE	MARTIN, ELAUCAD	6.00		87.48 I
174715 11/25/11	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	15.00		218.70 I
			 CUSTOMER	21.00	0.00	306.18
			CAMPRODY.	01 00	0.00	206 10
			CATEGORY	21.00	0.00	306.18

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	71
SALES JRNI	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
				SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174716	11/25/11	000008	VISITING NURSE SERVICE	MARTINEZ, ELENA	60.00		874.80 I	
				CATEGORY	60.00	0.00	874.80	

RUN DATE 1 SALES JRNI		JP SUNNY DC 001	SIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTI	E R		PAGE 1 VCP CHOICE LI BILL WEEK EN		2/11
INVOICE#	DATE CU	JST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURE	PLUS
174718 1	11/25/11 00	80000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARTA MARTINEZ, ROSA	30.00 29.75 83.00		437.40 433.76 1,210.14	I I I	
				CUSTOMER	142.75	0.00	2,081.30		
				CATEGORY	142.75	0.00	2,081.30		

- 1			NYSIDE CITYWIDE					173	
ı	SALES JRNL #	0257 LOC 001		REG NY NY			LTC NURSING HOME		
ı				SALES REGISTER			BILL WEEK ENDING	12/02/11	
	INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	174720 11/2	5/11 000008	VISITING NURSE SERVICE	MARTINEZ, ROSAL	35.00		510.30 I		
				CATEGORY	35.00	0.00	510.30		

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
174721 11/25/11	800000	VISITING NURSE SERVICE	MASI, RAFFAELE	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE 11/30	0/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	175
SALES JRNL # (0257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174722 11/25	5/11 000008	VISITING NURSE SERVICE	MATOS, ROSA	23.50		342.63 I	
			CATEGORY	23.50	0.00	342.63	

RUN DATE 11/30/11 -		YSIDE CITYWIDE				PAGE 1	- 176
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK END	DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174723 11/25/11	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54	I
174724 11/25/11	000008	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 11/30/11 -	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 177	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	;
174725 11/25/11	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	53.25		776.39 I	
			CATEGORY	53.25	0.00	776.39	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 178 ADU ADULT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174726 11/25/11	800000	VISITING NURSE SERVICE	MCPARTLAN, CATH	2.00		29.16 I	
			CATEGORY	2.00	0.00	29.16	

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 179
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA
				SALES REGISTER			BILL WEEK END	ING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174727	11/25/11	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	20.00		291.60	I
174728	11/25/11	800000	VISITING NURSE SERVICE	•	24.00		349.92	I
				CUSTOMER	44.00	0.00	641.52	
				 CATEGORY	44.00	0.00	641.52	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 180
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
	:	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174729 11/25/11	000008 VISITING NURSE SERVICE	MEJIA, ROSA	41.25		601.44 I
		CATEGORY	41.25	0.00	601.44

			YSIDE CITYWIDE					181
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174730	11/18/11	000008	VISITING NURSE SERVICE	MELILLO, GRACE	20.00		291.60 I	
174731	11/25/11	800000	VISITING NURSE SERVICE	MELILLO, GRACE	16.00		233.28 I	
				CUSTOMER	36.00	0.00	524.88	
				CATEGORY	36.00	0.00	524.88	

RUN DATE 11/30/11 SALES JRNL # 0257			REG NY NY			PAGE 1 - LTC NURSING HOME	
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174732 11/25/11	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	20.75		302.55 I	
			CATEGORY	20.75	0.00	302.55	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174733 11/25/11	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWII	E REGNY NY SALES REGIST	E R		LTC NURSING	- 184 HOMEW/O WALLS (LT DING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174734 10/28/11 174735 11/25/11	000008 VISITING NURSE SEI 000008 VISITING NURSE SEI		4.00 34.00		58.32 495.72	I I
		CUSTOMER	38.00	0.00	554.04	
		CATEGORY	38.00	0.00	554.04	

RUN DATE 11/30/11 SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY 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
174736 11/25/11	000008	VISITING NURSE SERVICE	MENDOZA, VALENT	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30	/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	186
SALES JRNL # 0	257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		i	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
184828 11/05	/11 000000		VII TO VIDI	6 00		07.40	
174737 11/25	/11 000008	VISITING NURSE SERVICE	MILEO, MARY	6.00		87.48 I	
			CATEGORY	6 00	0.00	87.48	
			CALEGORY	6.00	0.00	87.48	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 187	
SALES JRN	rL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGR	RAM
			5	SALES REGISTER			BILL WEEK ENDING 12/02/	11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	US
174738	11/25/11	800000	VISITING NURSE SERVICE	MOLINA, ANA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 11/30/11	- SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 1	188
SALES JRNL # 0257	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174739 11/25/11	. 000008	VISITING NURSE SERVICE	MONSERRAT, DORI	9.75		142.16 I	
174740 11/25/11	. 000008	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40 I	
			CUSTOMER	39.75	0.00	579.56	
			CATEGORY	39.75	0.00	579.56	

RUN DATE 11/30/11 -						PAGE 1 - 189	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTER			BILL WEEK ENDING 12/02	1/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURF	LUS
174741 11/18/11	000008	VISITING NURSE SERVICE	MOORE, ALISON	3.00		43.74 I	
174742 11/25/11	800000	VISITING NURSE SERVICE	MOORE, ALISON	12.00		174.96 I	
			CUSTOMER	15.00	0.00	218.70	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 11/30/						-	190
SALES JRNL # 02	57 LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCS.	
		5	SALES KEGISIEK			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174743 11/25/	11 000008	VISITING NURSE SERVICE	MORAITIS, AGATH	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	
			0111200111	23.00	0.00	301.30	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			PAGE 1 - 191 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174744 11/25/11	000008	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36 I
			CATEGORY	42.00	0.00	612.36

			YSIDE CITYWIDE				PAGE 1 - 1	192
SALES	JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	10/00/11
			:	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174745	11/25/11	000008	VISITING NURSE SERVICE	MORALES, GENERO	81.75		1,191.92 I	
				CATEGORY	81.75	0.00	1,191.92	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	93
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		i	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174746 11/25/11	800000	VISITING NURSE SERVICE	MOREL, JUANA	12.00		174.96 I	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 11/30/11 -						-	- 194
SALES JRNL # 0257	LOC 001 SUNN	YSIDE CITYWIDE REG N				ADU ADULT	DING 10/00/11
		SALES	REGISTER			BILL MEEK EN	DING 12/02/11
INVOICE# DATE	CUST NO CUSTO	MER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174747 11/25/11	000008 VISIT	ING NURSE SERVICE	NAGY, GEORGE	18.00		262.44	I
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/30/11 -	SUP SUNNY	SIDE CITYWIDE				PAGE 1	- 195
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
		S	BALES REGISTER			BILL WEEK END	ING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
174748 11/25/11	800000	VISITING NURSE SERVICE	NAGY, GEORGE	22.00		320.76	I
			CATEGORY	22.00	0.00	320.76	

	11/30/11 - L # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	196
			S	SALES REGISTER			BILL WEEK ENDING	G 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174749	11/25/11	800000	VISITING NURSE SERVICE	NARANJO, HENRY	42.00		612.36 I	
				GATTEGODY	42.00		612.26	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 11/30/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 197	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
		\$	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174750 11/25/11	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	18.00		262.44 I	
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 198
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
	:	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174751 11/25/11	000008 VISITING NURSE SERVICE	NELLINI, MARY	16.00		233.28 I
		CATEGORY	16.00	0.00	233.28

ı	RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	199
ı	SALES JRN	L # 0257	LOC 001		REG NY NY			LTC NURSING HOME	
ı				i	SALES REGISTER			BILL WEEK ENDING	12/02/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	174752	11/25/11	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	46.25		674.33 I	
					CATEGORY	46.25	0.00	674.33	

RUN DATE 1	L1/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 200	
SALES JRNI	± # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	OGRAM
			S	SALES REGISTER			BILL WEEK ENDING 12/02	2/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
174753 1	11/25/11	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	62.50		911.26 I	
				CATEGORY	62.50	0.00	911.26	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 20 VCP CHOICE LHCSA BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174754 11/11/11 174755 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	= ,	8.00 24.00		116.64 I 349.92 I	
			CUSTOMER	32.00	0.00	466.56	
			CATEGORY	32.00	0.00	466.56	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 202 ADU ADULT BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174756 11/25/11	000008	VISITING NURSE SERVICE	NIGRO, CATHERIN	12.00		174.96 I	
			CATEGORY	12.00	0.00	174.96	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	203
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			5	SALES REGISTER			BILL WEEK ENDING	G 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174757	11/25/11	800000	VISITING NURSE SERVICE	NINO, CARMEN	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 204 LTC NURSING HOMEW/O WALL BILL WEEK ENDING 12/02/	,
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	JUS
174758 11/25/11 174759 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	10.50 28.00		153.09 I 408.24 I	
		CUSTOMER	38.50	0.00	561.33	
		CATEGORY	38.50	0.00	561.33	

RUN DATE 11/30/11			DDG 1911			PAGE 1	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174760 11/25/11	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	46.00		670.68	I
174761 11/25/11	800000	VISITING NURSE SERVICE	OCHOA, LUIS	36.00		524.88	I
174762 11/25/11	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	39.25		572.27	I
			CUSTOMER	121.25	0.00	1,767.83	
			CATEGORY	121.25	0.00	1,767.83	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 206	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174763 11/25/11	800000	VISITING NURSE SERVICE	ORTIZ, AMALFIS	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 11/30/11 -	SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 207	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174764 11/25/11	800000	VISITING NURSE SERVICE	ORTIZ, LILIA	18.00		262.44 I	
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 208 ADU ADULT
DALLO GIAVE # 0257	100 001		SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174765 11/18/11 174766 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	6.00 12.00		87.48 I 174.96 I
			CUSTOMER	18.00	0.00	262.44
			CATEGORY	18.00	0.00	262.44

RUN DATE 11/30 SALES JRNL # 0	/11 - SUP SUNNYS 257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE		.2/02/11
INVOICE# DAT	E CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174767 11/25 174768 11/25		VISITING NURSE SERVICE VISITING NURSE SERVICE	OSPINA, ANA PANASKAROLIDIS,	8.00 20.00		116.64 291.60	I I	
			CUSTOMER	28.00	0.00	408.24		
			CATEGORY	28.00	0.00	408.24		

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGI	STER		PAGE 1 - ADU ADULT BILL WEEK ENDI	210 NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174769 11/25/11	800000	VISITING NURSE SERVICE	PAPA, FRANC	ES 4.00		58.32	I
			CATEG	ORY 4.00	0.00	58.32	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 211 VCP CHOICE LHCSA BILL WEEK ENDING 12	/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
174770 11/25/11 174771 11/25/11 174772 11/25/11 174773 11/25/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PAPADOPOULOS, M PAPAZIAN, MANNI PAPOUTSIS, MARY PARETTI, MARIE	20.00 40.00 3.00 32.00		291.60 I 583.20 I 43.74 I 466.56 I	
			CUSTOMER	95.00	0.00	1,385.10	
			CATEGORY	95.00	0.00	1,385.10	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE	1 - 212	
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC	NURSING HOMEW/O WALLS (LT	
		S A L E S R E G I S T E R		BILL	WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	CAX AMT	AMOUNT TYP SURPLUS	
174774 11/25/11	000008 VISITING NURSE SERVICE	PARK, SUNG	20.00		291.60 I	
		CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30/11 -						PAGE 1 -	213
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	- 10/00/11
			SALES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174775 11/25/11	800000	VISITING NURSE SERVICE	PARTAGAS, ANA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	
			CATEGORI	20.00	0.00	201.00	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 214 VCP CHOICE LHCSA BILL WEEK ENDING 12/0	2/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
174776 11/25/11 174777 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.00 15.00		291.60 I 218.70 I	
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 215
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
	5	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174778 11/25/11	000008 VISITING NURSE SERVICE	PEREZ, DOMINGA	35.50		517.59 I
		CATEGORY	35.50	0.00	 517.59

RUN DATE 11/30/11 -			DEC NY NY			-	- 21	.6
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH BILL WEEK END		12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174779 11/25/11 174780 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	24.00 54.00		349.92 787.32	I T	
171700 11723711	000000	VIDITING NORDE BERVICE	CUSTOMER	78.00	0.00	1,137.24		
			COSTOMER	70.00		1,137.24		
			CATEGORY	78.00	0.00	1,137.24		

RUN DATE 11/30/11 - SUP SUN SALES JRNL # 0257 LOC 001		G NY NY			PAGE 1 - 217 AUR ADULT REHAB ONLY	
	SAL	ES REGISTER			BILL WEEK ENDING 12/02/1	1
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
174781 11/25/11 000008	VISITING NURSE SERVICE	PHILLIPS, BARBA	1.00		14.58 I	
		CATEGORY	1.00	0.00	 14.58	-

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	218
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
		S	ALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174782 11/25/11	000008	VISITING NURSE SERVICE	PIZARRO, BARBAR	3.00		43.74	I
174783 11/25/11	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	24.75		360.86	I
174784 11/25/11	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	30.00		437.40	I
174785 11/25/11	800000	VISITING NURSE SERVICE	POGGI, EMERITA	24.00		349.92	I
			CUSTOMER	81.75	0.00	1,191.92	
			CATEGORY	81.75	0.00	1,191.92	

	TE 11/30/11 - JRNL # 0257			REGNY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	V/O WALLS (LT
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174786	11/25/11	000008	VISITING NURSE SERVICE	PONCE, ALICIA	37.50		546.75 I	
				CATEGORY	37.50	0.00	 546.75	

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 220
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174787 11/25/11	000008	VISITING NURSE SERVICE	PUISELLO, CIRA	21.50		313.47 I
174788 11/25/11	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	35.75		521.24 I
			CUSTOMER	57.25	0.00	834.71
			CATEGORY	57.25	0.00	834.71

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAG	GE 1 - 22	1
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC	C NURSING HOMEW/	O WALLS (LT
		SALES REGISTER		BII	LL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	TAX AMT	AMOUNT TYP	SURPLUS
174789 11/25/11	000008 VISITING NURSE SERVI	CE QUIZHPI, MARIA	42.00		612.36 I	
		CATEGORY	42.00	0.00	612.36	

RUN DATE 11/30/11 - SUP S SALES JRNL # 0257 LOC 0		REG NY NY			PAGE 1 - 22 VCP CHOICE LHCSA	2
		LES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174790 11/25/11 00000	8 VISITING NURSE SERVICE	RAINEY, JOHNNIE	47.75		696.20 I	
		CATEGORY	 47.75	0.00	 696.20	

RUN DATE 11/30/	'11 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 223	
SALES JRNL # 02	257 LOC 001		REG NY NY			LAP LOMBARDI AIDES PEDIATRIC	
			SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174791 11/25/	11 000008	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

I	RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	4
5	SALES JRN	ъ # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				S	SALES REGISTER			BILL WEEK ENDING	12/02/11
-	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
-	174792	11/25/11	800000	VISITING NURSE SERVICE	RAMIREZ, FLORA	1.00		14.58 I	
					CATEGORY	1.00	0.00	14.58	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING	- 225 HOMEW/O WALLS (LT DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174793 11/25/11 174794 11/18/11 174795 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMIREZ, JUANA RAMLALL, LILOWT RAMLALL, LILOWT	39.00 5.00 25.00		568.62 72.90 364.50	I I
			CUSTOMER	69.00	0.00	1,006.02	
			CATEGORY	69.00	0.00	1,006.02	

RUN DATE 11/30/1	l – SUP SUNI	NYSIDE CITYWIDE				PAGE 1 -	226
SALES JRNL # 025	7 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
		S	ALES REGISTER			BILL WEEK ENDIN	IG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
154506 11 (05 (1)				10.00		145.00	
174796 11/25/1	1 000008	VISITING NURSE SERVICE	RAMOS, IRIS	10.00		145.80	
			CAREGODY	10.00	0.00	145 00	
			CATEGORY	10.00	0.00	145.80	

				YSIDE CITYWIDE					227
12	SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AUR ADULT REHA BILL WEEK ENDI	-
								DIDD WEEK BROI	10 12/02/11
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
1	L74797	11/25/11	800000	VISITING NURSE SERVICE	RAMOS, JENNIFER	45.00		656.10	I
					CATEGORY	45.00	0.00	656.10	

RUN DATE 11/30/11 -	SUP SUNNYSIDE	E CITYWIDE				PAGE 1 -	228
SALES JRNL # 0257	LOC 001 SUN	NYSIDE CITYWIDE R	EG NY NY			ADU ADULT	
		S A L	ES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO CUST	COMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174798 11/25/11	000008 VISI	TING NURSE SERVICE	DAMOG TODGE	6.00		87.48 I	
1/4/98 11/25/11	000008 VISI	IING NURSE SERVICE	RAMOS, JORGE	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	
			CATEGORI	0.00	0.00	07.10	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174799 11/25/11 174800 11/25/11 174801 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMPHAL, INDRIA RANDAZZO, ROSAL REINA, JOSE	12.00 16.00 18.50		174.96 I 233.28 I 269.75 I	
			CUSTOMER	46.50	0.00	677.99	
			CATEGORY	46.50	0.00	677.99	

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE				PAGE 1 - 230
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
	S A	LES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
154000 11/05/11	000000	D.T.G.G.T.D.D.T.T.O. G.T.	2 00		42 84 -
174802 11/25/11	000008 VISITING NURSE SERVICE	RICCARDELLO, SI	3.00		43.74 I
		CAMEGODY	2 00	0.00	42.74
		CATEGORY	3.00	0.00	43.74

		REG NY NY SALES REGISTER		PAGE 1 - 231 VCP CHOICE LHCSA BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174803 11/25/11	000008 VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00	291.60 I
		CATEGORY	20.00 0.00	291.60

RUN DATE 11/30/11						PAGE 1 - 232	
SALES JRNL # 0257	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW/O W BILL WEEK ENDING 12/	•
		•	SALES REGISIER			BILL WEEK ENDING 12/	02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	IRPLUS
174804 11/25/11	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	233
SALES JRN	IL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
			5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174805	11/25/11	800000	VISITING NURSE SERVICE	RIVERA, ERNESTO	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 234	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	S (LT
		Ş	SALES REGISTER			BILL WEEK ENDING 12/02/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JS
174806 11/25/11	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	235
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174807	11/25/11	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 236 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
174808 11/25/11 174809 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		36.00 8.00	524.88 I 116.64 I
		CUSTOMER	44.00 0.	00 641.52
		CATEGORY	44.00 0.	00 641.52

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 237 VCP CHOICE LHCSA BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174810 11/25/11	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	35.00		510.30 I
			CATEGORY	35.00	0.00	510.30

RUN DATE 11/30	/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	238
SALES JRNL # (257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		5	SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174811 11/25	5/11 000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE	11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	239
SALES JRN	ъ # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			5	SALES REGIS	STER		BILL WEEK ENDIN	NG 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174812	11/25/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, F	FERM 16.00		233.28	[
				CATEGO	DRY 16.00	0.00	233.28	

- 1	RUN DATE 11 SALES JRNL			SIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - CCL CONGREGATE BILL WEEK ENDI	CARE PROGRAM
	INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	174813 11	/25/11 00	80000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	72.00		1,049.76	I
					CATEGORY	72.00	0.00	1,049.76	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 241 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP SURPLUS
174814 11/18/11 174815 11/25/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	•	10.00 20.00	145.80 I 291.60 I
		CUSTOMER	30.00 0	.00 437.40
		 CATEGORY	30.00 0	.00 437.40

RUN DATE 11/30/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 2	42
SALES JRNL # 0257	LOC 001		REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174816 11/25/11	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	49.00		714.42 I	
			CATEGORY	49.00	0.00	714.42	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING E	- 243 HOMEW/O WALLS (LT DING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174817 11/25/11 174818 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	. ~	40.00 31.75		583.20 462.92	I I
			CUSTOMER	71.75	0.00	1,046.12	
			CATEGORY	71.75	0.00	1,046.12	

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE			PAGE 1	. – 244
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE I	HCSA
	S	ALES REGISTER		BILL WEEK EN	IDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	X AMT AMOUNT	TYP SURPLUS
174819 11/25/11	000008 VISITING NURSE SERVICE	ROMERO, SANTHY	47.75	696.20	I
		CATEGORY	47.75	0.00 696.20	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 245 LTC NURSING HOMEW/O WALLS BILL WEEK ENDING 12/02/	•
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	AX AMT	AMOUNT TYP SURPL	JS
174820 11/25/11 174821 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	, -	40.00 40.00		583.20 I 583.20 I	
		CUSTOMER	80.00	0.00	1,166.40	
		CATEGORY	80.00	0.00	1,166.40	

			YSIDE CITYWIDE	DEC NV	NT37			-	- 246	
SALES JRN	IL # U25/	LOC 001	SUNNYSIDE CITYWIDE	_	NY EGISTE	D		ADU ADULT BILL WEEK EN	DING 12/02/1	1
				зацьз к	FGISIE	К		DILL MEEV EN	DING 12/02/1.	T
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU	S
	11/11/11 11/25/11	000008 000008	VISITING NURSE SERVICE		LUZ E	16.00 55.25		233.28	I	
1/4823	11/25/11	000008	VISITING NURSE SERVICE	RUSA,	LUZ E	35.45		805.56	1	_
					CUSTOMER	71.25	0.00	1,038.84		
					- CATEGORY	71.25	0.00	1,038.84		-

RUN DATE 11/30/11 -						PAGE 1 -	247
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		S	SALES REGISTER			BILL WEEK ENDIN	G 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174824 11/25/11	000008	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28 I	
174825 11/25/11	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	28.25		411.89 I	
174826 11/18/11	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	5.00		72.90 I	
174827 11/25/11	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	29.00		422.82 I	
			CUSTOMER	78.25	0.00	1,140.89	
			CATEGORY	78.25	0.00	1,140.89	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE]	PAGE 1	- 248
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITY	WIDE REG NY	NY		i	ADU ADULT	
		SALES R	REGISTER]	BILL WEEK END	ING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REF	FERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174828 11/25/11	000008 VISITING NURSE	CEDVICE BOCE	EN, BESSIE	15.00		218.70	т
174020 11/25/11	000000 VISITING NORSE	SERVICE ROSE	IN, BESSIE	15.00		210.70	1
			CATEGORY	15.00	0.00	218.70	

	11/30/11 - NL # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY BALES REGISTER			PAGE 1 - 2 HOA HOSPICE ADULT BILL WEEK ENDING	1
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174829	11/25/11	800000	VISITING NURSE SERVICE	RUBERTO, MARY	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 250 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174830 11/25/11 174831 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		4.00 15.00		58.32 I 218.70 I
		CUSTOMER	19.00	0.00	277.02
		CATEGORY	19.00	0.00	277.02

	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 251
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA
	2	SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174832 11/25/11	000008 VISITING NURSE SERVICE	RUEDA, INES	24.75	360.86 I
		CATEGORY	24.75 0.00	360.86

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R		PAGE 1 - 252 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174833 11/25/11	000008 VISITING NURSE SERVICE	RUSSO, MONICA	70.00	1,020.60 I
		CATEGORY	70.00 0.00	1,020.60

RUN DATE 11	./30/11 - SUP	SUNNYSI	IDE CITYWIDE				PAGE 1	- 25	3
SALES JRNL	# 0257 LOC	001 S	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/	O WALLS (LT
			S A	ALES REGISTER			BILL WEEK END	ING	12/02/11
INVOICE#	DATE CUS'	T NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174834 11	./25/11 000	008 VI	ISITING NURSE SERVICE	SAAVEDRA, STELL	33.25		484.79	I	
				CATEGORY	33.25	0.00	484.79		

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 254
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174835 11/25/11	800000	VISITING NURSE SERVICE	SAKELL, CHRYSAN	42.00		612.36 I
			CATEGORY	42.00	0.00	612.36

RUN DATE 11/30/11 - SUP	SUNNYSIDE CITYWIDE			PAGE 1 - 255
SALES JRNL # 0257 LOC	001 SUNNYSIDE CITYWIDE REG			VCP CHOICE LHCSA
	S A L E	S REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174836 11/25/11 0000	008 VISITING NURSE SERVICE	SALADIN, MARIA	73.50	1,071.63 I
		CATEGORY	73.50 0.00	1,071.63

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEV BILL WEEK ENDING	V/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174837 11/25/11	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	22.00		320.76 I	
			CATEGORY	22.00	0.00	320.76	

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 257
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	!SA
			S	ALES REGISTER			BILL WEEK ENDI	ING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
174838	11/25/11	000008	VISITING NURSE SERVICE	SALVUCCI, YOLAN	16.00		233.28	I
174839	11/18/11	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	8.00		116.64	I
174840	11/25/11	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	20.00		291.60	I
174841	11/04/11	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	7.00		102.06	I
174842	11/25/11	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	42.00		612.36	I
				CUSTOMER	93.00	0.00	1,355.94	
				CATEGORY	93.00	0.00	1,355.94	

RUN DATE 11/30/13	1 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 258
SALES JRNL # 025	7 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		S	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174843 11/25/13	1 000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	24.00		349.92 I
			CATEGORY	24.00	0.00	349.92

RUN DATE 11/30/1	1 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	259
SALES JRNL # 025	7 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	3 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174844 11/25/1	1 000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 1	L1/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 260	
SALES JRNI	± # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174845 1	11/25/11	800000	VISITING NURSE SERVICE	SANDOVAL, FANNY	11.75		171.32 I	
				CATEGORY	11.75	0.00	171.32	

RUN DATE 11/30/11 -						PAGE 1 - 261
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		2	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174846 11/25/11	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	16.00		233.28 I
174847 11/25/11	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	24.00		349.92 I
			CUSTOMER	40.00	0.00	583.20
			CATEGORY	40.00	0.00	583.20

RUN DATE 11/30/11 - SALES JRNL # 0257		REG NY NY S A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174848 11/25/11	000008 VISITING NURSE SERVICE	E SEO, INJA	18.00		262.44 I	
		CATEGORY	18.00	0.00	262.44	

RUN DATE	11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 263
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
			S	SALES REGISTER			BILL WEEK END	DING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174849	11/18/11	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	24.00		349.92	I
174850	11/25/11	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	46.75		681.62	I
174851	11/25/11	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	54.50		794.61	I
174852	11/25/11	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	28.00		408.24	I
174853	11/25/11	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	4.00		58.32	I
				CUSTOMER	157.25	0.00	2,292.71	
				CATEGORY	157.25	0.00	2,292.71	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			-	- 264 OMEW/O WALLS (LT ING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
174854 10/14/11 174855 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	6.00 42.00		87.48 612.36	I I
		CUSTOMER	48.00	0.00	699.84	
		CATEGORY	48.00	0.00	699.84	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001		REG NY NY			PAGE 1 - 265 VCP CHOICE LHCSA
SALES URNL # U257	TOC 001		BALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174856 11/25/11 174857 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, JAMOONIE	28.00 15.00		408.24 I 218.70 I
			CUSTOMER	43.00	0.00	626.94
			CATEGORY	43.00	0.00	626.94

			YSIDE CITYWIDE				PAGE 1 - 26	56
SALES JRNI	L # U25/	LOC 001	SUNNYSIDE CITYWIDE RI	EGNY NY ES REGISTER			ADU ADULT BILL WEEK ENDING	12/02/11
		~~						
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174858	11/25/11	800000	VISITING NURSE SERVICE	SMELTZER, ESTEL	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	267
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	
		\$	SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
174859 11/25/11	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90	I
			CATEGORY	5.00	0.00	72.90	

			YSIDE CITYWIDE				PAGE 1 - 268	
SALES J	RNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRA	
			S	SALES REGISTER			BILL WEEK ENDING 12/02/11	L
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	5
174860	11/25/11	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	8.00		116.64 I	
								_
				CATEGORY	8.00	0.00	116.64	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 269
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	i	SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174861 11/25/11	000008 VISITING NURSE SERVICE	SORIA, ROLANDO	30.00	437.40 I
		CATEGORY	30.00 0.00	437.40

RUN DATE 11/30/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	- 270
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			SALES REGISTER			BILL WEEK END	ING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
174060 11/05/11	000000	VICIALNO MIDOE CEDVICE	CHAIGED CHEDIA	10 00		174 06	T
174862 11/25/11	000008	VISITING NURSE SERVICE	STALZER, STEPHA	12.00		174.96	T
			CATEGORY	12.00	0.00	174.96	
			CAIDORI	12.00	0.00	171.50	

RUN DATE	11/30/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 271	L	
SALES JRN	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LH			
			S	3 A L E S	REGISTER			BILL WEEK END	DING 1	12/02/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
174863	11/25/11	800000	VISITING NURSE SERVICE	ST	'AMBOULIDIS, V	55.75		812.84	I		
					CATEGORY	55.75	0.00	812.84			

				YSIDE CITYWIDE						- 2	. –	
SAL	ES JRN	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE			
				:	SALES R	EGISTER			BILL WEEK EN	DING	12/02/11	
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
174	864	11/25/11	800000	VISITING NURSE SERVICE	STEI	N, STEPHANI	21.00		306.18	I		
						CATEGORY	21.00	0.00	306.18			

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 273 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174865 11/18/11 174866 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		1.00		14.58 I 58.32 I
			CUSTOMER	5.00	0.00	72.90
			CATEGORY	5.00	0.00	72.90

RUN DATE 11/30/11 -						PAGE 1 - 274	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		\$	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174867 11/25/11	000008	VISITING NURSE SERVICE	STICKELL, BLANC	13.50		196.83 I	
174868 11/25/11	800000	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88 I	
			CUSTOMER	49.50	0.00	721.71	
			COSTOMER	49.50	0.00	/21./1	
			CATEGORY	49.50	0.00	721.71	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 275 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
174869 11/18/11 174870 11/25/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		4.00 15.75	58.32 I 229.64 I
		CUSTOMER	19.75 0.	00 287.96
		CATEGORY	19.75 0.	 00 287.96

	11 - SUP SUNNYSIDE CITYWIDE 57 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AN	MT AMOUNT TYE	P SURPLUS
174871 11/25/	11 000008 VISITING NURSE SERVICE	TABOADA, ELIZAB	52.75	769.10 I	
		CATEGORY	52.75 0.0	769.10	

RUN DATE 11/30	/11 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - 2	77
SALES JRNL # 0	257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174872 11/25	/11 000008	VISITING NURSE SERVICE	TACITO, CONSTAN	12.00		174.96 I	
			CATEGORY	12.00	0.00	 174.96	

RUN DATE 11/30/11 - SALES JRNL # 0257		REGNY NY SALES REGISTER		PAGE 1 - 278 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	AMOUNT TYP SURPLUS
174873 11/25/11	000008 VISITING NURSE SERVICE	TADDEO, LENA	48.00	699.84 I
		CATEGORY	48.00 0.00	699.84

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 279	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 1	2/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174874 11/25/11	800000	VISITING NURSE SERVICE	TAVANO, SILVIA	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11	L/30/11 -	SUP SUNNY	SIDE CITYWIDE				PAGE 1 - 2	80
SALES JRNL	# 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174875 11	L/25/11	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 ADU ADULT BILL WEEK ENI	- 281 DING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUNT	TYP SURPLUS
174876 11/25/11	000008 VISITING NURSE SERVI	CE TEJADA, BALDOME	16.00	233.28	I
		CATEGORY	 16.00	0.00 233.28	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK END	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
174877 11/25/11	800000	VISITING NURSE SERVICE	TEMBELIS, DAPHN	15.00		218.70	I
			CATEGORY	15.00	0.00	218.70	

RUN DATE 11/30/11 SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 28 VCP CHOICE LHCSA BILL WEEK ENDING	33 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174878 11/25/11 174879 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 35.00		437.40 I 510.30 I	
			CUSTOMER	65.00	0.00	947.70	
			CATEGORY	65.00	0.00	947.70	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 284 ADU ADULT BILL WEEK ENDING 12/02/1	1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
174880 11/25/11 174881 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	9.00 19.75		131.22 I 287.96 I	
			CUSTOMER	28.75	0.00	419.18	_
			CATEGORY	28.75	0.00	419.18	-

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	285
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		Ş	SALES REGISTE:	R		BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174882 11/25/11	000008	VISITING NURSE SERVICE	TORO, PURA	84.00		1,224.72 I	
174883 11/25/11	800000	VISITING NURSE SERVICE	TORRES, EMELINA	25.00		364.50 I	
174884 11/04/11	800000	VISITING NURSE SERVICE	TORRES, LUZ M	10.00		145.80 I	
174885 11/25/11	800000	VISITING NURSE SERVICE	TORRES, LUZ M	68.00		991.44 I	
			CUSTOMER	187.00	0.00	2,726.46	
			CATEGORY	187.00	0.00	2,726.46	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	E R				/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174886 11/04/11 174887 11/25/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 30.00		87.48 437.40	I	
			CUSTOMER	36.00	0.00	524.88		
			- CATEGORY	36.00	0.00	524.88		

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174888 11/25/11 174889 11/11/11 174890 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TSOLISOS, FOTIN	20.00 8.00 56.00		291.60 116.64 816.48	I I
			CUSTOMER	84.00	0.00	1,224.72	
			CATEGORY	84.00	0.00	1,224.72	

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE			PAG.	E 1 -	288
SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC	NURSING HOM	EW/O WALLS (LT
	SALES REGISTER		BIL	L WEEK ENDING	G 12/02/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174891 11/25/11 000008 VISITING NURSE SERVICE	TSUAI, PING	20.00		291.60 I	
	CATEGORY	20.00	0.00	291.60	

	30/11 - SUP SUNN		222				289
SALES JRNL #	0257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
		5	ALES KEGISTEK			DILL WEEK ENDING	12/02/11
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174892 11/	25/11 000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	32.00		466.56 I	
			CATEGORY	32.00	0.00	466.56	

RUN DATE 11/30/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 290	
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
		SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174893 11/25/11	000008 VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
		CATEGORY	35.00	0.00	510.30	

RUN DATE 11/30/11 SALES JRNL # 0257	- SUP SUN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174894 11/25/11	000008	VISITING NURSE SERVICE	VALENCIANO-ROJ,	31.75		462.92 I	
			CATEGORY	31.75	0.00	462.92	

	30/11 - SUP SUNN					PAGE 1 -	
SALES JRNL #	0257 LOC 001		REG NY NY			CCL CONGREGATE C	
		i	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174895 11/	25/11 000008	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE				PAGE 1 - 293 LTC NURSING HOMEW/O WALLS (LT
	SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174896 11/25/11 000008 VISITING NURSE SERV 174897 11/25/11 000008 VISITING NURSE SERV		3.75 4.00		54.68 I 58.32 I
	CUSTOMER	7.75	0.00	113.00
	 CATEGORY	7.75	0.00	113.00

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
		_	SALES REGISTER			BILL WEEK ENDI	
INVOICE# DATE		JSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP SURPLUS
174898 11/25/11	000008 VI	ISITING NURSE SERVICE	VASQUEZ, ARTURO	40.50		590.49	I
			CATEGORY	40.50	0.00	590.49	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 295 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174899 11/25/11 174900 11/25/11	000008 VISITING NURSE SERVICE 0000008 VISITING NURSE SERVICE	~ ~ ,	33.00 18.00	481.14 I 262.44 I
		CUSTOMER	51.00 0.00	743.58
		CATEGORY	51.00 0.00	743.58

RUN DATE 11/30/11 -			556 377			PAGE 1 -	2,0
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHO	
						DIED WEEK BRD	110 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
174901 11/11/11	800000	VISITING NURSE SERVICE	VAZIRANI, CHAND	4.00		58.32	I
174902 11/18/11	800000	VISITING NURSE SERVICE	VAZIRANI, CHAND	4.00		58.32	I
174903 11/25/11	800000	VISITING NURSE SERVICE	VAZIRANI, CHAND	8.00		116.64	I
			CUSTOMER	16.00	0.00	233.28	
				16.00			
			CATEGORY	16.00	0.00	233.28	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	297
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174904 11/25/11	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20 I	
			CATEGORY	40.00	0.00		

RUN DATE 11/3	30/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	298
SALES JRNL #	0257 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	<u>.</u>
		5	SALES REGISTER			BILL WEEK ENDING	12/02/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174905 11/2	25/11 000008	VISITING NURSE SERVICE	VELASQUEZ, NELL	16.00		233.28 I	
			CATEGORY	16.00	0.00	233.28	

		NYSIDE CITYWIDE					299
SALES JRNL # (1257 LOC 001		REG NY NY			LTC NURSING HOM	
		:	SALES REGISTER			BILL WEEK ENDIN	IG 12/02/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
174906 11/2	5/11 000008	VISITING NURSE SERVICE	VENTURA, ROSA	46.50		677.97 I	
			CATEGORY	46.50	0.00	677.97	

RUN DATE 11/30/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 300	
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING 1	2/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174907 11/25/11	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 11/30/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 301	
SALES JRNL # 0257	LOC 001		REG NY NY			HOA HOSPICE ADULT	
		:	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174908 11/25/11	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	302
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTER			BILL WEEK ENDING	12/02/11
TARKOT GRU DA MR	CIICE NO	CHCHOMED MANE	DEFEDENCE	HOHD	max ave	AMOUNT THE	GIID DI 11G
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174909 11/25/11	000008	VISITING NURSE SERVICE	VILLA, AGNES	7.00		102.06 I	
174505 11/25/11	000000	VISITING NORSE SERVICE	VILLA, AGNES	7.00		102.00 1	
			CATEGORY	7.00	0.00	102.06	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNNYSIDE CITYWID LOC 001 SUNNYSIDE C					PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO CUSTOMER NAM	E	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174910 11/25/11	000008 VISITING NUR	SE SERVICE	VILLAPOL, ANNA	18.00		262.44	I
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/30/1						PAGE 1 - 304	=
SALES JRNL # 025	7 LOC 001		REG NY NY			CCL CONGREGATE CARE	
		:	SALES REGISTER			BILL WEEK ENDING 1	12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
174911 11/25/1	1 000008	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE 11/30/11 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 305
SALES JRNL # 0257	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	5	SALES REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174912 11/25/11	000008 VISITING NURSE SERVICE	VITO, CARMEN	24.00	349.92 I
		CATEGORY	24.00 0.00	349.92

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	306
SALES UNIL # 0237	HOC 001		SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174913 11/18/11 174914 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VIVACQUA, EMMA VIVACQUA, EMMA	6.00 44.00		87.48 641.52	I I
			CUSTOMER	50.00	0.00	729.00	
			CATEGORY	50.00	0.00	729.00	

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 307 VCP CHOICE LHCSA
DALLO GIAVE # 0257	HOC 001		SALES REGISTER			BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
174915 11/25/11 174916 11/25/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	16.00 36.00		233.28 I 524.88 I
			CUSTOMER	52.00	0.00	758.16
			CATEGORY	52.00	0.00	758.16

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 308 ADU ADULT BILL WEEK ENDING 12/02/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
174917 11/25/11	000008 VISITING NURSE SERVICE	WERNER, PHYLLIS	4.00	58.32 I
		CATEGORY	4.00 0.00	58.32

RUN DA	ΓΕ 11/30/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	309
SALES 0	JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			\$	SALES REGISTER			BILL WEEK ENDI	NG 12/02/11
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
174918	11/25/11	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	15.75		229.64	Ι
				CATEGORY	15.75	0.00	229.64	

RUN DATE	11/30/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 310	
SALES JR	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
			5	SALES REGISTER			BILL WEEK ENDING 12/02/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
174919	11/25/11	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/30/11						PAGE 1	~
SALES JRNL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
			SALES REGISTER			BILL WEEK END	ING 12/02/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
174920 11/04/11	000008	VISITING NURSE SERVICE	YOUSSEFF, NADIA	3.00		43.74	I
174921 11/25/11	800000	VISITING NURSE SERVICE	YOUSSEFF, NADIA	3.50		51.03	I
			CUSTOMER	6.50	0.00	94.77	
			CATECORY	 6	0.00	04 77	
			CATEGORY	6.50	0.00	94.77	

RUN DATE 11/30/11 - SALES JRNL # 0257		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 312 ADU ADULT BILL WEEK ENDING 12/0	2/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
174922 11/18/11 174923 11/25/11 174924 11/25/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE		2.00 4.00 19.25		29.16 I 58.32 I 280.67 I	
			CUSTOMER	25.25	0.00	368.15	
			CATEGORY	25.25	0.00	368.15	

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET
SALES R E G I S T E R BILL WEEK ENDING 12/02/11

				SALES REGISTER			BILL WEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE ACERNO, CLAIRE ALI, AMRUNISSA AYALA, ENRIQUE BEGUM, JAMILA BRADLEY, MARGAR BUCARO, CONCETT CEPEDA, TOMASA COLAVITTI, JEAN DIAZ, ALICIA DONOSO, MARGARE EARLINGTON, ALB ESPINOZA, MARIA EXPOSITO, ALFON FELICIANO, JOAN FERNANDEZ, ANA GREENSPAN, ALIC JIMENEZ, EUGENI JOHNSON, DOROTH LATVIS, CHARLES MANGRAY, KARMAD MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, GLORI MICHEL, DOROTHY MOSCICKA, JADWI MUSCAT, CARMEN NETTLES, DONNA NEWBOLD, RAMONA NISHIMURA, ALBE NUNEZ, ANGELINA ORTIZ, LAURA PAPHITIS, RICHA PAZIOULIS, GEOR PAZIOULIS, KLEO PENA, WALESKA PEREZ, MARIA PICHARDO, MARIA PROANO, ALICIA PROANO, BRUNO PRYCE, CLYDIA RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, ANGEL ROJAS, ANGEL ROJAS, HAYDEE SALJANIN, DILJA SANCHEZ, ELIZAB SHELTON, AGUEDA SHIRKES, MIRIAM SOMRAJ, UMILLA	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174925	11/25/11	000010	GUILDNET	ACERNO, CLAIRE	15.00		199.20	I	
174926	11/25/11	000010	GUILDNET	ALI, AMRUNISSA	16.00		212.48	I	
174927	11/25/11	000010	GUILDNET	AYALA, ENRIQUE	35.50		471.44	I	
174928	11/25/11	000010	GUILDNET	BEGUM, JAMILA	64.00		849.92	I	
174929	11/25/11	000010	GUILDNET	BRADLEY, MARGAR	7.00		1,260.00	I	
174930	11/25/11	000010	GUILDNET	BUCARO, CONCETT	35.50		471.44	I	
174931	11/25/11	000010	GUILDNET	CEPEDA, TOMASA	30.00		398.40	I	
174932	11/25/11	000010	GUILDNET	COLAVITTI, JEAN	48.00		637.44	I	
174933	10/07/11	000010	GUILDNET	DIAZ, ALICIA	52.00		690.56	I	
174934	11/25/11	000010	GUILDNET	DONOSO, MARGARE	24.00		318.72	I	
174935	11/25/11	000010	GUILDNET	EARLINGTON, ALB	40.00		531.20	Ī	
174936	11/25/11	000010	GUILDNET	ESPINOZA, MARIA	45.00		597.60	Ī	
174937	11/25/11	000010	GUILDNET	EXPOSITO, ALFON	32.00		424.96	Ī	
174938	11/25/11	000010	GUILDNET	FELICIANO, JOAN	38.00		504.64	Ī	
174939	11/25/11	000010	GUILDNET	FERNANDEZ, ANA	16.00		212.48	Ī	
174940	11/25/11	000010	GUILDNET	GREENSPAN, ALIC	35.00		464.80	Ī	
174941	11/25/11	000010	GUILDNET	TIMENEZ, EUGENT	67.00		889.76	Ī	
174942	11/25/11	000010	GUILDNET	JOHNSON, DOROTH	68.00		903.04	Ī	
174943	11/25/11	000010	GUILDNET	LATVIS. CHARLES	7.00		1.260.00	Ī	
174944	11/25/11	000010	GUILDNET	MANGRAY, KARMAD	39.75		527.88	Ī	
174945	11/25/11	000010	GUILDNET	MARTINEZ EMMA	36.00		478.08	Ī	
174946	11/25/11	000010	GUILDNET	MARTINEZ GLORI	9 50		126 16	Ī	
174947	11/25/11	000010	GUILDNET	MICHEL DOROTHY	51 00		677 28	Ī	
174948	11/25/11	000010	GUILDNET	MOSCICKA JADWI	24 00		318 72	Ī	
174949	11/25/11	000010	GUILDNET	MUSCAT. CARMEN	15.00		199.20	Ī	
174950	11/25/11	000010	GUILDNET	NETTLES DONNA	8.00		106.24	Ī	
174951	11/25/11	000010	GUILDNET	NEWBOLD, RAMONA	25.00		332.00	Ī	
174952	11/25/11	000010	GUILDNET	NISHIMURA, ALBE	66.00		876.48	Ī	
174953	11/25/11	000010	GUILDNET	NUNEZ, ANGELINA	20.00		265.60	Ī	
174954	11/25/11	000010	GUILDNET	ORTIZ, LAURA	63.00		836.64	Ī	
174955	11/25/11	000010	GUILDNET	PAPHITIS, RICHA	32.00		424.96	Ī	
174956	11/25/11	000010	GUILDNET	PAZIOULIS, GEOR	42.00		557.76	Ī	
174957	11/25/11	000010	GUILDNET	PAZIOULIS. KLEO	35.00		464.80	Ī	
174958	11/25/11	000010	GUILDNET	PENA, WALESKA	16.00		212.48	Ī	
174959	11/25/11	000010	GUILDNET	PEREZ. MARIA	30.00		398.40	Ī	
174960	11/25/11	000010	GUILDNET	PICHARDO, MARIA	63.00		836.64	Ī	
174961	11/25/11	000010	GUILDNET	PROANO, ALICIA	18.00		239.04	Ī	
174962	11/25/11	000010	GUILDNET	PROANO, BRUNO	28.00		371.84	Ī	
174963	11/25/11	000010	GUILDNET	PRYCE, CLYDIA	10.00		132.80	Ī	
174964	11/25/11	000010	GUILDNET	RESTULA, VINCEN	12.00		159.36	Ī	
174965	11/25/11	000010	GUILDNET	RIVAS. GERTRUDI	4.00		53.12	Ī	
174966	11/25/11	000010	GUILDNET	RODRIGHEZ HOLG	49.00		650.72	Ī	
174967	11/25/11	000010	GUILDNET	ROJAS, ANGEL	12.00		159.36	Ī	
174968	11/25/11	000010	GUILDNET	ROJAS HAYDEE	20.00		265.60	Ī	
174969	11/25/11	000010	GUILDNET	SAI TANTN DII TA	59.00		783.52	Ī	
174970	11/11/11	000010	GUILDNET	SANCHEZ, ELIZAR	51.00		677.28	Ī	
174971	11/25/11	000010	GUILDNET	SHELTON AGUEDA	28.00		371.84	Ī	
174972	11/25/11	000010	GUILDNET	SHIRKES, MIRIAM	60.00		796.80	Ī	
174973	11/11/11	000010	GUILDNET	SOMRAJ. IMILIJA	1.00		13.28	Ī	
1 1 1 7 7 3	//	000010	COLLDINGI	DOPINAO, OPILIDA	1.00		13.20	_	

RUN DATE 11/3 SALES JRNL #	30/11 - SUP SUNN 0257 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGIST	E R		PAGE 2 GUI GUILDNET BILL WEEK EN	- 314 DING 12/02/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
174975 11/2 174976 11/2 174977 11/2 174978 11/2 174979 11/2 174980 11/2	18/11 000010 25/11 000010 25/11 000010 25/11 000010 25/11 000010 25/11 000010 25/11 000010 25/11 000010	GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET	TOROSSIAN, PARI VILLACRES, LUZ VLAHOS, MARIE WEISZ, KLARA WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIF ZUMAETA, FANNY	8.00 69.50 8.00 20.00 24.00		335.32 106.24 922.96 106.24 265.60 318.72 1,260.00 982.72	I I I I I I
			CUSTOMER	1,838.00	0.00	27,909.76	
			CATEGORY	1,838.00	0.00	27,909.76	

	: 11/30/11 :NL # 0257		YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 HFS HEALTH F	- 3	15
SALES UR	ш # 0257	TOC 001	SUNNISIDE CITIWIDE	SALES REGISTER	R		BILL WEEK EN		12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
174982	11/25/11	000122	HEALTH FIRST	AUER, BARBARA	15.00		253.20	I	
174983	11/25/11	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
174984	11/25/11	000122	HEALTH FIRST	BHAIRO, KOWSILI	48.00		810.24	I	
174985	10/28/11	000122	HEALTH FIRST	BOWERS, DIANE	60.00		1,012.80	I	
174986	11/25/11	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
174987	11/18/11	000122	HEALTH FIRST	CARRION, MARIA	64.00		1,080.32	I	
174988	11/25/11	000122	HEALTH FIRST	CEBALLOS, ANA	30.00		506.40	I	
174989	11/25/11	000122	HEALTH FIRST	CHARITAR, RAMKA	25.00		422.00	I	
174990	11/25/11	000122	HEALTH FIRST	DORNELLAS, STEL	19.75		333.38	I	
174991	11/25/11	000122	HEALTH FIRST	ESPAILLAT, AMPA	20.00		337.60	I	
174992	11/25/11	000122	HEALTH FIRST	ESTEVES, JOSE	53.75		907.30	I	
174993	11/25/11	000122	HEALTH FIRST	FERGERSON, TINA	25.00		422.00	I	
174994	11/25/11	000122	HEALTH FIRST	FERRERA, FRANCI	6.00		101.28	I	
174995	11/18/11	000122	HEALTH FIRST	FONTANES, PEDRO	40.00		675.20	I	
174996	11/25/11	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
174997	11/25/11	000122	HEALTH FIRST	HENRY, BRENDA	4.00		67.52	I	
174998	11/25/11	000122	HEALTH FIRST	KAUR, HARBANS	14.00		236.32	I	
174999	11/11/11	000122	HEALTH FIRST	LARA, TOMASA	36.00		607.68	I	
175000	11/25/11	000122	HEALTH FIRST	LAZALA, GLADYS	84.00		1,440.60	I	
175001	11/25/11	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	66.00		1,114.08	I	
175002	11/25/11	000122	HEALTH FIRST	MACARENA, SAHAR	63.00		1,063.44	I	
175003	11/25/11	000122	HEALTH FIRST	MARTIN, ARIANA	8.00		135.04	I	
175004	11/25/11	000122	HEALTH FIRST	RIVERA, CHRISTO	18.00		303.84	I	
175005	11/25/11	000122	HEALTH FIRST	RIVERA, EDDIE	18.00		308.70	I	
175006	11/25/11	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
175007	11/25/11	000122	HEALTH FIRST	RUIZ JR, SAMUEL	13.00		219.44	I	
175008	11/25/11	000122	HEALTH FIRST	SALAZAR, LUZ MA	47.00		793.36	I	
175009	11/25/11	000122	HEALTH FIRST	SALHUANA, YOLAN	12.00		202.56	I	
175010	11/25/11	000122	HEALTH FIRST	SPIVEY, PATRICI	4.00		67.52	I	
175011	11/25/11	000122	HEALTH FIRST	ST ROMAINE, CLA	56.00		945.28	I	
175012	11/25/11	000122	HEALTH FIRST	SURIEL, GERTRUD	20.00		337.60	I	
175013	11/25/11	000122	HEALTH FIRST	TEJADA, PAULA	23.25		392.46	I	
175014	11/25/11	000122	HEALTH FIRST	WILLIAMS, RODNE	12.00		202.56	I	
				REFERENCE AUER, BARBARA BEGUM, MANWARA BHAIRO, KOWSILI BOWERS, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH HENRY, BRENDA KAUR, HARBANS LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD TEJADA, PAULA WILLIAMS, RODNE	1,048.75	0.00	17,730.44		
				CATEGORY	1,048.75	0.00	17,730.44		

RUN DATI	E 11/30/11	- SUP SUNN	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1	- 3	16
SALES J	RNL # 0257	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			NHP NEIGHBORE	HOOD I	HEALTH
			S A L E	S REGISTER	5		BILL WEEK ENI	DING	12/02/11
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175015	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AHMED IIMARA	56 00		945 28	I	
175016	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AKHTAR, SELINA	48.00		810.24	Ī	
175017	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	ARDITTO, PATRIC	16.00		270.08	Ī	
175018	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	CHIKWILTIORAH. T	21.00		354.48	Ī	
175019	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DARWISH, NADIA	4.00		67.52	Ī	
175020	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
175021	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	8.00		135.04	I	
175022	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	70.00		1,181.60	I	
175023	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	35.50		599.24	I	
175024	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHALIL, RASHAN	28.00		472.64	I	
175025	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHEREI	35.00		590.80	I	
175026	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
175027	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	35.25		595.02	I	
175028	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	22.00		371.36	I	
175029	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, JESS	30.00		506.40	I	
175030	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
175031	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	52.25		881.98	I	
175032	11/18/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SANCHEZ, CHRIST	18.00		303.84	I	
175033	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
175034	11/18/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	82.00		1,384.16	I	
175035	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SUERO, MICHAEL	48.00		810.24	I	
175036	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	12.00		202.56	I	
175037	11/25/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	24.75		417.78	I	
				CUSTOMER	759.75	0.00	12,824.58		
							12,824.58		
				CLITECOICE	. 55 . 75	0.00	12,021.00		

RUN DATE	11/30/11 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 3:	17
SALES JRN	L # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY	l R		FID NY CATHO	LIC/F	IDELIS
				SALES	REGISTE	R		BILL WEEK EN	DING	12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	10/28/11	000126	NYS CATHOLIC/FIDELIS	BA	ATISTA, JOSE				I	
175039	11/25/11	000126	NYS CATHOLIC/FIDELIS	BA	ATISTA, JOSE	63.00		1,063.44	I	
175040	11/25/11	000126	NYS CATHOLIC/FIDELIS	BI	ERGES, MARITZA	40.00		675.20	I	
175041	11/25/11	000126	NYS CATHOLIC/FIDELIS	BO	CHENEK, JOLAN	42.00		708.96	I	
175042	11/25/11	000126	NYS CATHOLIC/FIDELIS	G1	IL, ALICIA M	24.00		405.12	I	
175043	11/25/11	000126	NYS CATHOLIC/FIDELIS	L	TMAN, GAIL	12.00		202.56	I	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		ARTINEZ, LUISA			1,417.92	I	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		JLLOKONDOVA, S	12.00		202.56	Ī	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		LIVAPUIG, CARM	16.00		270.08	I	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		ANOS, DESPINA			1,063.44	T	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		EREZ, MARIA E			202.56	T	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		AMOJEDNY, MICH	14.00		236.32	Ī	
	11/25/11	000126	NYS CATHOLIC/FIDELIS		ZE, BECKY			472.64	I	
	11/25/11	000120	NYS CATHOLIC/FIDELIS		ARGAS, RAQUEL	54.00		911.52	I	
1/3031	11/23/11	000120	NIS CAIHOLIC/FIDELIS	V F	AKGAS, KAQUEL	34.00		911.52	1	
					CUSTOMER	473.00	0.00	7,984.24		
					COSTOMER	1/3.00	0.00	7,304.24		
					_					
					CATEGORY	473.00	0.00	7,984.24		
1					CITTEGORT	1,3.00	3.00	,,,001.21		

	11/30/11 NL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 UHC UNITED HE	- 318 EALTH
				SALES REGISTE	3		BILL WEEK ENI	DING 12/02/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175052	11/25/11	000128	UNITED HEALTH CARE	CALDERON, MIGDA	42.00		720.72	I
175053	11/18/11	000128	UNITED HEALTH CARE	KHODZAUDIEV, NI	25.00		429.00	I
175054	10/07/11	000128	UNITED HEALTH CARE	LYMBERIS, HELEN	170.00		2,917.20	I
175055	11/25/11	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	32.00		549.12	I
175056	11/25/11	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	56.00		960.96	I
175057	11/25/11	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96	I
175058	11/25/11	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I
175059	10/07/11	000128	UNITED HEALTH CARE	ZANE, GEORGE	45.25		776.49	I
				CUSTOMER	454.25	0.00	7,794.93	
				CATEGORY	454.25	0.00	7,794.93	

RUN DATE 11/30/11 - SALES JRNL # 0257	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CI		C R		PAGE 1 - EHP EMBLEM HEAL BILL WEEK ENDIN	TH
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175060 11/25/11 175061 11/25/11 175062 11/25/11 175063 11/25/11	000114 EMBLEM HEALTH 000114 EMBLEM HEALTH 000114 EMBLEM HEALTH 000114 EMBLEM HEALTH	COPELAND, ELISE DE LA O, MARIA	84.00 30.00 14.00 45.00		1,176.00 I 427.50 I 196.00 I 630.00 I	
		CUSTOMER	173.00	0.00	2,429.50	
		CATEGORY	173.00	0.00	2,429.50	

RUN DATE 11/	30/11 - SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 32	20
SALES JRNL #	0257 LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			HIP HEALTH I	NSURAN	ICE PLAN
			SALE	S REGISTER			BILL WEEK EN	DING	12/02/11
INVOICE# D	ATE CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	25/11 000136	HEALTH INSURANCE PLAN	OF NY	BORLAZA, FRANCI	84.00		1,417.92	I	
175065 11/	25/11 000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	54.25		915.74	I	
175066 11/	25/11 000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	56.00		945.28	I	
175067 11/	18/11 000136	HEALTH INSURANCE PLAN	OF NY	GREGG, DAVID	29.50		497.96	I	
175068 11/	11/11 000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	36.00		607.68	I	
175069 11/	25/11 000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	28.75		485.30	I	
175070 11/	25/11 000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	16.00		270.08	I	
	25/11 000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	15.50		261.64	I	
	25/11 000136	HEALTH INSURANCE PLAN		ZAMBRANO, ZOILA	8.00		135.04	I	
,									
				CUSTOMER	328.00	0.00	5,536.64		
				CATEGORY	328.00	0.00	5,536.64		
1									

	UN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 321										
SALES JRI	NL # 0257	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HPS HEALTH PL				
				SALES REGISTER			BILL WEEK END	ING 12/02/11			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS			
175073	11/18/11	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	36.00		612.00	I			
175074	11/25/11	000138	HEALTH PLUS PHSP, INC	VAZQUEZ, ARCADI	4.00		68.00	I			
175075	11/25/11	000138	HEALTH PLUS PHSP, INC	VEGA, GLORIA	35.00		595.00	I			
175076	11/18/11	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	47.00		799.00	I			
175077	11/18/11	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	34.00		578.00	I			
				CUSTOMER	156.00	0.00	2,652.00				
				CATEGORY	156.00	0.00	2,652.00				

RUN DATE 11/30/11 - SALES JRNL # 0257	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - AFF AFFINITY HE BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175078 11/25/11 175079 11/18/11 175080 11/25/11	000142 000142 000142	AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS	HERNANDEZ, ANTO PURNELL, ROSE M VAMVAKAS, SOPHI	32.00 32.00 40.00		768.00 I 768.00 I 960.00 I	
			CUSTOMER	104.00	0.00	2,496.00	
			CATEGORY	104.00	0.00	2,496.00	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 MPH METROPLUS BILL WEEK ENI		LTH
INVOICE#	DATE	CUST NO	CUSTOMER NAME		HOURS	TAX AMT		TYP	SURPLUS
175081	11/25/11	000130	METROPLUS HEALTH	ABBAS, SENOWARA	84.00		1,440.60	I	
175082	11/18/11	000130	METROPLUS HEALTH	ANDERSON, BETH	47.00		806.05	I	
175083	11/25/11	000130	METROPLUS HEALTH	ARIAS, NORA	67.00		1,149.05	I	
175084	11/25/11	000130	METROPLUS HEALTH	BEDOYA, MONICA	25.00		428.75	I	
175085	11/25/11	000130	METROPLUS HEALTH	BESANT, NAOMI	30.00		514.50	I	
175086	11/25/11	000130	METROPLUS HEALTH	BRACERO, HELEN	82.00		1,406.30	I	
175087	11/25/11	000130	METROPLUS HEALTH	BEDOYA, MONICA BESANT, NAOMI BRACERO, HELEN BRIGGS, LOUIS	77.00		1,320.55	I	
175088	11/25/11	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25	I	
175089	11/25/11	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
175090	11/25/11	000130	METROPLUS HEALTH	DAVIS, ANGIE	84.00		1,440,60	I	
175091	11/25/11	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
175092	11/25/11	000130	METROPLUS HEALTH	DURAHAM, CYNTHI	16.00		274.40	I	
175093	11/25/11	000130	METROPLUS HEALTH	GALAS, TERESA	37.00		634.55	I	
175094	11/25/11	000130	METROPLUS HEALTH	MANIACI, VINCEN	84.00		1.440.60	I	
175095	11/25/11	000130	METROPLUS HEALTH	MATUTE-CALLE, R MURDOCK, GERTRU	82.00		1,406.30	I	
175096	11/25/11	000130	METROPLUS HEALTH METROPLUS HEALTH METROPLUS HEALTH	MURDOCK, GERTRU	16.00		274.40	I	
175097	11/25/11	000130	METROPLUS HEALTH	PERSAD, USHA	46.00		788.90	I	
175098	11/25/11	000130	METROPLUS HEALTH	PUCHUELA, MARIA	56.00		960.40	I	
175099	11/25/11	000130	METROPLUS HEALTH	MURDOCK, GERTRU PERSAD, USHA PUCHUELA, MARIA RYALS, CHARLES	35.00		600.25	I	
				CUSTOMER	973.00		16,686.95		
				CATEGORY	973.00	0.00	16,686.95		

RUN DATE 11/30/11 SALES JRNL # 0257		CITYWIDE YYSIDE CITYWIDE	REG NY S A L E S	NY R E G I S T E R			PAGE 1 AMG AMERIGRO BILL WEEK EN	-	24 12/02/11
INVOICE# DATE	CUST NO CUSTO	OMER NAME	R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175100 11/25/11 175101 11/25/11 175102 11/25/11	000132 AMERI	IGROUP IGROUP IGROUP	GU:	AMBRONE, JOSE ERRA, LORRAIN UITT, JOHNNY	7.00 70.00 8.00		118.09 1,180.90 134.96	I I I	
				CUSTOMER	85.00	0.00	1,433.95		
				CATEGORY	85.00	0.00	1,433.95		

RUN DATE 11/30/11 - SALES JRNL # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG :				PAGE 1 WEL WELCARE (BILL WEEK EN)		
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175103 11/25/11 175104 11/25/11 175105 11/25/11	000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA RAMIREZ, ALIDA RANJITSINGH, ES	42.00 72.00 48.00		722.40 1,238.40 825.60	I I I	
				CUSTOMER	162.00	0.00	2,786.40		
				 CATEGORY	162.00	0.00	2,786.40		

RUN DATE 11/30/11 - SUP	SUNNYSIDE CITYWIDE			PAGE 1 - 326
SALES JRNL # 0257 LOC				NPS NY PRESBYTERIAN SELECT
	SALE	S REGISTER		BILL WEEK ENDING 12/02/11
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175106 11/25/11 000	134 NY-PRESBYTERIAN SYSTEM SELECT	KARASSAVIDIS, A	49.00	840.84 I
		CATEGORY	49.00 0.00	840.84

	11/30/11 - NL # 0257		YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NTSZ NTSZ			PAGE 1 PAR PRIVATE	- 3	27
SALES UKI	NL # 0257	TOC 001	S A L E	NY NY S REGISTER			BILL WEEK EN	OING	12/02/11
									,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175107	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	BECKFORD, DORIS	12.00		174.00	I	
175107	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	BUTLER, MARY	11 50		166.75	I	
175109	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	NEREY, DULCE	7.00		101.50	Ī	
175110	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	NEREY, DULCE ORTIZ, AURA	8.00		116.00	Ī	
175111	11/18/11	000002	SUNNYSIDE COMMUNITY SERVICES	REID, DAPHNIE			58.00	I	
175112	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	REID, DAPHNIE	4.00		58.00	I	
175113	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	SIERRA, MIRRIAM	8.00		116.00	I	
				CUSTOMER	54.50	0.00	790.25		
175114	11/25/11	000040	DUISIN, CHRISTINE	DUISIN, XENIA	8.00		124.00	Т	
1,0111	11, 20, 11	000010	BOIDIN, OMEDIINE	201211, 1121111	0.00		221.00	_	
175115	11/25/11	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	25.00		344.75	I	
175116	11/11/11	000069	AMY L. WELTMAN					I	
175117	11/18/11	000069	AMY L. WELTMAN	LUSKIND, FRANCE				I	
175118	11/25/11	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	Τ	
				CUSTOMER	9.00	0.00	1,710.00		
175119	11/25/11	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	I	
				CATEGORY	100.50	0.00	3,031.00		

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER							PAGE 1 CAS CHILDREN BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175120 175121 175122 175123 175124 175125	11/25/11 11/25/11 11/25/11 11/25/11 11/25/11 11/25/11	000088 000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI REDDICK, LORENZ REDDICK, TRINIT SALAS, HELENA	2.75 4.00 6.00 23.00 19.25 28.00		42.63 62.00 93.00 356.50 298.38 434.00	I I I I	
				CUSTOMER	83.00	0.00	1,286.51		
				CATEGORY	83.00	0.00	1,286.51		

RUN DATE	RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 329										
SALES JR	ALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY							GHC GIRLING HEALTH CARE OF NY			
				SALE	S REGISTER			BILL WEEK ENDING 12/02/11			
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
175126	11/25/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	6.00		78.00	I		
175127	11/25/11	000090	GIRLING HEALTH CARE	OF NY	AMABILE, ANTOIN	167.75		2,180.75	I		
175128	11/25/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	39.75		516.75	I		
175129	11/25/11	000090	GIRLING HEALTH CARE	OF NY	DIRADOURIAN, NI	168.00		2,184.00	I		
175130	11/25/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	4.00		52.00	I		
175131	11/25/11	000090	GIRLING HEALTH CARE	OF NY	JOHNSON, ROBERT	18.25		237.25	I		
175132	11/25/11	000090	GIRLING HEALTH CARE	OF NY	KILIMLIAN, PEPR	19.75		256.75	I		
175133	11/25/11	000090	GIRLING HEALTH CARE	OF NY	SAK, FIRDWS	12.00		156.00	I		
175134	11/25/11	000090	GIRLING HEALTH CARE	OF NY	THOMPSON, ORALI	83.75		1,088.75	I		
					CUSTOMER	519.25	0.00	6,750.25			
					CATEGORY	519.25	0.00	6,750.25			

	11/30/11 - NL # 0257	SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG N A L E S		R		PAGE 1 PAR PRIVATE BILL WEEK EN	- 3	
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175135	11/25/11	000096	JIBAJA, ROSEMARY		JIBAJA, ROSEMAR	168.00		2,676.00	I	
175136	11/25/11	000098	MILDRED PANSE		PANSE, MILDRED	16.00		248.00	I	
175137	11/25/11	000145	LARRY EISENBERG		BERGER, TESS	44.50		714.50	I	
175138	11/25/11	002215	KEITH SALMON		LAWRANCE, LILLA	12.00		198.00	I	
175139 175140	11/18/11 11/25/11	003108 003108	NIGRO, CATHERINE NIGRO, CATHERINE		NIGRO, CATHERIN NIGRO, CATHERIN	4.00 20.00		62.00 310.00	I	
					CUSTOMER	24.00	0.00	372.00		
175141	11/25/11	003743	VICTOR NICASSIO		NICASSIO, VICTO	9.00		139.50	I	
175142	11/25/11	004784	CAMILLERI, JOSEPH		CAMILLERI, JOSE	15.00		202.50	I	
175143	11/25/11	006173	SIANO, ANDREW		SIANO, ANDREW	12.00		162.00	I	
175144	11/25/11	006337	STEPHEN EDEL		EDEL, CANDACE	68.00		1,078.00	I	
175145	11/25/11	007521	DOROTHY GILBERT	1	GILBERT, DOROTH	35.00		550.75	I	
175146	11/25/11	007630	MAUREEN MAIORANA	;	MAIORANA, MAURE	8.00		130.00	I	
175147	11/25/11	007631	MICHAEL MAIRANO	;	MAIORANA, MICHE	11.50		186.88	I	
175148	11/25/11	007883	ABBAMONTE, RUTH		ABBAMONTE, RUTH	4.00		68.00	I	
175149	11/25/11	008764	PATRICIA PHILION	1	GAFFNEY, FREDER	12.00		192.00	I	
175150	11/25/11	009036	MR. FERNANDO RIVERA	:	RIVERA, ALCIRA	7.00		108.50	I	
175151 175152	11/18/11 11/25/11	009226 009226	ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION		CARDENAS, GUSTA CARDENAS, GUSTA	4.00 11.25		62.00 174.38	I I	
					CUSTOMER	15.25	0.00	236.38		
175153	11/25/11	009263	ALZHEIMER'S ASSOCIATION		VALENTIN, EVA	4.00		65.00	I	
175154	11/25/11	009264	ALZHEIMER'S ASSOCIATION	-	VALENTIN, JOSE	4.00		65.00	I	
175155	11/25/11	997760	MARASA, ANTONIO	!	MARASA, ANTONIO	9.00		121.50	I	
					- CATEGORY	478.25	0.00	7,514.51		
					LOCATION	21,126.50	0.00	321,267.38		
					COMPANY	21,126.50	0.00	321,267.38		

RUN DATE 11/30/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 331
SALES JRNL # 0257 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 12/02/11

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

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