RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0334 LOC 001 SUNNYSIDE C

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| NYSIDE CITYWIDE SUNNYSIDE CITYWIDE RE | EG NY NY | | | PAGE 1 - 1 SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 5/24/13 |
|--|------------------|--------|---------|--|
| S A L | ES REGISTER | - | | BILL WEEK ENDING 5/24/13 |
| CUSTOMER NAME SENIOR HEALTH PARTNERS | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| SENIOR HEALTH PARTNERS | ALVAREZ, ANGELA | 4.00 | | 56.96 I |
| SENIOR HEALTH PARTNERS | ALVAREZ, ANGELA | 4.00 | | 56.96 I |
| SENIOR HEALTH PARTNERS | ANDERSON, BETH | 56.00 | | 797.44 I |
| SENIOR HEALTH PARTNERS | APOSTOLOVA, LJU | 60.00 | | 854.40 I |
| SENIOR HEALTH PARTNERS | BROOKS, NATALIE | 18.00 | | 256.32 I |
| SENIOR HEALTH PARTNERS | COLON, RAYMUNDA | 35.00 | | 498.40 I |
| SENIOR HEALTH PARTNERS | CUEVA, RAFAELA | 84.00 | | 1,196.16 I |
| SENIOR HEALTH PARTNERS | DEJESUS, YSABEL | 9.00 | | 128.16 I |
| SENIOR HEALTH PARTNERS | ESCANIO, ANTONI | 4.00 | | 56.96 I |
| SENIOR HEALTH PARTNERS | ESCANIO, ANTONI | 12.00 | | 170.88 I |
| SENIOR HEALTH PARTNERS | ESTRADA, MIRIAM | 44.00 | | 626.56 I |
| SENIOR HEALTH PARTNERS | FULLER, WILLIAM | 70.00 | | 996.80 I |
| SENIOR HEALTH PARTNERS | GARCIA, VICTORI | 25.00 | | 356.00 I |
| SENIOR HEALTH PARTNERS | GHILIOTTY, FLOR | 27.00 | | 384.48 I |
| SENIOR HEALTH PARTNERS | GOODWIN, CLYDE | 70.00 | | 996.80 I |
| SENIOR HEALTH PARTNERS | GRAFSTEIN, LILL | 1.00 | | 200.00 I |
| SENIOR HEALTH PARTNERS | HARIDIN, KHAMAT | 48.00 | | 683.52 I |
| SENIOR HEALTH PARTNERS | HARIDIN, RAMDIA | 135.00 | | 1,922.40 I |
| SENIOR HEALTH PARTNERS | HARLEY, ETHEL | 20.00 | | 284.80 I |
| SENIOR HEALTH PARTNERS | HERNANDEZ, FRAN | 56.00 | | 797.44 I |
| SENIOR HEALTH PARTNERS | KATRAMADOS, BAR | 20.50 | | 291.92 I |
| SENIOR HEALTH PARTNERS | MALDONADO, MARI | 7.00 | | 1,400.00 I |
| SENIOR HEALTH PARTNERS | MALDONADO, VICE | 4.00 | | 800.00 I |
| SENIOR HEALTH PARTNERS | MARTINEZ 2, EMM | 4.00 | | 56.96 I |
| SENIOR HEALTH PARTNERS | MARTINEZ, ROSAR | 4.00 | | 56.96 I |
| SENIOR HEALTH PARTNERS | MATOS, AUREA | 47.00 | | 669.28 I |
| SENIOR HEALTH PARTNERS | MAYNARD, LILLIA | 30.00 | | 427.20 I |
| SENIOR HEALTH PARTNERS | MERCADO, ELVA | 40.00 | | 569.60 I |
| SENIOR HEALTH PARTNERS | MORUCHO, MANUEL | 54.00 | | 768.96 I |
| SENIOR HEALTH PARTNERS | ORTIZ, SANTIAGO | 50.00 | | 712.00 I |
| SENIOR HEALTH PARTNERS | OSBORNE, DOROTH | 15.50 | | 220.72 I |
| SENIOR HEALIH PARINERS | PERALIA, ANIONI | 37.45 | | 530.44 I 113.92 I |
| SENIOR HEALIH PARINERS | POLANCO, ANTONI | 24 00 | | 341.76 I |
| SENIOR DEALTH PARTNERS | POLANCO, ANTONI | 16 00 | | 227.84 I |
| CENTOR DEALTH PARTNERS | DAMOG TOADET | 20.00 | | 427.20 I |
| CENTOR DEALTH PARTNERS | DAMOS, ISABEL | 4 00 | | 57.00 I |
| CENTOR DEALTH PARTNERS | DIVEDA DETCIDA | 4.00 | | 655.04 I |
| GENIOR HEALIH PARINERS | PODPICIEZ DAIII | 7 00 | | 1,400.00 I |
| CENTOR HEALTH PARTNERS | POGA CARMEN | 20 00 | | 284.80 I |
| CENTOR HEALTH PARTNERS | POSADO CARMEN | 60.00 | | 854.40 I |
| CENTOR HEALTH PARTNERS | CALICRID CARME | 12 00 | | 170.88 I |
| CENTOR HEALTH PARTNERS | SALICKOF, CARME | 40 00 | | 569.60 I |
| SENTOR HEALTH PARTNERS | STERRA MIRIAM | 47 00 | | 669.75 I |
| SENIOR HEALTH PARTNERS | SIMON. LUPE | 8.00 | | 113.92 I |
| SENIOR HEALTH PARTNERS | SOTO, AGRIPINA | 20.00 | | 284.80 I |
| SENIOR HEALTH PARTNERS | TORRES. ANTONIA | 7 00 | | 1,400.00 I |
| SENIOR HEALTH PARTNERS | TORRES, JOSE | 20.00 | | 284.80 I |
| SENIOR HEALTH PARTNERS | TORRESCAMPOS T | 40.00 | | 569.60 I |
| SELLOR HEREIT LARTHER | TOTAL DOM TO , U | 10.00 | | 303.00 1 |

| RUN DATE 05/22/1 SALES JRNL # 033 | | SUNNYSIDE CITYWIDE | REG NY NY A L E S R E G I S T E | R | | | - 2 EALTH PARTNERS DING 5/24/13 |
|--|----------------------|--|--|---------------------------------|---------|-------------------------------------|---------------------------------|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 242748 5/10/1 242749 5/17/1 242750 5/17/1 242751 5/17/1 | 3 000082 3 000082 | SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS SENIOR HEALTH PARTNERS | VASQUEZ, CORNEL WOO, LUZ WOO, LUZ ZAPATA, SIMON | 16.00 12.00 4.00 12.00 | | 227.84 170.88 56.96 170.88 | I I I |
| | | | CUSTOMER | 1,548.25 | 0.00 | 26,877.35 | |
| | | | - CATEGORY | 1,548.25 | 0.00 | 26,877.35 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 3 | |
|-----------|----------|---------|------------------------|----------------------------|--------|---------|----------------|------------|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHC | - | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS | |
| INVOICE# | DAIL | COSI NO | CUSTOMER NAME | REFERENCE | nouks | IAA AMI | AMOUNT I | IP SURPLUS | |
| 242752 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ABINANTI, IRENE | 56.00 | | 899.36 | I | |
| 242753 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ACOSTA, ALBERTO | 29.25 | | 469.76 | I | |
| 242754 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ADAMES, OLGA | 25.00 | | 401.50 | I | |
| 242755 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ADAMES, RICARDO | 34.00 | | 546.04 | I | |
| 242756 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ADAMS, MYRIAM | 10.00 | | 160.60 | I | |
| | | | | CUSTOMER | 154.25 | 0.00 | 2,477.26 | | |
| | | | | CATEGORY | 154.25 | 0.00 | 2,477.26 | | |
| | | | | CAILGORI | 171.23 | 0.00 | 2,4/1.20 | | |

| RUN DATE 05/22/13 SALES JRNL # 0334 | | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 4 |
|--|---------|---------------------------------------|----------------|-------|---------|-----------------------|---------|
| | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242757 5/17/13 | 800000 | VISITING NURSE SERVICE | ADAMS, OLIVINE | 12.00 | | 192.72 I | |
| | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 3 |
|------------------|--------------------|------------------|---|-------------------------------|---------------|---------|----------------------------------|------------|
| SALES JRN | 1L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | VCP CHOICE LHC BILL WEEK ENDI | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 242758 242759 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | ADUN, JEANETTE AFZAL, AMIR | 16.00 4.00 | | 963.60 64.24 | I I |
| | | | | CUSTOMER | 20.00 | 0.00 | 1,027.84 | |
| | | | | CATEGORY | 20.00 | 0.00 | 1,027.84 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 6 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE C | |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242760 | 5/17/13 | 800000 | VISITING NURSE SERVICE | AGUILAR, ZORAID | 45.00 | | 722.70 I | |
| | | | | | | | | |
| | | | | CATEGORY | 45.00 | 0.00 | 722.70 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 7 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242761 | 5/17/13 | 000008 | VISITING NURSE SERVICE | AHMED, BALAL | 12.00 | | 192.72 I | |
| 242762 | 5/17/13 | 800000 | VISITING NURSE SERVICE | AKBAR, NASEEM | 20.00 | | 321.20 I | |
| | | | | CUSTOMER | 32.00 | 0.00 | 513.92 | |
| | | | | COSTOMER | 32.00 | 0.00 | 313.92 | |
| | | | | | | | | |
| | | | | CATEGORY | 32.00 | 0.00 | 513.92 | |

| RUN DATE (| | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 LTC NURSING | | 8 'O WALLS (LT |
|------------|---------|----------|--------------------------------------|---------------------------|-------|---------|-----------------------|------|-------------------|
| | | | | S A L E S R E G I S T E R | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | 5/10/13 | 800000 | VISITING NURSE SERVICE | • | 10.00 | | 160.60 | I | |
| 242764 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ALEKSANDORVA, S | 35.00 | | 562.10 | 1 | |
| | | | | CUSTOMER | 45.00 | 0.00 | 722.70 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 45.00 | 0.00 | 722.70 | | |

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|-----|-----------|----------|---------|------------------------|----------------------------|-------|---------|-------------------------------|---------|
| | SALES JRN | L # 0334 | LOC 001 | | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 242765 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ALFEREZ, GLORIA | 1.00 | | 16.06 I | |
| | | | | | CATEGORY | 1.00 | 0.00 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 10 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242766 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ALVAREZ, DALILA | 16.00 | | 256.96 I | |
| | | | | CATEGORY | 16.00 | 0.00 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | .1 |
|-----------|----------|---------|------------------------|-----------------------------|-------|---------|------------------------------------|---------|
| SALES JRN | L # 0334 | TOG 001 | | REG NY NY SALES REGISTER | | | HOA HOSPICE ADULT BILL WEEK ENDING | 5/24/13 |
| | | | • | SALES REGISTER | | | BILL WEEK ENDING | 3/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242767 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ALVAREZ, NAZARE | 45.25 | | 726.72 I | |
| | | | | CATEGORY | 45.25 | 0.00 | 726.72 | |

| RUN DATE | | | | PAGE 1 - 12 | | | | | |
|-----------|----------|---------|------------------------|----------------------------|------------|---------|---------------|-----|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LE | | 5/24/13 |
| | | | | | | | | | , , |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242768 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ANANIA, GLYGERI | 40.00 | | 642.40 | I | |
| 242769 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ANDINO, ESTEBAN | 19.75 | | 317.19 | I | |
| 242770 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ANDRADE, LOLA | 55.75 | | 895.35 | I | |
| 242771 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ANDREWS, JOHNNI | 35.25 | | 566.12 | I | |
| | | | | CUSTOMER | 150.75 | 0.00 | 2,421.06 | | |
| | | | | CATEGORY | 150.75 | 0.00 | 2,421.06 | | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDING | 13 5 5/24/13 |
|----------|---------|---------|---|----------------------------|-------|---------|---|-----------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 242772 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ANDREWS, JOHNNI | 27.25 | | 437.64 I | |
| | | | | CATEGORY | 27.25 | 0.00 | 437.64 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 14 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------------|--|
| SALES JRI | NL # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHC | | |
| | | | | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS | |
| 242773 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ANGRISANO, RUTH | 40.00 | | 642.40 | Ι | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | | |

| 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 15 |
|------------|----------|--------------------------------|----------------------------|---|---|---|--|
| L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | OMEW/O WALLS (LT |
| | | S | ALES REGISTER | | | BILL WEEK END | ING 5/24/13 |
| DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 1 | TYP SURPLUS |
| 5/17/13 | 800000 | VISITING NURSE SERVICE | ANGULO, ELCY | 35.00 | | 562.10 | I |
| | | | CAMEGODY | | | 562.10 | |
| | L # 0334 | L # 0334 LOC 001 DATE CUST NO | DATE CUST NO CUSTOMER NAME | L # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE 5/17/13 000008 VISITING NURSE SERVICE ANGULO, ELCY | L # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE HOURS 5/17/13 000008 VISITING NURSE SERVICE ANGULO, ELCY 35.00 | L # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT | L # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TO Solve the so |

| | | | YSIDE CITYWIDE | DEC MY | ATSZ | | | PAGE 1 | | 16 |
|------------------|--------------------|------------------|---|--------|-----------------|----------------|---------|------------------------------|--------|---------|
| SALES JRN | ⊔ # ∪334 | LOC 001 | SUNNYSIDE CITYWIDE | | NY EGISTE | R | | VCP CHOICE L BILL WEEK EN | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242775 242776 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | ALICE ODETTE | 60.50 18.00 | | 971.63 289.08 | I I | |
| | | | | | CUSTOMER | 78.50 | 0.00 | 1,260.71 | | |
| | | | | | CATEGORY | 78.50 | 0.00 | 1,260.71 | | |

| RUN DATE SALES JRN | | | | REGNY NY SALES REGISTER | | | PAGE 1 - VCM VNS BILL WEEK ENDING | 17 5/24/13 |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|---|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242777 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ARIAS, MAGDALEN | 40.00 | | 642.40 I | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 1 | .8 |
|-----------|------------|------------|------------------------|---------|----------|-------|---------|--------------|--------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | LTC NURSING | HOMEW/ | O WALLS (LT |
| | | | | SALES R | EGIST | E R | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242778 | 5/10/13 | 000008 | VISITING NURSE SERVICE | AZAD, | ABUL | 4.00 | | 64.24 | I | |
| 242779 | 5/17/13 | 800000 | VISITING NURSE SERVICE | AZAD, | ABUL | 9.75 | | 156.59 | I | |
| | | | | | CUSTOMER | 13.75 | 0.00 | 220.83 | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 13.75 | 0.00 | 220.83 | | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 19 | |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS. | A | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 | |
| ı | | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS | |
| ı | | | | | | | | | | |
| ı | 242780 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BADILLO, JOVITA | 12.00 | | 192.72 I | | |
| ı | | | | | | | | | | |
| ı | | | | | | | | | | |
| ı | | | | | CATEGORY | 12.00 | 0.00 | 192.72 | | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 20 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|-------------------|--------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | /O WALLS (LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 242781 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BALLAS, VIOLA | 25.00 | | 401.50 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 25.00 | 0.00 | 401.50 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 21 | |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | A | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 | |
| ı | | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS | |
| ı | | | | | | | | | | |
| ı | 242782 | 5/17/13 | 000008 | VISITING NURSE SERVICE | BANEGAS, SANTOS | 10.00 | | 160.60 I | | |
| ı | | | | | | | | | | |
| ı | | | | | | | | | | |
| ı | | | | | CATEGORY | 10.00 | 0.00 | 160.60 | | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 22 |
|----------------------------|-------------------------------|----------------------------|--|---|-----------------------|---------|---------------------------------|---------|
| BALLS OICH | ш н 0551 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242783 242784 242785 | 5/17/13 5/17/13 4/12/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | BAQUERIZO, ANNA BARLAS, ALEXAND BATTLE, JEANETT | 55.75 4.00 7.00 | | 895.35 I 64.24 I 112.42 I | |
| | | | | CUSTOMER | 66.75 | 0.00 | 1,072.01 | |
| | | | | CATEGORY | 66.75 | 0.00 | 1,072.01 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 23 | |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS. | A | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 | |
| ı | | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS | |
| ı | | | | | | | | | | |
| ı | 242786 | 5/17/13 | 000008 | VISITING NURSE SERVICE | BATTLE, JEANETT | 48.75 | | 782.93 I | | |
| ı | | | | | | | | | | |
| ı | | | | | | | | | | |
| ı | | | | | CATEGORY | 48.75 | 0.00 | 782.93 | | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - : | 24 |
|-----------------------|--------------------|------------------|---|--------------------------------|--------------|---------|--------------------|---------|
| SALES OWN | T # 0334 | HOC 001 | | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242787 242788 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | BATTLE, MARY BENNETT, ROBIN | 2.00 4.00 | | 32.12 I 64.24 I | |
| | | | | CUSTOMER | 6.00 | 0.00 | 96.36 | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 5 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | O WALLS (LT |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 242789 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BETHUNE, HARRYD | 33.00 | | 529.98 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 33.00 | 0.00 | 529.98 | |

| l | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 26 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| | SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 242790 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BHATT, JYOTI | 30.00 | | 481.80 I | |
| | | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 27 |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|---------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | //O WALLS (LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 242791 | 5/17/13 | 000008 | VISITING NURSE SERVICE | BHAWNANI, BISHU | 24.00 | | 385.44 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 24.00 | 0.00 | 385.44 | |

| | | | YSIDE CITYWIDE | | | | 11101 | | 28 |
|-----------|----------|---------|------------------------|----------------------------|--------|---------|--------------------------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LH BILL WEEK END | | 5/24/13 |
| | | | | SALES REGISTER | • | | DILL MEEK END | TING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | |
| 242792 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BHULLA, JIWAN | 50.00 | | 803.00 | I | |
| 242793 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BLANCAFLOR, PUR | 32.00 | | 513.92 | I | |
| 242794 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BOJORQUEZDECHA, | 36.00 | | 578.16 | I | |
| 242795 | 5/17/13 | 000008 | VISITING NURSE SERVICE | BONANO, PAULA | 8.00 | | 128.48 | I | |
| 242796 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BONILLA, LYDIA | 20.00 | | 321.20 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 146.00 | 0.00 | 2,344.76 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | CATEGORY | 146.00 | 0.00 | 2,344.76 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 29 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-----------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O W | WALLS (LT |
| | | | i | SALES REGISTER | | | BILL WEEK ENDING 5 | /24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | JRPLUS |
| | | | | | | | | |
| 242797 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BONSIGNORE, GAE | 25.00 | | 401.50 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 25.00 | 0.00 | 401.50 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 30 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242798 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BORYSEWICZ, MAR | 12.00 | | 192.72 I | |
| | | | | | | | | |
| | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 31 ADU ADULT | |
|------------|---------|---------|--------------------------------------|-----------------|-------|---------|--------------------------|--|
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 242799 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BOURDIER, SANTI | 9.00 | | 144.54 I | |
| | | | | | | | 144 54 | |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| RUN DATE (|)5/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | _ | 32 |
|------------|------------|------------|------------------------|-----------------|--------|---------|---------------|------|---------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | ICSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENI | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242800 | 5/17/13 | 000008 | VISITING NURSE SERVICE | BOYADJIAN, ZARO | 35.00 | | 562.10 | I | |
| 242801 | 5/17/13 | 800000 | VISITING NURSE SERVICE | E BOYLAN, FRANK | 60.50 | | 971.63 | I | |
| 242802 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BRACERO, HELEN | 84.00 | | 1,349.04 | I | |
| 242803 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BURGOS, RAFAELA | 9.00 | | 144.54 | I | |
| 242804 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BURITICA, INES | 25.00 | | 401.50 | I | |
| | | | | CUSTOMER | 213.50 | 0.00 | 3,428.81 | | |
| | | | | CATEGORY | 213.50 | 0.00 | 3,428.81 | | |

| ١ | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 33 | |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|----------------|----------------|----|
| ١ | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HO | ME W/O WALLS I | LΤ |
| ١ | | | | 5 | SALES REGISTER | | | BILL WEEK ENDI | ING 5/24/13 | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS | |
| ١ | INVOICE# | DAIL | COSI NO | CUSTOMER NAME | REFERENCE | HOURS | IAA AMI | AMOUNT | YP SURPLUS | |
| | 242805 | 5/17/13 | 800000 | VISITING NURSE SERVICE | BUSCARELLO, JOH | 48.00 | | 770.88 | I | |
| | | | | | CATEGORY | 48.00 | 0.00 | 770.88 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | | 34 |
|-----------------------|--------------------|-----------------------|---|-----------------------------------|----------------|---------|-------------------------|-----|---------|
| SALES UKN | ш # 0334 | LOC 001 | | SALES REGISTER | | | BILL WEEK ENI | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242806 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CABA, PURA | 10.00 | | 160.60 | I | |
| 242807 242808 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | CABRERA, HERMIN CAIPO, MATILDE | 21.25 35.00 | | 341.28 562.10 | I | |
| | | | | CUSTOMER | 66.25 | 0.00 | 1,063.98 | | |
| | | | | CATEGORY | 66.25 | 0.00 | 1,063.98 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | |
|------------|----------|---------|------------------------|----------------------------|-------|---------|---------------------------------------|---------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | HOA HOSPICE ADULT BILL WEEK ENDING | 5/24/13 |
| | | | | | | | DIED WEEK ENDING | 3/21/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242809 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CAJJEJAS, MERCE | 12.00 | | 192.72 I | |
| | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 36 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242810 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CALABRO, JOSEPH | 69.75 | | 1,120.19 I | |
| | | | | CATEGORY | 69.75 | 0.00 | 1,120.19 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 37 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCM VNS | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242811 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CALDERON, FRANC | 56.00 | | 899.36 I | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 38 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242812 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CAMBARA, JOSEFA | 40.00 | | 642.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 39 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|-------------------|--------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | /O WALLS (LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 242813 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CANO, ADELINA | 30.00 | | 481.80 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE SALES JRN | | - SUP SUNN | IYSIDE CITYWIDE | DEC MY MY | | | PAGE 1 | _ | 0 |
|-----------------------|----------|------------|-------------------------|-----------------------------|--------|---------|--------------------------------|-----|---------|
| SALES URN | ь # 0334 | TOC 001 | SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | VCP CHOICE LH BILL WEEK END | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242814 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CAPORASO, VINCE | 84.00 | | 1,349.04 | I | |
| 242815 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CARDONA, MARIA | 25.00 | | 401.50 | I | |
| 242816 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CARDOSO, ORLAND | 76.50 | | 1,228.60 | I | |
| 242817 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CARELA-REYES, M | 25.00 | | 401.50 | I | |
| 242818 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CARLOS, JULIA | 20.00 | | 321.20 | I | |
| | | | | CUSTOMER | 230.50 | 0.00 | 3,701.84 | | |
| | | | | CATEGORY | 230.50 | 0.00 | 3,701.84 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 41 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|-----------------|----------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOM | E W/O WALLS LT |
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242819 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CARTAGENA, FRAN | 56.00 | | 899.36 I | |
| | | | | | | | | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| | | | YSIDE CITYWIDE | | | | | 42 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242820 | 5/10/13 | 000008 | VISITING NURSE SERVICE | CASTANEDA, JOSE | 7.00 | | 112.42 I | |
| 242821 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CASTANEDA, JOSE | 49.00 | | 786.94 I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 899.36 | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| | DATE 05/22/1 S JRNL # 033 | | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 43 |
|------|------------------------------|----------|---------------------------------------|-----------------|-------|---------|-----------------------|-----------|
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVO | DICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 2428 | 5/17/1 | 3 000008 | VISITING NURSE SERVICE | CAVATAIO, MILDR | 20.00 | | 321.20 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | - 44 |
|-----------------------|----------|------------|--------------------------------------|-----------------|--------|---------|-------------------------|-------------|
| SALES UKN | ш # 0334 | TOC 001 | | ALES REGISTER | | | BILL WEEK END | |
| | | | _ | | - | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 242823 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CEBALLOS, CLEME | 20.00 | | 321.20 | т |
| 242824 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CERNILLI, MARIA | 14.00 | | 224.84 | |
| 242825 | 5/03/13 | 000008 | VISITING NURSE SERVICE | CERRA, ADA | 4.00 | | 64.24 | T T |
| 242826 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CERRA, ADA | 12.00 | | 192.72 | T T |
| 242827 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CHARITAR, RAMKA | 36.00 | | 578.16 | T |
| 242828 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CHARLES PIERRE, | 30.00 | | 481.80 | Ī |
| | | | | | | | | |
| | | | | CUSTOMER | 116.00 | 0.00 | 1,862.96 | |
| | | | | | | | | |
| | | | | CATEGORY | 116.00 | 0.00 | 1,862.96 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 45 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|----------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOM | E W/O WALLS LT |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242829 | 5/10/13 | 000008 | VISITING NURSE SERVICE | CHARLES, JOSE | 15.00 | | 240.90 I | |
| 242830 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CHARLES, JOSE | 20.00 | | 321.20 I | |
| | | | | CUSTOMER | 35.00 | 0.00 | 562.10 | |
| | | | | | | | | |
| | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | | 16 |
|-----------------------|--------------------|-----------------------|--|----------------|----------------|---------|-------------------------|-----|---------|
| SALES UKI | ш # 0334 | LOC UUI | | SALES REGISTER | | | BILL WEEK END | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242831 242832 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 69.50 32.00 | | 1,116.17 513.92 | I | |
| 242833 | 5/17/13 | 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 24.00 | | 385.44 | Ī | |
| | | | | CUSTOMER | 125.50 | 0.00 | 2,015.53 | | |
| | | | | CATEGORY | 125.50 | 0.00 | 2,015.53 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 47 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-----------------|------------|
| SALES JRN | NL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDIN | IG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242834 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CHOPRA, DARSHAN | 42.00 | | 674.52 I | |
| | | | | CATEGORY | 42.00 | 0.00 | 674.52 | |

| | | | YSIDE CITYWIDE | DDG 377 | | | PAGE 1 - 48 | |
|------------------|--------------------|------------------|---|----------------------------|----------------|---------|--|---------|
| SALES JRN | IL # U334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING 5 | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | SURPLUS |
| 242835 242836 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 30.25 30.00 | | 485.82 I 481.80 I | |
| | | | | CUSTOMER | 60.25 | 0.00 | 967.62 | |
| | | | | CATEGORY | 60.25 | 0.00 | 967.62 | |

| | | | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 49 |
|---------|--------------|---------|---------------------------------------|----------------|-------|---------|-----------------------|---------|
| 511225 | 14.2 0331 | 200 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE | # DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242837 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COLEMAN, JAMES | 4.00 | | 64.24 I | |
| | | | | | | | | |
| | | | | CATEGORY | 4.00 | 0.00 | 64.24 | |

| RUN DATE | 05/22/13 - | | PAGE 1 - 50 | | | | | |
|-----------|------------|---------|------------------------|----------------|-------------------------------|---------|---------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | LTC NURSING HO | LTC NURSING HOMEW/O WALLS (LT | | | |
| | | | S | SALES REGISTER | | | BILL WEEK END | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 242838 | 5/17/13 | 000008 | VISITING NURSE SERVICE | COLLER, FELISA | 20.00 | | 321.20 | I |
| 242839 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COLLER, JOSE | 20.00 | | 321.20 | I |
| 242840 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COLON, ANTONIA | 36.75 | | 590.21 | I |
| | | | | | | | 1 000 61 | |
| | | | | CUSTOMER | 76.75 | 0.00 | 1,232.61 | |
| | | | | | | | | |
| | | | | CATEGORY | 76.75 | 0.00 | 1,232.61 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 51 |
|-----------|------------|------------|------------------------|----------------|--------|---------|-------------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242841 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CORDERO, NELLY | 167.50 | | 2,690.05 I | |
| | | | | CATEGORY | 167.50 | 0.00 | 2,690.05 | |

| | | | YSIDE CITYWIDE | | | PAGE 1 - 52 | | | |
|-----------|----------|---------|------------------------|-----------------|-------|-------------|-------------------------|----|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/24/3 | 13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLU | US | |
| 242842 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CORREA, MARGARI | 24.00 | | 385.44 I | | |
| 242843 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COSTA, ANTOINET | 20.00 | | 321.20 I | | |
| | | | | CUSTOMER | 44.00 | 0.00 | 706.64 | | |
| | | | | CATEGORY | 44.00 | 0.00 | 706.64 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 53 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------------|
| SALES JRN | ъ # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242844 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COSTA, ARSENE | 54.00 | | 867.24 I | |
| | | | | CATEGORY | 54.00 | 0.00 | 867.24 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 54 |
|-----------------------|---------|---------|--------------------------------------|-----------------|-------|---------|-----------------------|------------|
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242845 | 5/17/13 | 000008 | VISITING NURSE SERVICE | COVALIU, SIMION | 18.75 | | 301.13 | I. |
| | | | | CATEGORY | 18.75 | 0.00 | 301.13 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ! HOA HOSPICE ADULT | 55 |
|------------|---------|---------|--------------------------------------|----------------|-------|---------|---------------------------------|---------|
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242846 | 5/17/13 | 800000 | VISITING NURSE SERVICE | COX, PETRA | 20.00 | | 321.20 I | |
| | | | | | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| | | | YSIDE CITYWIDE | DEG NV NV | | | PAGE 1 - 5 | 56 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRN | ш # ∪334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242847 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CRAWFORD, CARME | 67.75 | | 1,088.07 I | |
| | | | | CATEGORY | 67.75 | 0.00 | 1,088.07 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 57 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|--------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME | W/O WALLS LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 242848 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CRUZ, HECTOR | 38.25 | | 614.30 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 38.25 | 0.00 | 614.30 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - ! | 58 |
|-----------|------------|------------|------------------------|---------|----------|-------|---------|--------------|------|---------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | VCP CHOICE L | HCSA | |
| | | | 5 | SALES R | EGISTI | E R | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242849 | 5/17/13 | 000008 | VISITING NURSE SERVICE | CRUZ, | JUANA | 15.50 | | 248.94 | I | |
| 242850 | 5/17/13 | 800000 | VISITING NURSE SERVICE | CRUZ, | LIDIA | 35.00 | | 562.10 | I | |
| | | | | | CUSTOMER | 50.50 | 0.00 | 811.04 | | |
| | | | | | CATEGORY | 50.50 | 0.00 | 811.04 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 59 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | N/O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 242851 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DAMICO, ANGELA | 24.00 | | 385.44 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 24.00 | 0.00 | 385.44 | |

| | | | YSIDE CITYWIDE | | | | | | | 60 | |
|------------|----------|---------|------------------------|--------|--------------|-------|---------|---------------|-----|---------|--|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | VCP CHOICE LH | | | |
| | | | \$ | SALES | REGISTER | | | BILL WEEK END | ING | 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | RE | FERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 242852 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DAV | IS, LOUELLEN | 36.00 | | 578.16 | I | | |
| | | | | | | | | | | | |
| | | | | | CATEGORY | 36.00 | 0.00 | 578.16 | | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 6 | 51 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242853 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DE LA HOZ, RUTH | 15.00 | | 240.90 I | |
| | | | | | | | | |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 62 | 2 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | CSA | |
| | | | S | SALES REGISTER | | | BILL WEEK END | ING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 1 | TYP | SURPLUS |
| 242854 | 4/26/13 | 000008 | VISITING NURSE SERVICE | DEBARRENECHE, E | 7.00 | | 112.42 | I | |
| 242855 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DEBARRENECHE, E | 34.00 | | 546.04 | I | |
| 242856 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DEBAZALAR, ANTO | 18.00 | | 289.08 | I | |
| 242857 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DELACRUZ, SEFER | 37.50 | | 602.25 | I | |
| | | | | CUSTOMER | 96.50 | 0.00 | 1,549.79 | | |
| | | | | CATEGORY | 96.50 | 0.00 | 1,549.79 | | |

| RUN DATE | E 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 63 |
|----------|--------------|------------|------------------------|-----------------|-------|---------|-----------------|------------|
| SALES JE | RNL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDIN | IG 5/24/13 |
| INVOICE; | ‡ DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242858 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DELLAVECCHIA, P | 6.00 | | 96.36 I | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | | 64 |
|-----------------------|----------|------------|-----------------------------------|-----------------|--------|---------|-------------------------|-----|---------|
| SALES OIGN | ш # ОЭЭЧ | 100 001 | | ALES REGISTER | | | BILL WEEK ENI | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242859 | 5/17/13 | 000008 | VISITING NURSE SERVICE | DELOSSANTOS, MA | 36.00 | | 578.16 | I | |
| 242860 | 5/10/13 | 800000 | VISITING NURSE SERVICE | DELPOZO, MIGUEL | 16.00 | | 256.96 | I | |
| 242861 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DELPOZO, MIGUEL | 24.00 | | 385.44 | I | |
| 242862 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DELUCA, ANTIONE | 27.75 | | 445.67 | I | |
| 242863 | 5/17/13 | 000008 | VISITING NURSE SERVICE | DEY, KRISHNA | 9.00 | | 144.54 | I | |
| 242864 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DEZUMARAN, REBE | 49.50 | | 794.98 | I | |
| | | | | CUSTOMER | 162.25 | 0.00 | 2,605.75 | | |
| | | | | CATEGORY | 162.25 | 0.00 | 2,605.75 | | |

| | 05/22/13 - L # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | 65 |
|----------|------------------------|--------|--------------------------------------|----------------|-------|---------|------------------|---------|
| | | | | ALES REGISTER | | | BILL WEEK ENDING | , , |
| INVOICE# | DATE | | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242865 | 5/17/13 | 000008 | VISITING NURSE SERVICE | DIAZ, ELEODORA | 30.00 | | 481.80 I | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 66 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|----------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOM | E W/O WALLS LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| | | | | | | | | |
| 242866 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DIAZ, HILDA | 43.00 | | 690.58 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 43.00 | 0.00 | 690.58 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY 1 | NY | | | PAGE 1 VCP CHOICE L | | 67 |
|-----------------------|---------|-----------------------|--------------------------------------|----------|----------|--------|---------|------------------------|------|---------|
| | | | | SALES RI | EGISTE | R | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242867 | 5/17/13 | 000008 | VISITING NURSE SERVICE | DIAZ, | OLGA | 52.00 | | 835.12 | I | |
| 242868 | 5/17/13 | 000008 | VISITING NURSE SERVICE | DIAZ, | ROSA | 42.00 | | 674.52 | I | |
| 242869 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DIAZ, | WILLIAM | 49.00 | | 786.94 | I | |
| | | | | | CUSTOMER | 143.00 | 0.00 | 2,296.58 | | |
| | | | | | CATEGORY | 143.00 | 0.00 | 2,296.58 | | |

| | | | YSIDE CITYWIDE | DEC NY NY | | | PAGE 1 | - 6 | 58 |
|------------------|--------------------|------------------|---|-----------------------------|----------------|---------|----------------------------|--------|---------|
| SALES JRN | ш # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENI | OING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242870 242871 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | -, | 20.00 64.00 | | 321.20 1,027.84 | I I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,349.04 | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,349.04 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCSA | 69 |
|-----------------------|--------------------|-----------------------|---|----------------|----------------|---------|------------------------------|---------|
| BALLED OIGN | ш т 0551 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242872 242873 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 41.75 16.00 | | 670.51 I 256.96 I | |
| | | | | CUSTOMER | 57.75 | 0.00 | 927.47 | |
| | | | | CATEGORY | 57.75 | 0.00 | 927.47 | |

| RUN DATE (SALES JRN) | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | PAGE 1 - 70 ADU ADULT BILL WEEK ENDING 5 | /24/13 |
|--------------------------|---------|---------|---|----------------------------|-------|---------|--|--------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | URPLUS |
| 242874 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DONA, ISABEL | 7.50 | | 120.45 I | |
| | | | | CATEGORY | 7.50 | 0.00 | 120.45 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 71 |
|-----------|------------|------------|------------------------|----------------|-------|---------|-----------------|-----------|
| SALES JRN | 1L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCS | |
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242875 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DUTAN, SELINDA | 35.00 | | 562.10 I | |
| | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 7 | 72 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|--------------------|------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| ı | | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 242876 | 5/17/13 | 800000 | VISITING NURSE SERVICE | DUVERGE, MARIA | 12.00 | | 192.72 I | |
| | | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 73 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242877 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ECHEGARAY, MARI | 41.00 | | 658.47 I | |
| | | | | CATEGORY | 41.00 | 0.00 | 658.47 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 74 ADU ADULT | |
|-----------------------|--------------------|-----------------------|---|----------------|---------------|---------|--------------------------|--------|
| SALES URN | ш # 0334 | LOC UUI | | SALES REGISTER | | | | /24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP ST | URPLUS |
| 242878 242879 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 15.00 8.75 | | 240.90 I 140.53 I | |
| | | | | CUSTOMER | 23.75 | 0.00 | 381.43 | |
| | | | | CATEGORY | 23.75 | 0.00 | 381.43 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 75 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-----------------|-----------|
| SALES JRN | rL # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCS | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242880 | 5/17/13 | 800000 | VISITING NURSE SERVICE | EMILIAN, SIRPOO | 4.00 | | 64.24 I | |
| | | | | CATEGORY | 4.00 | 0.00 | 64.24 | |

| | | | YSIDE CITYWIDE | 222 222 | | | PAGE 1 - 76 | |
|------------|----------|---------|------------------------|----------------------------|-------|---------|--|-----------------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | CCL CONGREGATE CARE PR BILL WEEK ENDING 5/2 | ROGRAM 24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | RPLUS |
| 242881 | 5/17/13 | 800000 | VISITING NURSE SERVICE | EPSTEIN, GEORGE | 20.00 | | 321.20 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 77 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242882 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ERAZO, ROSA | 8.00 | | 128.48 I | |
| | | | | CATEGORY | 8.00 | 0.00 | 128.48 | |

| | | | YSIDE CITYWIDE | | | | - | 78 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | F / 0 4 / 1 2 |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242883 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ESPEJO, FLORENC | 30.00 | | 481.80 I | |
| 242884 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ESPIN, CESAR | 50.50 | | 811.03 I | |
| | | | | CUSTOMER | 80.50 | 0.00 | 1,292.83 | |
| | | | | | | | | |
| | | | | CATEGORY | 80.50 | 0.00 | 1,292.83 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 79 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|-----------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242885 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ESPINAL, JOSE | 25.00 | | 401.50 I | |
| 242886 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ESPOSITO, ANTON | 15.00 | | 240.90 I | |
| 242887 | 4/26/13 | 800000 | VISITING NURSE SERVICE | ESTADES, MARIA | 6.00 | | 96.36 I | |
| 242888 | 5/03/13 | 800000 | VISITING NURSE SERVICE | ESTADES, MARIA | 6.00 | | 96.36 I | |
| | | | | CUSTOMER | 52.00 | 0.00 | 835.12 | |
| | | | | CATEGORY | 52.00 | 0.00 | 835.12 | |

| | | | YSIDE CITYWIDE | | | | - | 80 |
|-----------|----------|---------|------------------------|-----------------|-----------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242889 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ESTADES, MARIA | 30.00 | | 481.80 I | |
| 242890 | 5/17/13 | 800000 | VISITING NURSE SERVICE | EVERETT, SHIRLE | 21.00 | | 337.26 I | |
| | | | | CLICEOMED | F1 00 | 0.00 | | |
| | | | | CUSTOMER | 51.00 | 0.00 | 819.06 | |
| | | | | | | | | |
| | | | | CATEGORY | 51.00 | 0.00 | 819.06 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - | 81 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------|------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | | |
| | | | S A | LES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242891 | 5/17/13 | 000008 | VISITING NURSE SERVICE | FADEN, ROBIN | 50.00 | | 803.00 | I | |
| 242892 | 5/17/13 | 000008 | VISITING NURSE SERVICE | FAMBIATOU, PARA | 6.00 | | 96.36 | I | |
| 242893 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FAROUGIAS, ANGE | 9.00 | | 144.54 | I | |
| 242894 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FAY, JULIA | 31.25 | | 501.88 | I | |
| | | | | CUSTOMER | 96.25 | 0.00 | 1,545.78 | | |
| | | | | CATEGORY | 96.25 | 0.00 | 1,545.78 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 82 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | A |
| | | | Ç | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242895 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FERMIN, ORQUIDI | 16.00 | | 256.96 I | |
| | | | | | | | | |
| | | | | CATEGORY | 16.00 | 0.00 | 256.96 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 CCL CONGREGAT BILL WEEK ENI | TE CAF | 33 RE PROGRAM 5/24/13 |
|-----------------------|--------------------|-----------------------|---|----------------------------|---------------|---------|--|--------|-----------------------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242896 242897 | 2/15/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 3.00 20.00 | | 43.74 321.20 | I I | |
| | | | | CUSTOMER | 23.00 | 0.00 | 364.94 | | |
| | | | | CATEGORY | 23.00 | 0.00 | 364.94 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCSA | 84 |
|-----------------------|--------------------|-----------------------|---|------------------------------------|---------------|---------|------------------------------|---------|
| SALES UKN | ш # Оээч | LOC 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242898 242899 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | FERNANDEZ, ROSA FERREIRO, JOSEP | 6.00 19.50 | | 96.36 I 313.17 I | |
| | | | | CUSTOMER | 25.50 | 0.00 | 409.53 | |
| | | | | CATEGORY | 25.50 | 0.00 | 409.53 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 8 | 35 |
|-----------|------------|------------|------------------------|----------------|---------|---------|--------------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| | | | i | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| INVOICE# | DAIE | COSI NO | COSTOMER NAME | KEFEKENCE | 1100105 | IAX AMI | AMOUNT TIP | BOKFLOB |
| 242900 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FERRER, MARIE | 18.00 | | 289.08 I | |
| | | | | | | | | |
| | | | | CATEGORY | 18.00 | 0.00 | 289.08 | |

| ١ | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 86 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|----------|
| ١ | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | <u>.</u> |
| ı | | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 242901 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FIGUEROA, EDNA | 12.00 | | 192.72 I | |
| | | | | | CATEGORY | 12.00 | 0.00 | | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 87 | |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 | |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| ı | | | | | | | | | | |
| ı | 242902 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FIUMARA, ROSE | 53.00 | | 851.18 I | | |
| ı | | | | | | | | | | |
| ı | | | | | | | | | | |
| ı | | | | | CATEGORY | 53.00 | 0.00 | 851.18 | | |

| RUI | N DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 88 |
|-----|---------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| SAI | LES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | | Ş | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INV | VOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242 | 2903 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FLEITMAN, KLARA | 15.00 | | 240.90 I | |
| | | | | | | | | | |
| | | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 89 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242904 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FOLLETTO, JOHN | 12.00 | | 192.72 I | |
| | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | | 90 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|---------------|-----|---------------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LH | | F / O 4 / 1 O |
| | | | | SALES REGISTER | | | BILL WEEK END | ING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242905 | 5/03/13 | 000008 | VISITING NURSE SERVICE | FONG, ALEFINA | 5.00 | | 80.30 | I | |
| 242906 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FONG, ALEFINA | 15.00 | | 240.90 | I | |
| 242907 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FONTEBOA, GUILL | 34.75 | | 558.09 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 54.75 | 0.00 | 879.29 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 54.75 | 0.00 | 879.29 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 91 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | • |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242908 | 5/17/13 | 800000 | VISITING NURSE SERVICE | FREIJOSO, ROSA | 46.00 | | 738.76 I | |
| | | | | | | | | |
| | | | | CATEGORY | 46.00 | 0.00 | 738.76 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | , . |
|-----------|----------|---------|------------------------|-----------------|-------|---------|----------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | |
| | | | | SALES REGISTER | | | BILL WEEK ENDI | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | T TRUOMA | YP SURPLUS |
| 242909 | 5/17/13 | 000008 | VISITING NURSE SERVICE | FUNES, GEORGINA | 35.00 | | 562.10 | I |
| 242910 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GALLINA, VIRGIN | 9.00 | | 144.54 | I |
| | | | | CUSTOMER | 44.00 | 0.00 | 706.64 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 44.00 | 0.00 | 706.64 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - LTC NURSING HOM | 93 |
|-----------------------|--------------------|------------------|-----------------------------------|----------------|---------------|---------|-----------------------------|---------|
| SALES URN | ш # 0334 | LOC UUI | | SALES REGISTE | R | | BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 242911 242912 | 5/03/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE | | 4.00 16.00 | | 64.24 I 256.96 I | |
| 242912 | 5/1//13 | 000008 | VISITING NURSE SERVICE | GARAI, ANGELES | 16.00 | | 250.90 1 | |
| | | | | CUSTOMER | 20.00 | 0.00 | 321.20 | |
| | | | | _ | | | | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| RUN DATE 05 SALES JRNL | | SUP SUNNY | SIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | - 9 | 4 |
|---------------------------|-----------|-----------|---|----------------|---------------|---------|---------------------|--------|---------|
| DINES OIGH | 11 0331 1 | 100 001 | | SALES REGISTER | | | BILL WEEK ENI | DING | 5/24/13 |
| INVOICE# | DATE C | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | VISITING NURSE SERVICE VISITING NURSE SERVICE | - · · · · | 5.00 25.00 | | 80.30 401.50 | I I | |
| | | | | CUSTOMER | 30.00 | 0.00 | 481.80 | | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 95 | |
|-----------|------------|----------|------------------------|---------------|-------|---------|---------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/C | WALLS (LT |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242915 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GARCIA, OLGA | 30.00 | | 481.80 I | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 96 |
|-----------------------|---------|---------|-----------------------------------|----------------|-------|---------|-----------------------|---------|
| | - " | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242916 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GARCIA, URANIA | 15.00 | | 240.90 I | |
| | | | | | | | | |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE | PAGE 1 – 97 |
|---|-----------------------------|
| SALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY | CCL CONGREGATE CARE PROGRAM |
| SALES REGISTER | BILL WEEK ENDING 5/24/13 |
| INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TO | AX AMT AMOUNT TYP SURPLUS |
| 242917 2/15/13 000008 VISITING NURSE SERVICE GAYTANO, MIGUEL 3.00 | 43.74 I |
| CATEGORY 3.00 | 0.00 43.74 |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHC | , , |
|----------------------------|-------------------------------|----------------------------|--|----------------|------------------------|---------|----------------------------|------------|
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 242918 242919 242920 | 5/17/13 5/10/13 5/17/13 | 800000 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 32.00 7.00 35.00 | | 513.92 112.42 562.10 | I I |
| | | | | CUSTOMER | 74.00 | 0.00 | 1,188.44 | |
| | | | | CATEGORY | 74.00 | 0.00 | 1,188.44 | |

| RUN DATE (| 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 9 | 19 |
|------------|------------|------------|------------------------|--------|---------------|-------|---------|---------------|--------|-----------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | CCL CONGREGAT | re car | E PROGRAM |
| | | | S | SALES | REGISTER | | | BILL WEEK ENI | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | R | EFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 242921 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GO | LIGHTLY, OZEL | 55.75 | | 895.35 | I | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 55.75 | 0.00 | 895.35 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 100 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242922 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GOMEZ, JOSEFINA | 25.00 | | 401.50 I | |
| | | | | CATEGORY | 25.00 | 0.00 | 401.50 | |

| RUN DATE 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 101 |
|-------------------|------------|------------------------|-----------------|-------|---------|----------------|-----------------|
| SALES JRNL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | MEW/O WALLS (LT |
| | | i | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 242923 5/17/13 | 800000 | VISITING NURSE SERVICE | GOMEZ, ROSANA | 36.50 | | 586.19 | I |
| 242924 5/17/13 | 800000 | VISITING NURSE SERVICE | GOMEZ, VICTORIA | 33.00 | | 529.98 | I |
| | | | CUSTOMER | 69.50 | 0.00 | 1,116.17 | |
| | | | CATEGORY | 69.50 | 0.00 | 1,116.17 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | PAGE 1 - 10 ADU ADULT BILL WEEK ENDING | 5/24/13 |
|-----------------------|---------|---------|---|----------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242925 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GONZALEZ, CARME | 20.00 | | 321.20 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| | | | YSIDE CITYWIDE | | | | | 103 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | |
| | | | | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 242926 | 5/17/13 | 000008 | VISITING NURSE SERVICE | GONZALEZ, DOLOR | 35.00 | | 562.10 | I |
| | | | | | | | | |
| | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| | 05/22/13 - NL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - 104 ADU ADULT BILL WEEK ENDING | 5/24/13 |
|----------|-------------------------|---------|--------------------------------------|----------------------------|-------|---------|---|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242927 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GONZALEZ, JOSEF | 15.00 | | 240.90 I | |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 10 | 05 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | O WALLS (LT |
| | | | Ş | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 242928 | 5/17/13 | 000008 | VISITING NURSE SERVICE | GOVERDOVSKIY, N | 21.00 | | 337.26 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 21.00 | 0.00 | 337.26 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | - 10 |)6 |
|-----------------------|---------|------------|-----------------------------------|-----------------|--------|---------|-------------------------|------|---------|
| | _ " | | | LES REGISTER | | | BILL WEEK ENI | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242929 | 5/10/13 | 000008 | VISITING NURSE SERVICE | GOYES, ELBA | 16.00 | | 256.96 | I | |
| 242930 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GOYES, ELBA | 24.00 | | 385.44 | I | |
| 242931 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GRAVER, EDNA | 40.00 | | 642.40 | I | |
| 242932 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GRESSINE, ARNOL | 48.00 | | 770.89 | I | |
| 242933 | 5/10/13 | 800000 | VISITING NURSE SERVICE | GUEVARA, ELENA | 9.50 | | 152.57 | I | |
| 242934 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GUEVARA, ELENA | 84.00 | | 1,349.04 | I | |
| 242935 | 5/10/13 | 000008 | VISITING NURSE SERVICE | GUTIERREZ, ANGE | 12.00 | | 192.72 | I | |
| 242936 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GUTIERREZ, ANGE | 83.00 | | 1,332.99 | I | |
| | | | | CUSTOMER | 316.50 | 0.00 | 5,083.01 | | |
| | | | | CATEGORY | 316.50 | 0.00 | 5,083.01 | | |

| RUN DATE SALES JRN | | | | REG NY NY SALES REGISTER | | | PAGE 1 - 107 ADU ADULT BILL WEEK ENDING 5/24/13 | |
|-----------------------|---------|---------|------------------------|-----------------------------|-------|---------|---|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 242937 | 5/17/13 | 800000 | VISITING NURSE SERVICE | GUTIERREZ, JOSE | 56.00 | | 899.36 I | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| RUN DATE (| | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 1 VCP CHOICE LHCSA | .08 |
|----------------------------|-------------------------------|----------------------------|--|---|------------------------|---------|---------------------------------|---------|
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242938 242939 242940 | 5/17/13 5/10/13 5/17/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | HARRISON, GLORI HENAO, VICTORIA HENAO, VICTORIA | 46.50 4.00 20.00 | | 746.79 I 64.24 I 321.20 I | |
| 242940 | 5/11/13 | 000008 | VISITING NURSE SERVICE | HENAO, VICTORIA CUSTOMER | 70.50 | 0.00 | 1,132.23 | |
| | | | | CATEGORY | 70.50 | 0.00 | 1,132.23 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 109 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | AMH ADULT MENTAL | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242941 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HENDERSON, FAYE | 14.00 | | 224.84 I | |
| | | | | CATEGORY | 14.00 | 0.00 | 224.84 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 110 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 242942 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HENDY, BERNICE | 21.00 | | 337.26 I | |
| | | | | | | | | |
| | | | | CA EECODY | 21 00 | 0.00 | 227 26 | |
| | | | | CATEGORY | 21.00 | 0.00 | 337.26 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 111 | |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------------|------|
| ı | SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/2 | 4/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | PLUS |
| | 242943 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HENRIQUEZ, MARI | 47.00 | | 754.82 I | |
| | | | | | CATEGORY | 47.00 | 0.00 | 754.82 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | 112 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCS | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 242944 | 5/10/13 | 000008 | VISITING NURSE SERVICE | HERNANDEZ, JUAN | 1.00 | | 16.06 I | |
| 242945 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HERNANDEZ, JUAN | 36.00 | | 578.16 I | |
| | | | | CUSTOMER | 37.00 | 0.00 | 594.22 | |
| | | | | CATEGORY | 37.00 | 0.00 | 594.22 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | |
|-----------|----------|---------|------------------------|-----------------|-------|---------|-------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | • |
| | | | S A | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242946 | 5/17/13 | 000008 | VISITING NURSE SERVICE | HERRERA, ANGELA | 30.00 | | 481.80 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 114 | |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------------|---------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME W/O W | ALLS LT |
| ı | | | | Ş | SALES REGISTER | | | BILL WEEK ENDING 5/2 | 24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | PLUS |
| ı | | | | | | | | | |
| ı | 242947 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HERRERA, CLARA | 20.00 | | 321.20 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 115 | |
|-----------|------------|----------|------------------------|-----------------|-------|---------|--------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5 | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | SURPLUS |
| 242948 | 5/17/13 | 800000 | VISITING NURSE SERVICE | HUNGRIA, SABINA | 40.00 | | 642.40 I | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 116 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | | REG NY NY | | | LAA LOMBARDI AID | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242949 | 5/17/13 | 000008 | VISITING NURSE SERVICE | INOSTROZA, RAPH | 40.00 | | 642.40 I | |
| | | | | | | | | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | .17 | |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|-------------------|--------------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | MCA MATERNAL CHIL | D HEALTH ANT | |
| ı | | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 | |
| ı | | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| ı | | | | | | | | | | |
| ı | 242950 | 5/17/13 | 800000 | VISITING NURSE SERVICE | JACOME, HAIDEE | 20.00 | | 321.20 I | | |
| ı | | | | | | | | | | |
| ı | | | | | | | | | | |
| ı | | | | | CATEGORY | 20.00 | 0.00 | 321.20 | | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | - 11 HCSA | -8 |
|-----------------------|---------|------------|-----------------------------------|-----------------|-------|---------|------------------------|--------------|---------|
| | " | | | SALES REGISTER | | | BILL WEEK EN | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242951 | 5/10/13 | 000008 | VISITING NURSE SERVICE | JAKLITSCH, ELIZ | 16.00 | | 256.96 | I | |
| 242952 | 5/17/13 | 800000 | VISITING NURSE SERVICE | JAKLITSCH, ELIZ | 38.00 | | 610.28 | I | |
| 242953 | 5/17/13 | 800000 | VISITING NURSE SERVICE | JAMES, DAVINA | 30.00 | | 481.80 | I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,349.04 | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,349.04 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 11 | .9 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|-------------------------------|---------|
| SALES JRN | L # 0334 | TOC 001 | | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242954 | 5/17/13 | 800000 | VISITING NURSE SERVICE | JAMISON, BESSIE | 8.00 | | 128.48 I | |
| | | | | CATEGORY | 8.00 | 0.00 | 128.48 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCS | 120 |
|-----------------------|--------------------|-----------------------|---|----------------|----------------|---------|-----------------------------|---------|
| SALES UKN | T # 0334 | TOC 001 | | SALES REGISTER | | | BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | SURPLUS |
| 242955 242956 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 66.00 12.00 | | 1,059.96 I 192.72 I | |
| | | | | CUSTOMER | 78.00 | 0.00 | 1,252.68 | |
| | | | | CATEGORY | 78.00 | 0.00 | 1,252.68 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 12: | 1 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | HOA HOSPICE ADULT | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242957 | 5/17/13 | 800000 | VISITING NURSE SERVICE | JIANNARAS, ANNA | 70.00 | | 1,124.20 I | |
| | | | | CATEGORY | 70.00 | 0.00 | 1,124.20 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | | 22 |
|-----------------------|--------------------|-----------------------|---|------------------------------------|----------------|---------|-------------------------|-----|---------|
| | 2 0331 | 200 001 | | SALES REGISTER | | | BILL WEEK END | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242958 242959 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | JIMENEZ, ALTAGR JORRIN, HORTENS | 31.50 24.00 | | 505.89 385.44 | I | |
| 242939 | 5/1//13 | 000008 | VISITING NORSE SERVICE | JORRIN, HORIENS | 24.00 | | 303.44 | | |
| | | | | CUSTOMER | 55.50 | 0.00 | 891.33 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 55.50 | 0.00 | 891.33 | | |

| RUN DATE (SALES JRNI | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 123 |
|--------------------------|---------|---------|--------------------------------------|----------------|-------|---------|-----------------------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 242960 | 5/17/13 | 800000 | VISITING NURSE SERVICE | KARPMAN, FRANK | 2.00 | | 32.12 I | |
| | | | | CATEGORY | 2.00 | 0.00 | 32.12 | |

| | | 05/22/13 - L # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - HOA HOSPICE ADU BILL WEEK ENDIN | |
|---|----------|------------------------|---------|--------------------------------------|-----------------------------|-------|---------|--|-----------|
| I | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 2 | 242961 | 5/17/13 | 800000 | VISITING NURSE SERVICE | KHAN, MARGARET | 19.00 | | 305.14 I | |
| | | | | | CATEGORY | 19.00 | 0.00 | 305.14 | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY A L E S R E G I S T E R | | | PAGE 1 - : VCP CHOICE LHCSA BILL WEEK ENDING | |
|----------|---------|---------|-------------------------------------|--------------------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242962 | 5/17/13 | 800000 | VISITING NURSE SERVICE | KILIMLIAN, PEPR | 56.00 | | 899.36 I | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 ADU ADULT | | |
|-----------------------|--------------------|-----------------------|---|-----------------|-------|---------|---------------------|-----|---------|
| | | | 5 | SALES REGISTER | | | BILL WEEK END | ING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242963 242964 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 83.25 | | 1,337.00 48.18 | I | |
| 242965 | 5/17/13 | 000008 | VISITING NURSE SERVICE | KOESTNER, MARIE | 3.00 | | 48.18 | Ī | |
| | | | | CUSTOMER | 89.25 | 0.00 | 1,433.36 | | |
| | | | | CATEGORY | 89.25 | 0.00 | 1,433.36 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | IYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHO BILL WEEK ENDI | CSA |
|----------------------------|-------------------------------|----------------------------|--|---|------------------------|---------|--|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 242966 242967 242968 | 5/17/13 5/10/13 5/17/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | KOSTIKIAN, MARI KOUTROUBAS, THE KOUTROUBAS, THE | 25.00 8.00 40.00 | | 401.50 128.48 642.40 | I I I |
| | | | | CUSTOMER | 73.00 | 0.00 | 1,172.38 | |
| | | | | CATEGORY | 73.00 | 0.00 | 1,172.38 | |

| RUN DATE (SALES JRN) | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 12: ADU ADULT BILL WEEK ENDING | 8 5/24/13 |
|--------------------------|---------|---------|--------------------------------------|-----------------------------|-------|---------|---|--------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242969 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LAMBERT, HARLEY | 3.00 | | 48.18 I | |
| | | | | CATEGORY | 3.00 | 0.00 | 48.18 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | L29 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242970 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LARA-MORA, BELE | 55.00 | | 883.30 I | |
| | | | | CATEGORY | 55.00 | 0.00 | 883.30 | |

| | 05/22/13 - NL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 130 ADU ADULT | |
|----------|-------------------------|---------|--------------------------------------|----------------|-------|---------|---------------------------|--------|
| | " | | | SALES REGISTER | | | | /24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP S | URPLUS |
| 242971 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LASAK, MICHAEL | 15.00 | | 240.90 I | |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE | : 05/22/13 - | - SUP SUNN | NYSIDE CITYWIDE | | | | PAGE 1 - | 131 |
|----------|--------------|------------|------------------------|----------------|-------|---------|------------------|----------------|
| SALES JR | NL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | EW/O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| | | | | | | | | |
| 242972 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LEE, KATHLEEN | 24.00 | | 385.44 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 24.00 | 0.00 | 385.44 | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 13 | 32 | |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | | |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 | |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| | 242973 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LEGASPI, CECILI | 12.00 | | 192.72 I | | |
| | | | | | CATEGORY | 12.00 | 0.00 | 192.72 | | |
| 1 | | | | | CAIEGORI | 12.00 | 0.00 | 174.14 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 133 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242974 | 5/17/13 | 000008 | VISITING NURSE SERVICE | LEICHARDT, MAGD | 9.00 | | 144.54 I | |
| 242975 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LENDOIRO, JUAN | 15.75 | | 252.95 I | |
| | | | | CUSTOMER | 24.75 | 0.00 | 397.49 | |
| | | | | | | | | |
| | | | | CATEGORY | 24.75 | 0.00 | 397.49 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 1 VCP CHOICE LHCSA | 34 |
|-----------------------|--------------------|------------------|---|---------------------------------|---------------|---------|--------------------------------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242976 242977 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LEWIS, CATHERIN | 56.00 | | 899.36 I 64.24 I | |
| 242977 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | LINARES, ELSA LITSAS, MARTHA | 4.00 34.00 | | 546.04 I | |
| | | | | CUSTOMER | 94.00 | 0.00 | 1,509.64 | |
| | | | | CATEGORY | 94.00 | 0.00 | 1,509.64 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 135 |
|-----------------------|--------------------|-----------------------|---|----------------|---------------|---------|-----------------------|---------|
| | - " | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242979 242980 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 5.00 36.00 | | 80.30 I 578.16 I | |
| 212500 | 3,17,13 | 00000 | VIDITING NORDE BERVICE | CUSTOMER | 41.00 | 0.00 | 658.46 | |
| | | | | COSTONER | 11.00 | 0.00 | 030.10 | |
| | | | | CATEGORY | 41.00 | 0.00 | 658.46 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | .36 |
|-----------|------------|----------|------------------------|----------------|---------|---------|------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | : | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 111101011 | 22 | 0001 1.0 | | 1121 2112102 | 1100110 | | 11100111 111 | 20112 202 |
| 242981 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LONDONO, AMIRA | 60.00 | | 963.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 60.00 | 0.00 | 963.60 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 13 | 7 |
|---|-----------|-------------|----------|------------------------|-----------------------|-------|---------|--------------------|-------------|
| ١ | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | O WALLS (LT |
| ١ | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ١ | 0.4.0.0.0 | E /1 E /1 2 | 00000 | | T 017D 0170 1/2 D T 1 | 20.00 | | 401 00 7 | |
| ١ | 242982 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LONDONO, MARIA | 30.00 | | 481.80 I | |
| ١ | | | | | | | | | |
| ١ | | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |
| ı | | | | | CALEGORI | 30.00 | 0.00 | 401.00 | |

| RUN DATE 05/2 SALES JRNL # | 22/13 - SUP SUNN 0334 LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - 13 VCP CHOICE LHCSA BILL WEEK ENDING | 8 5/24/13 |
|-------------------------------|----------------------------------|---|---------------------------------|----------------|---------|---|-----------|
| INVOICE# DA | TE CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | .7/13 000008 .7/13 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | LOPEZ, ANGELICA LOPEZ, MARIA | 35.00 20.00 | | 562.10 I 321.20 I | |
| | | | CUSTOMER | 55.00 | 0.00 | 883.30 | |
| | | | CATEGORY | 55.00 | 0.00 | 883.30 | |

| RUN DATE (| 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 13 | 9 |
|------------|------------|------------|------------------------|---------|------------|-------|---------|---------------|--------|-----------|
| SALES JRNI | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | CCL CONGREGA' | FE CAR | E PROGRAM |
| | | | S | SALES R | EGISTE | R | | BILL WEEK EN | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REF | ERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 242985 | 5/17/13 | 000008 | VISITING NURSE SERVICE | LUCE | S, LETICIA | 19.00 | | 305.16 | I | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 19.00 | 0.00 | 305.16 | | |

| | | | YSIDE CITYWIDE | | | | | | - 140 |) |
|-----------|----------|---------|------------------------|------------------|-----------|-------|---------|----------------|-------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY SALES R | NY | ת יד | | VCP CHOICE LE | | 5/24/13 |
| | | | S | л сэцко | E G I S I | E K | | DILL MEEV FINI | JING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242986 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LUNA, | YSABEL | 40.00 | | 642.40 | I | |
| | | | | | CATEGORY | 40.00 | 0.00 | 642.40 | | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 141 |
|---|-----------|------------|------------|------------------------|----------------|-------|---------|-------------------|-------------|
| ١ | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | ARE PROGRAM |
| | | | | Ş | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 242987 | 5/17/13 | 800000 | VISITING NURSE SERVICE | LYMN, ANGIE | 35.00 | | 562.10 I | |
| | | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 142 |
|-----------------------|--------------------|------------------|---|--------------------------------|----------------|---------|-----------------------|-----------|
| DILLED GIAN | 11 0331 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 242988 242989 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | LYNCH, JAMES MACCHIA, CATHY | 12.00 36.00 | | 192.72 I 578.16 I | |
| | | | | CUSTOMER | 48.00 | 0.00 | 770.88 | |
| | | | | CATEGORY | 48.00 | 0.00 | 770.88 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 14 | - |
|-----------|---------------|---------|------------------------|-----------------|-------|---------|--------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | CCL CONGREGATE CAR | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | _ , _ , _ , _ | | | | | | | |
| 242990 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MAGILLIGAN, LOR | 30.00 | | 481.80 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE S | REG NY NY SALES REGISTER | | | PAGE 1 VCP CHOICE LE | | 5/24/13 |
|----------------------------|-------------------------------|----------------------------|--|---|------------------------|---------|---------------------------|-------------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242991 242992 242993 | 5/17/13 5/17/13 5/17/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | MAIO, CHINGTSAI MALDONADO, DOMI MALDONADO, MARI | 4.00 12.00 25.00 | | 64.24 192.72 401.50 | I I I | |
| | | | | CUSTOMER | 41.00 | 0.00 | 658.46 | | |
| | | | | CATEGORY | 41.00 | 0.00 | 658.46 | | |

| | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | L45 |
|---|-----------|------------|----------|------------------------|-----------------|--------|-------------|------------------|---------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | V/O WALLS (LT |
| | | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | INVOICEN | DITTE | CODI NO | CODIONER WILL | REI ERENCE | 110010 | 11111 11111 | 11100111 111 | BORT HOD |
| | 242994 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MANOS, VASILIKE | 45.00 | | 722.70 I | |
| | | | | | | | | | |
| | | | | | CATEGORY | 45.00 | 0.00 | 722.70 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 146 |
|-----------|------------|------------|------------------------|-----------------|--------|---------|---------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LH | CSA |
| | | | S | SALES REGISTER | | | BILL WEEK END | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 242995 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MARAVELAKIS, JO | 47.50 | | 762.85 | I |
| 242996 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARINO, ANN | 30.00 | | 481.80 | I |
| 242997 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARMOL ESPINAL, | 25.00 | | 401.50 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 102.50 | 0.00 | 1,646.15 | |
| | | | | | | | | |
| | | | | CATEGORY | 102.50 | 0.00 | 1,646.15 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | L47 |
|-----------|------------|----------|------------------------|---------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | LTC NURSING HOME | • |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 242998 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARMOL, LIDIA | 43.00 | | 690.58 I | |
| | | | | | | | | |
| | | | | CATEGORY | 43.00 | 0.00 | 690.58 | |

| | | | YSIDE CITYWIDE | | | | | - 148 | |
|-----------|----------|---------|------------------------|----------------|-------|---------|----------------|-------------|--|
| SALES JRN | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | | |
| | | | 2 | SALES REGISTER | 2 | | BILL WEEK ENDI | ING 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | T TRUOMA | TYP SURPLUS | |
| 242999 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARTE, JOSE | 7.25 | | 116.44 | I | |
| | | | | | | | | | |
| | | | | CATEGORY | 7.25 | 0.00 | 116.44 | | |

| RUN DATE | 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 149 |
|-----------|-----------|------------|------------------------|-----------------|-------|---------|------------------|-------------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE C | ARE PROGRAM |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 243000 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ELENA | 69.75 | | 1,120.19 I | |
| | | | | | | | | |
| | | | | CATEGORY | 69.75 | 0.00 | 1,120.19 | |

| RUN DATE O SALES JRNI | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | 2 | | PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN | |
|--------------------------|--|--------------------------------------|--|------------------------------------|---------------------------------|---------|--|-----------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243002 243003 | 5/17/13 5/10/13 5/17/13 5/17/13 | 000008 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | MARTINEZ, MARTA MARTINEZ, MARTA | 30.00 6.00 29.75 40.00 | | 481.80 I 96.36 I 477.79 I 1,349.04 I | • |
| | | | | CUSTOMER | 105.75 | 0.00 | 2,404.99 | |
| | | | | CATEGORY | 105.75 | 0.00 | 2,404.99 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 151 | |
|-----------|------------|----------|------------------------|-----------------|-------|---------|-----------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O V | VALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/ | /24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | JRPLUS |
| | | | | | | | | |
| 243005 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ROSAL | 31.25 | | 501.89 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 31.25 | 0.00 | 501.89 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 15 ADU ADULT | 52 |
|-----------------------|---------|---------|--------------------------------------|-----------------|-------|---------|--------------------------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243006 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MARTINEZ, ROSAL | 9.00 | | 144.54 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| | | | YSIDE CITYWIDE | | | | | - 153 | |
|-----------|----------|---------|------------------------|----------------|-------|---------|----------------|-------------|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDI | ING 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | TYP SURPLUS | |
| 243007 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MATOS, ROSA | 35.75 | | 574.15 | I | |
| | | | | | | | | | |
| | | | | CATEGORY | 35.75 | 0.00 | 574.15 | | |

| | | | YSIDE CITYWIDE | | | | 11102 | - 15 | 4 |
|------------------|--------------------|------------------|---|------------------------------------|-----------------|---------|----------------------------|--------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY ALES REGISTER | | | ADU ADULT BILL WEEK END | TNC | 5/24/13 |
| | | | | ALLO RECIDIER | | | DILL WEEK BIND | JING | 3/21/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 242000 | E /17 /13 | 000000 | WIGHTING MIDGE GEDVICE | MARZONE EDANGE | 62.00 | | 1 011 70 | - | |
| 243008 243009 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | MAZZONE, FRANCE MCBRAYER, SYLVI | 63.00 120.00 | | 1,011.78 1,927.20 | I T | |
| 213003 | 3/1//13 | 000000 | VIBILING NORDE BERVICE | | | | | | |
| | | | | CUSTOMER | 183.00 | 0.00 | 2,938.98 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 183.00 | 0.00 | 2,938.98 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 55 |
|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|-------------|
| SALES JRN | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | 5 /0 A /1 0 |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243010 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MCGUIRE, HELEN | 84.00 | | 1,349.04 I | |
| | | | | | | | | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,349.04 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 156 |
|-----------------------|--------------------|-----------------------|---|------------------------------------|---------------|---------|-----------------------|-----------|
| 511225 014 | .2 ,, 0001 | 200 001 | | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243011 243012 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | MCPARTLAND, PHI MEGALOUDIS, CAR | 12.00 4.00 | | 192.72 I 64.24 I | |
| | | | | CUSTOMER | 16.00 | 0.00 | 256.96 | |
| | | | | CATEGORY | 16.00 | 0.00 | 256.96 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 1 VCP CHOICE LHCSA | L57 |
|-----------------------|---------|---------|--------------------------------------|-----------------|--------|---------|--------------------------------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243013 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MEGUERDITCHIAN, | 40.50 | | 650.43 I | |
| 243014 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MEJIA, CLAUDIO | 49.00 | | 786.94 I | |
| 243015 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MEJIA, MARINA | 24.00 | | 385.44 I | |
| | | | | CUSTOMER | 113.50 | 0.00 | 1,822.81 | |
| | | | | CATEGORY | 113.50 | 0.00 | 1,822.81 | |

| RUN DATE 05/ SALES JRNL # | /22/13 - SUP SUNN # 0334 LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 1! LTC NURSING HOMEW BILL WEEK ENDING | 58 /O WALLS (LT 5/24/13 |
|------------------------------|-------------------------------------|---|-----------------------------|---------------|---------|--|-------------------------------|
| INVOICE# D | DATE CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | /10/13 000008 /17/13 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | - , | 8.00 31.50 | | 128.48 I 505.90 I | |
| | | | CUSTOMER | 39.50 | 0.00 | 634.38 | |
| | | | CATEGORY | 39.50 | 0.00 | 634.38 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 159 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 5/24/13 |
|-----------------------|--------------------|-----------------------|--|-----------------------------|---------------|---------|---|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 243018 243019 | 5/10/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | • | 5.00 20.00 | | 80.30 I 321.20 I |
| | | | | CUSTOMER | 25.00 | 0.00 | 401.50 |
| | | | | CATEGORY | 25.00 | 0.00 | 401.50 |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | L60 |
|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | |
| | | | i | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243020 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MENDOZA, JULIO | 35.00 | | 562.10 I | |
| | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| RUN DATE SALES JRN | | | | REGNY NY SALES REGISTER | | | PAGE 1 - 16 ADU ADULT BILL WEEK ENDING | 5/24/13 |
|-----------------------|---------|---------|------------------------|----------------------------|-------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243021 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MENDOZA, RAFAEL | 6.00 | | 96.36 I | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| | 05/22/13 - L # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | - 16 | 52 |
|-----------|------------------------|---------|-----------------------------------|---------------------------|--------|---------|-------------------------|----------|---------|
| SALES URN | ш # 0334 | TOC 001 | | REGNY NY ALES REGISTER | | | BILL WEEK END | | 5/24/13 |
| | | | _ | | | | | | . , . |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243022 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MIRANDA, LUIS | 23.75 | | 381.43 | I | |
| 243022 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MONSERRAT, DORI | 13.50 | | 216.81 | <u>+</u> | |
| | | | | • | | | | | |
| 243024 | 5/03/13 | 000008 | VISITING NURSE SERVICE | MONTOYA, ROSALB | 4.00 | | 64.24 | Τ | |
| 243025 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MONTOYA, ROSALB | 20.50 | | 329.23 | I | |
| 243026 | 5/17/13 | 800000 | VISITING NURSE SERVICE | MORAITIS, AGATH | 30.00 | | 481.80 | I | |
| 243027 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MORALES, ANGELI | 42.00 | | 674.52 | I | |
| 243028 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MORALES, CARMEN | 24.50 | | 393.47 | I | |
| 243029 | 5/10/13 | 000008 | VISITING NURSE SERVICE | MORILLO, MARICE | 20.00 | | 321.20 | I | |
| 243030 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MORILLO, MARICE | 25.00 | | 401.50 | I | |
| 243031 | 5/17/13 | 000008 | VISITING NURSE SERVICE | MULLER, ROBERT | 37.50 | | 602.25 | I | |
| 243032 | 5/17/13 | 000008 | VISITING NURSE SERVICE | NAGY, GEORGE | 44.00 | | 706.64 | I | |
| | | | | , | | | | | |
| | | | | CUSTOMER | 284.75 | 0.00 | 4,573.09 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 284.75 | 0.00 | 4,573.09 | | |

| | | 05/22/13 - L # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 1 HOA HOSPICE ADULT BILL WEEK ENDING | |
|---|---------|------------------------|---------|--------------------------------------|-----------------------------|-------|---------|---|---------|
| I | NVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 2 | 43033 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NANIS, KOSTAS | 20.00 | | 321.20 I | |
| | | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 164 | 1 |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------------|-----------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CARE | E PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243034 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NAVARRO, MARIA | 20.00 | | 321.20 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 165 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|------------------|---------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| ı | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 243035 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NIDO, MICHAEL | 48.75 | | 782.93 I | |
| ı | | | | | | | | | |
| ı | | | | | | | | | |
| ı | | | | | CATEGORY | 48.75 | 0.00 | 782.93 | |

| RUN DATE (| 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 16 | 56 |
|------------|------------|------------|------------------------|--------|---------------|-------|---------|---------------|--------|------------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | CCL CONGREGAT | CE CAR | RE PROGRAM |
| | | | S | SALES | REGISTER | | | BILL WEEK ENI | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | RI | EFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 243036 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NII | ETO RAMOS, JO | 63.00 | | 1,011.78 | I | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 63.00 | 0.00 | 1,011.78 | | |

| RUN DATE | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHC | |
|------------|----------|-----------------------|--------------------------------------|----------------|--------|---------|----------------------------|------------|
| SALES URN. | ш # 0334 | TOC 001 | | ALES REGISTEI | R | | BILL WEEK ENDI | - |
| | | | _ | | | | | -,, |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243037 | 5/03/13 | 000008 | VISITING NURSE SERVICE | NIEVES, NANCY | 10.00 | | 160.60 | т |
| 243038 | 5/03/13 | 000008 | VISITING NURSE SERVICE | NIEVES, NANCY | 20.00 | | 321.20 | Ī |
| 243039 | 5/10/13 | 000008 | VISITING NURSE SERVICE | NIEVES, NANCY | 10.00 | | 160.60 | _ I |
| 243040 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NIEVES, NANCY | 40.50 | | 650.43 | I |
| 243041 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NINO, CARMEN | 20.00 | | 321.20 | I |
| 243042 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NOBLIN, ELOISE | 15.00 | | 240.90 | I |
| | | | | CUSTOMER | 115.50 | 0.00 | 1,854.93 | |
| | | | | CATEGORY | 115.50 | 0.00 | 1,854.93 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | NYSIDE CITYWIDE | | | | PAGE 1 - | 168 |
|----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------------|
| SALES JR | NL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243043 | 5/17/13 | 000008 | VISITING NURSE SERVICE | NOBOADESALAZAR, | 26.00 | | 417.56 I | |
| | | | | | | | | |
| | | | | CATEGORY | 26.00 | 0.00 | 417.56 | |

| | | | YSIDE CITYWIDE | DEG NV NV | | | PAGE 1 - | |
|------------|----------|---------|------------------------|----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRNI | L # U334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243044 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NOGUE, FIDELINA | 20.00 | | 321.20 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | |

| | 05/22/13 - NL # 0334 | | | REGNY NY SALES REGISTER | | | PAGE 1 - 17 ADU ADULT BILL WEEK ENDING | 70 5/24/13 |
|----------|-------------------------|---------|------------------------|----------------------------|-------|---------|--|---------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243045 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NOZZI, CONO | 3.00 | | 48.18 I | |
| | | | | CATEGORY | 3.00 | 0.00 | 48.18 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 71 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | rL # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243046 | 5/17/13 | 800000 | VISITING NURSE SERVICE | NUZIALE, CONCET | 40.00 | | 642.40 I | |
| | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 17 | 2 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243047 | 5/17/13 | 800000 | VISITING NURSE SERVICE | OCAMPO, WILSON | 6.00 | | 96.36 I | |
| | | | | | | | | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 173 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243048 | 5/17/13 | 800000 | VISITING NURSE SERVICE | OCHOA, LUIS | 39.00 | | 626.34 I | |
| | | | | CATEGORY | 39.00 | 0.00 | 626.34 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 174 |
|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | N/O WALLS (LT |
| | | | i | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243049 | 5/17/13 | 800000 | VISITING NURSE SERVICE | OLVERA, ROSALIA | 49.00 | | 786.94 I | |
| | | | | CATECODY | 49.00 | | | |
| | | | | CATEGORY | 49.00 | 0.00 | 780.94 | |

| | | | YSIDE CITYWIDE | | | | | - 17 | 75 |
|-----------|----------|---------|------------------------|---|-------|---------|---------------|------|----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LI | | F /04/10 |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243050 | 5/10/13 | 000008 | VISITING NURSE SERVICE | - · · · · · · · · · · · · · · · · · · · | 40.00 | | 642.40 | I | |
| 243051 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PANASKAROLIDIS, | 32.00 | | 513.92 | I | |
| | | | | CUSTOMER | 72.00 | 0.00 | 1,156.32 | | |
| | | | | CATEGORY | 72.00 | 0.00 | 1,156.32 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1' | 76 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | O WALLS (LT |
| | | | S | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 243052 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PANDYA, HANSABE | 15.75 | | 252.95 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 15.75 | 0.00 | 252.95 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | L77 | |
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| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 | |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| 040050 | 5 /4 F /4 O | | | | 04 55 | | 205 40 - | | |
| 243053 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PANTALEONDEREN, | 24.75 | | 397.49 I | | |
| | | | | | | | | | |
| | | | | GA EDGODY | 24 75 | 0.00 | 207.40 | | |
| | | | | CATEGORY | 24.75 | 0.00 | 397.49 | | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 178 | |
|-----------|----------|---------|------------------------|-----------------|-------|---------|--------------------------|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 243054 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PAOLONI, MARY | 9.00 | | 144.54 I | |
| 243055 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PAPAS, CONSTANT | 2.00 | | 32.12 I | |
| | | | | CUSTOMER | 11.00 | 0.00 | 176.66 | |
| | | | | | | | | |
| | | | | CATEGORY | 11.00 | 0.00 | 176.66 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE L | - 15 | 79 |
|-----------------------|----------|-----------------------|--------------------------------------|-----------------|--------|---------|------------------------|------|---------|
| Brilles orav | 1 1 0331 | 100 001 | | ALES REGISTER | | | BILL WEEK EN | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243056 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PAPAZIAN, MANNI | 50.00 | | 803.00 | I | |
| 243057 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PAPOUTSIS, MARY | 9.00 | | 144.54 | I | |
| 243058 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PAPP, TEREZIA | 3.00 | | 48.18 | I | |
| 243059 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PARETTI, MARIE | 56.00 | | 899.36 | I | |
| 243060 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PENA, VICTORIA | 41.75 | | 670.51 | I | |
| 243061 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PENAGOS, MARIA | 24.50 | | 393.47 | I | |
| 243062 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PEREZ MONSER, C | 49.00 | | 786.94 | I | |
| 243063 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PEREZ, GLADYS | 30.00 | | 481.80 | Ī | |
| 243064 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PEREZ, JOAOUIN | 30.00 | | 481.80 | I | |
| 243065 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PHILIPPS, MARY | 40.00 | | 642.40 | I | |
| | | | | CUSTOMER | 333.25 | 0.00 | 5,352.00 | | |
| | | | | CATEGORY | 333.25 | 0.00 | 5,352.00 | | |

| | | | YSIDE CITYWIDE | DEC MY MY | | | - | 180 |
|-----------|----------|---------|------------------------|----------------------------|-------|---------|-------------------------------|---------|
| SALES JRN | ь # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243066 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PICCARD, ESTHER | 3.00 | | 48.18 I | |
| | | | | | | | | |
| | | | | CATEGORY | 3.00 | 0.00 | 48.18 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE | DEC MY MY | | | - | - 18 | 31 |
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| SALES URN | ь # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY S A L E S R E G I S T E R | 2 | | VCP CHOICE LE | | 5/24/13 |
| T1770 T G77 | | GTTGT 170 | GUGEOVED MAN | | | | 3140777777 | | GIID DI IIG |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243067 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PINEDA, EMILIA | 31.00 | | 497.86 | I | |
| 243068 | 5/10/13 | 000008 | VISITING NURSE SERVICE | PIZARRO, BARBAR | 7.00 | | 112.42 | I | |
| 243069 | 5/17/13 | 000008 | VISITING NURSE SERVICE | PIZARRO, BARBAR | 34.50 | | 554.08 | I | |
| 243070 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PLACIDO, GENARO | 27.00 | | 433.62 | I | |
| 243071 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PLACIDO, MERCED | 36.00 | | 578.16 | I | |
| | | | | CUSTOMER | 135.50 | 0.00 | 2,176.14 | | |
| | | | | CATEGORY | 135.50 | 0.00 | 2,176.14 | | |

| | | | YSIDE CITYWIDE | | | | | 182 |
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| SALES | JRNL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDIN | NG 5/24/13 |
| INVOIC | E# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243072 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PLASENZOTTI, NE | 9.00 | | 144.54 | I |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 18 | 83 |
|------------|----------|---------|------------------------|----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRNI | L # 0334 | TOG 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243073 | 5/17/13 | 000008 | VISITING NURSE SERVICE | POGGI, EMERITA | 36.00 | | 578.16 I | |
| | | | | | | | | |
| | | | | CATEGORY | 36.00 | 0.00 | 578.16 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 13 | 84 |
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| SALES JRN | IL # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243074 | 5/17/13 | 800000 | VISITING NURSE SERVICE | POLANCO, JUAN | 27.00 | | 433.63 I | |
| | | | | CATEGORY | 27.00 | 0.00 | 433.63 | |

| | | | YSIDE CITYWIDE | DEC NV NV | | | - | - 18 | 35 |
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| SALES JRN | L # U334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LI | | 5/24/13 |
| | | | ~ | | - | | 5111 Will 11. | 2110 | 3,21,13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 0.40055 | E /4 E /4 O | | | | 20.00 | | 401 00 | _ | |
| 243075 | 5/17/13 | 000008 | VISITING NURSE SERVICE | POLITIS, HELEN | 30.00 | | 481.80 | Τ | |
| 243076 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PONCE, ALICIA | 40.00 | | 642.40 | I | |
| 243077 | 5/17/13 | 800000 | VISITING NURSE SERVICE | PULLIZA, DIANNE | 34.25 | | 550.06 | I | |
| 243078 | 5/17/13 | 800000 | VISITING NURSE SERVICE | QUINONES, MARIA | 9.00 | | 144.54 | I | |
| 243079 | 5/17/13 | 800000 | VISITING NURSE SERVICE | QUINTERO, INES | 28.00 | | 449.68 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 141.25 | 0.00 | 2,268.48 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 141.25 | 0.00 | 2,268.48 | | |
| | | | | CAILGORI | 141.23 | 0.00 | 4,200.40 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | - 186 |
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| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HO | DMEW/O WALLS (LT |
| | | | \$ | SALES REGISTEI | R | | BILL WEEK END | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 1 | TYP SURPLUS |
| 243080 | 3/22/13 | 000008 | VISITING NURSE SERVICE | QUIZHPI, MARIA | 7.00 | | 112.42 | I |
| 243081 | 5/10/13 | 800000 | VISITING NURSE SERVICE | QUIZHPI, MARIA | 7.00 | | 112.42 | I |
| 243082 | 5/17/13 | 800000 | VISITING NURSE SERVICE | QUIZHPI, MARIA | 35.00 | | 562.10 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 49.00 | 0.00 | 786.94 | |
| | | | | | | | | |
| | | | | CATEGORY | 49.00 | 0.00 | 786.94 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LH | - 18 | 37 |
|-----------------------|--------------------|-----------------------|---|--------------------------------|----------------|---------|-------------------------|------|---------|
| | _ " | | | SALES REGISTER | | | BILL WEEK END | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243083 243084 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | QUIZHPI, MARIA RAJA, HANIFA | 24.00 18.00 | | 385.44 289.08 | I | |
| 243004 | 3/11/13 | 000000 | VISITING NORSE SERVICE | KAOA, HANIFA | | | | | |
| | | | | CUSTOMER | 42.00 | 0.00 | 674.52 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 42.00 | 0.00 | 674.52 | | |

| | DATE 05/22/ | | NNYSIDE CITYWIDE L SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 18 ADU ADULT | 88 |
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| | is order ii os | J1 LOC 00. | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVC | OICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 2430 | 5/17/ | 13 000008 | VISITING NURSE SERVICE | RAJESWARI, BODD | 9.00 | | 144.54 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 189 | |
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| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAP LOMBARDI AIDES PEDIA | TRIC |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 5/24/ | 13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPL | US |
| 243086 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RAMIREZ, ANA | 39.50 | | 634.38 I | |
| | | | | | | | | |
| | | | | CATEGORY | 39.50 | 0.00 | 634.38 | |

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|-----------|----------|---------|------------------------|----------------|-------|---------|----------------|-------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | |
| | | | i | SALES REGISTER | | | BILL WEEK END | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | TYP SURPLUS |
| 243087 | 5/10/13 | 000008 | VISITING NURSE SERVICE | RAMIREZ, JUANA | 1.00 | | 16.06 | I |
| 243088 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RAMIREZ, JUANA | 42.50 | | 682.55 | I |
| | | | | CUSTOMER | 43.50 | 0.00 | 698.61 | |
| | | | | COSTOMER | 43.50 | 0.00 | 090.01 | |
| | | | | | | | | |
| | | | | CATEGORY | 43.50 | 0.00 | 698.61 | |

| RUN DATE 0 | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 19 | 1 |
|------------|------------|------------|------------------------|-----------------|-------|---------|--------------|--------|-------------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING | HOME W | /O WALLS LT |
| | | | i | SALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243089 | 5/10/13 | 000008 | VISITING NURSE SERVICE | RAMLALL, LILOWT | 6.00 | | 96.36 | I | |
| | 5/17/13 | 800000 | VISITING NURSE SERVICE | • | 36.75 | | 590.21 | I | |
| | | | | CUSTOMER | 42.75 | 0.00 | 686.57 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 42.75 | 0.00 | 686.57 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 19 | 2 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 243091 | 5/17/13 | 000008 | VISITING NURSE SERVICE | RAMOS, ISMAEL | 6.00 | | 96.36 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| RUN DATE 05/22/13 SALES JRNL # 0334 | | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 193 VCP CHOICE LHCSA BILL WEEK ENDING 5/24/13 |
|--|--------------------------------------|--|--|--------------------------------|---------|--|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 243092 4/12/13 243093 5/10/13 243094 5/17/13 243095 5/17/13 | 000008 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | RAMPHAL, INDRIA RAMPHAL, INDRIA RAMPHAL, INDRIA REINA, JOSE | 4.00 8.00 20.00 16.00 | | 64.24 I 128.48 I 321.20 I 256.96 I |
| | | | CUSTOMER | 48.00 | 0.00 | 770.88 |
| | | | CATEGORY | 48.00 | 0.00 | 770.88 |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 194 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | IL # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243096 | 5/03/13 | 000008 | VISITING NURSE SERVICE | RENDON, EDUARDO | 4.00 | | 64.24 | I |
| 243097 | 5/03/13 | 800000 | VISITING NURSE SERVICE | RENDON, EDUARDO | 4.00 | | 64.24 | I |
| 243098 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RENDON, EDUARDO | 20.00 | | 321.20 | I |
| | | | | | | | | |
| | | | | CUSTOMER | 28.00 | 0.00 | 449.68 | |
| | | | | | | | | |
| | | | | CATEGORY | 28.00 | 0.00 | 449.68 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 19 | 5 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 243099 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RICCA, MARIE | 16.00 | | 256.96 I | |
| | | | | | | | | |
| | | | | | | | | |
| 1 | | | | CATEGORY | 16.00 | 0.00 | 256.96 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 196 | |
|------------|----------|---------|------------------------|----------------------------|-------|---------|----------------------------------|------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | CCL CONGREGATE CARE PROBLEM 5/24 | |
| | | | Š | SALES REGISIER | | | BILL WEEK ENDING 5/2 | 4/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURI | PLUS |
| 243100 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RISCO, GUILLERM | 62.75 | | 1,007.77 I | |
| | | | | CATEGORY | 62.75 | 0.00 | 1,007.77 | |

| RUN DATE | 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | .97 | |
|-----------|----------|------------|------------------------|-----------------|-------|---------|------------------|---------|--|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS | |
| 243101 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RIVADENEIRA, OL | 20.00 | | 321.20 I | | |
| | | | | CATEGORY | 20.00 | 0.00 | 321.20 | | |

| F | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 198 |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|------------------|---------------|
| 5 | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | W/O WALLS (LT |
| | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | | |
| I | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | | |
| 2 | 243102 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RIVADENEIRA, RO | 56.00 | | 899.36 I | |
| | | | | | | | | | |
| 1 | | | | | ==== | | | | |
| 1 | | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 1 | 99 |
|-----------|------------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243103 | 5/17/13 | 000008 | VISITING NURSE SERVICE | RIVERA, CARMEN | 30.00 | | 481.80 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 200 ADU ADULT | |
|-----------------------|---------|---------|--------------------------------------|----------------|-------|---------|---------------------------|---------|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243104 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RIVERA, CAROL | 8.00 | | 128.48 I | |
| | | | | | | | | |
| | | | | CATEGORY | 8.00 | 0.00 | 128.48 | |

| RUN DATE 0 SALES JRNL | | SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING | |
|--------------------------|-------------------------------|----------------------------|--|---|-------------------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243106 | 5/17/13 5/17/13 5/17/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | RIVERA, CAROL RIVERA, ERNESTO RIVERA, GRACIEL | 16.00 20.00 20.00 | | 256.96 I 321.20 I 321.20 I | |
| | | | | CUSTOMER | 56.00 | 0.00 | 899.36 | |
| | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| RUN DATE (SALES JRN) | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 CCL CONGREGAT BILL WEEK ENI | | |
|--------------------------|--------------------|-----------------------|---|-----------------------------|----------------|---------|--|--------|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243108 243109 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , ~- | 30.00 48.00 | | 481.80 770.88 | I I | |
| | | | | CUSTOMER | 78.00 | 0.00 | 1,252.68 | | |
| | | | | CATEGORY | 78.00 | 0.00 | 1,252.68 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 20 |)3 |
|-----------|------------|------------|----------------------|--------------------|-------|---------|--------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243110 | 5/10/13 | 000008 | VISITING NURSE SERVI | CE RODRIGUEZ, ANA | 6.00 | | 96.36 | I | |
| 243111 | 5/17/13 | 800000 | VISITING NURSE SERVI | CE RODRIGUEZ, ANA | 30.00 | | 481.80 | I | |
| 243112 | 4/26/13 | 800000 | VISITING NURSE SERVI | CE RODRIGUEZ, BIEN | 2.00 | | 32.12 | I | |
| 243113 | 5/10/13 | 800000 | VISITING NURSE SERVI | CE RODRIGUEZ, BIEN | 2.00 | | 32.12 | I | |
| 243114 | 5/17/13 | 800000 | VISITING NURSE SERVI | CE RODRIGUEZ, BIEN | 4.00 | | 64.24 | I | |
| | | | | CUSTOMER | 44.00 | 0.00 | 706.64 | | |
| | | | | CATEGORY | 44.00 | 0.00 | 706.64 | | |

| | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 ADU ADULT | 204 |
|----------|---------|---------|--------------------------------------|-----------------|-------|---------|-------------------------|---------|
| | | | | ALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243115 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, CARL | 6.00 | | 96.36 I | |
| | | | | CAMECODY | | | | |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| | | | YSIDE CITYWIDE | | | | | - 20 |)5 |
|------------------|--------------------|------------------|---|-----------------------------|----------------|---------|------------------------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | VCP CHOICE L BILL WEEK EN | | 5/24/13 |
| | | | | SALES REGISIER | | | DILL MEEK EN | DING | 3/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 040116 | E /1E /12 | 000000 | | DODDIGUES TOWN | 26.00 | | 580 16 | _ | |
| 243116 243117 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 36.00 83.00 | | 578.16 1,332.98 | 1 | |
| 243117 | 5/1//13 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, MARC | | | 1,332.90 | | |
| | | | | CUSTOMER | 119.00 | 0.00 | 1,911.14 | | |
| | | | | | | | | | |
| | | | | CARRODY | 110.00 | 0.00 | 1 011 14 | | |
| | | | | CATEGORY | 119.00 | 0.00 | 1,911.14 | | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 206 | |
|-----------|-------------|----------|------------------------|---------------------------------|-------|---------|----------------------|----------------|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | EW/O WALLS (LT | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 | |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | P SURPLUS | |
| 0.40110 | E /1 E /1 2 | 000000 | | DODD T G11777 | F 00 | | 20 20 7 | | |
| 243118 | 5/1//13 | 800000 | VISITING NURSE SERVICE | RODRIGUEZ, OLGA | 5.00 | | 80.30 1 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 5.00 | 0.00 | 80.30 | | |
| 243118 | 5/17/13 | 000008 | VISITING NURSE SERVICE | RODRIGUEZ, OLGA CATEGORY | 5.00 | 0.00 | 80.30 I 80.30 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN | |
|----------------------------|-------------------------------|----------------------------|--|---|------------------------|---------|--|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243119 243120 243121 | 5/03/13 5/10/13 5/17/13 | 000008 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | RODRIGUEZ, PORF RODRIGUEZ, PORF RODRIGUEZ, PORF | 7.00 21.00 49.00 | | 112.42 1 337.26 1 786.94 1 | [[[|
| | | | | CUSTOMER | 77.00 | 0.00 | 1,236.62 | |
| | | | | CATEGORY | 77.00 | 0.00 | 1,236.62 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - LTC NURSING HOME BILL WEEK ENDING | |
|-----------------------|--------------------|-----------------------|--|---------------------------------------|----------------|---------|--|---------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 243122 243123 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | · · · · · · · · · · · · · · · · · · · | 40.00 40.00 | | 642.40 I 642.40 I | |
| | | | | CUSTOMER | 80.00 | 0.00 | 1,284.80 | |
| | | | | CATEGORY | 80.00 | 0.00 | 1,284.80 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 20 | 09 |
|-----------|----------|---------|------------------------|----------------|-------|---------|------------------|---------------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCP CHOICE LHCSA | 5 / O A / 1 O |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243124 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ROMERO, SANTHY | 31.75 | | 509.91 I | |
| | | | | | | | | |
| | | | | CATEGORY | 31.75 | 0.00 | 509.91 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 21 | _0 |
|---|-----------|------------|----------|------------------------|----------------|-------|---------|--------------------|-------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | O WALLS (LT |
| ı | | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | | | | | | | | | |
| ı | 243125 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ROMO, FLOR | 56.00 | | 899.36 I | |
| ı | | | | | | | | | |
| ı | | | | | GA EERGODY | | 0.00 | 000 36 | |
| ı | | | | | CATEGORY | 56.00 | 0.00 | 899.36 | |

| | RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 211 | | | | | | | | | | | | |
|-----------|---|---------|------------------------|-----------------|--------|---------|--------------|------|---------------|--|--|--|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | | F / O 4 / 1 2 | | | | |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | | | | |
| 243126 | 5/17/13 | 000008 | VISITING NURSE SERVICE | ROSA, LUZ E | 55.50 | | 891.33 | I | | | | | |
| 243127 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ROSA, MANOLO | 29.50 | | 473.77 | I | | | | | |
| 243128 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ROSARIO, MARIA | 20.00 | | 321.20 | I | | | | | |
| 243129 | 5/10/13 | 800000 | VISITING NURSE SERVICE | ROSARIOBREU, EM | 5.00 | | 80.30 | I | | | | | |
| 243130 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ROSARIOBREU, EM | 25.00 | | 401.50 | I | | | | | |
| | | | | CUSTOMER | 135.00 | 0.00 | 2,168.10 | | | | | | |
| | | | | CATEGORY | 135.00 | 0.00 | 2,168.10 | | | | | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 212 | 2 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243131 | 5/17/13 | 800000 | VISITING NURSE SERVICE | ROSTKOWSKI, WIE | 9.00 | | 144.54 I | |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 21 | .3 |
|-----------|-------------|---------|------------------------|----------------|-------|---------|------------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | VCM VNS | F /04 /12 |
| | | | 2 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 0.401.00 | E /1 E /1 O | | | | 50.00 | | | |
| 243132 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RUEDA, INES | 52.00 | | 835.12 I | |
| | | | | | | | | |
| | | | | CATEGORY | 52.00 | 0.00 | 835.12 | |

| RUN DATE (| 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 21 | .4 | |
|------------|------------|------------|------------------------|----------|--------------|-------|---------|---------------|------|---------|--|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY 1 | | | | VCP CHOICE LE | | | |
| | | | S | BALES RE | GISTER | | | BILL WEEK ENI | DING | 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFEF | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 243133 | 5/17/13 | 800000 | VISITING NURSE SERVICE | RUFFEN | I, SANDRA | 30.75 | | 493.85 | I | | |
| | | | | | CATEGORY | 30.75 | 0.00 | 493.85 | | | |

| RUN DATE 05/22/1 SALES JRNL # 033 | | | REG NY NY | | | PAGE 1 ADU ADULT | - 21 | .5 |
|--------------------------------------|-----------|---|----------------|---------------|---------|---------------------|------|---------|
| BILLES SIGNE II 035 | 1 100 001 | | SALES REGISTER | | | BILL WEEK END | OING | 5/24/13 |
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243134 5/17/1 243135 5/17/1 | | VISITING NURSE SERVICE VISITING NURSE SERVICE | - , | 6.50 70.00 | | 104.39 1,124.20 | I | |
| | | | CUSTOMER | 76.50 | 0.00 | 1,228.59 | | |
| | | | CATEGORY | 76.50 | 0.00 | 1,228.59 | | |

| | | | NYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCSA | |
|-----------|-----------|---------|---------------------------------------|---------------|-------|---------|------------------------------|---------|
| SALES UKI | иш # 0334 | HOC 001 | | ALES REGISTER | | | BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243136 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SAK, FIRDEVS | 35.00 | | 562.10 I | |
| | | | | | | | | |
| | | | | CATEGORY | 35.00 | 0.00 | 562.10 | |

| | 05/22/13 - NL # 0334 | | | REGNY NY SALES REGISTER | | | PAGE 1 - 21 ADU ADULT BILL WEEK ENDING | 7 5/24/13 |
|----------|-------------------------|---------|------------------------|----------------------------|-------|---------|--|-----------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243137 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SALADIN, MARIA | 55.00 | | 883.30 I | |
| | | | | CATEGORY | 55.00 | 0.00 | 883.30 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 218 | |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------------------|-------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS | ; (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/24/1 | .3 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLU | JS |
| | | | | | | | | |
| 243138 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SALVATIERRA, TE | 36.00 | | 578.16 I | |
| | | | | | | | | |
| | | | | | | | | |
| 1 | | | | CATEGORY | 36.00 | 0.00 | 578.16 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 21 | 19 |
|-----------|------------|------------|------------------------|-----------------|--------|---------|---------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | ICSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENI | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243139 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SAMPOGNA, LUCY | 77.00 | | 1,236.62 | I | |
| 243140 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANCHEZ, ADOLFO | 20.00 | | 321.20 | I | |
| 243141 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANCHEZ, FLORA | 51.00 | | 819.06 | I | |
| 243142 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANCHEZ, LIDIA | 42.00 | | 674.52 | I | |
| | | | | | | | | | |
| | | | | CUSTOMER | 190.00 | 0.00 | 3,051.40 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 190.00 | 0.00 | 3,051.40 | | |

| RUN DATE (| 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 22 | 20 |
|------------|------------|------------|------------------------|---------|------------|-------|---------|--------------|--------|------------|
| SALES JRNI | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | CCL CONGREGA | TE CAR | RE PROGRAM |
| | | | S | SALES R | EGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REF | ERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 243143 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANC | HEZ, MARIA | 35.00 | | 562.10 | I | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1 | | | | | CATEGORY | 35.00 | 0.00 | 562.10 | | |

| RUN DATE | 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 221 |
|-----------|-----------|------------|------------------------|----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243144 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANCHEZ, NILSA | 47.50 | | 762.85 I | |
| | | | | CATEGORY | 47.50 | 0.00 | 762.85 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 222 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|-----------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243145 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SANCHEZ, RAQUEL | 9.00 | | 144.54 I | |
| 243146 | 5/03/13 | 000008 | VISITING NURSE SERVICE | SANDOVAL, FANNY | 8.00 | | 128.48 I | |
| 243147 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANDOVAL, FANNY | 48.00 | | 770.88 I | |
| 243148 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SANTORINIOS, GE | 19.00 | | 305.15 I | |
| | | | | CUSTOMER | 84.00 | 0.00 | 1,349.05 | |
| | | | | CATEGORY | 84.00 | 0.00 | 1,349.05 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | |
|-----------|-----------|---------|------------------------|-----------------|--------|---------|----------------|-------------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDI | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | T TRUOMA | TYP SURPLUS |
| 243149 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SANTOS, LETY I | 18.00 | | 289.08 | I |
| 243150 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SCOTT, CATHERIN | 42.00 | | 674.52 | I |
| 243151 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SCRO, WILLIAM | 28.00 | | 449.68 | I |
| 243152 | 5/03/13 | 800000 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 6.00 | | 96.36 | I |
| 243153 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 12.00 | | 192.72 | I |
| | | | | CUSTOMER | 106.00 | 0.00 | 1,702.36 | |
| | | | | CATEGORY | 106.00 | 0.00 | 1,702.36 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 224 ADU ADULT | |
|-----------------------|---------|---------|--------------------------------------|-----------------|-------|---------|---------------------------|---|
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | 3 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | S |
| 243154 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SEGOVIA, BEATRI | 6.00 | | 96.36 I | |
| | | | | | | | | _ |
| | | | | CATEGORY | 6.00 | 0.00 | 96.36 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 2 | |
|-----------|----------|---------|------------------------|-----------------|-------|---------|-------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | HOA HOSPICE ADULT | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243155 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SELTZER, BERTHA | 15.00 | | 240.90 I | |
| | | | | | | | | |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE (| 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 26 |
|------------|-------------|----------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRNI | և # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | _ , _ , _ , | | | | | | | |
| 243156 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SERAFIN, WALTER | 69.50 | | 1,116.17 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 69.50 | 0.00 | 1,116.17 | |

| | | | YSIDE CITYWIDE | 222 | | | PAGE 1 - 22 | 7 |
|------------------|--------------------|------------------|---|----------------------------|---------------|---------|-------------------------------|---------|
| SALES JRNI | L # U334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | ADU ADULT BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243157 243158 | 5/10/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 7.00 42.00 | | 112.42 I 674.52 I | |
| | | | | CUSTOMER | 49.00 | 0.00 | 786.94 | |
| | | | | CATEGORY | 49.00 | 0.00 | 786.94 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 22 | 28 |
|-----------|-----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHCSA | |
| | | | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243159 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SHANNON, ELNORA | 34.50 | | 554.07 I | |
| 243160 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SIFFETI, ROHAFZ | 13.00 | | 208.78 I | |
| | | | | CUSTOMER | 47.50 | 0.00 | 762.85 | |
| | | | | COSTOMER | 47.50 | 0.00 | 702.03 | |
| | | | | | | | | |
| | | | | CATEGORY | 47.50 | 0.00 | 762.85 | |

| RUN | DATE 05/2 | 22/13 - SUP | SUNNY | SIDE CITYWIDE | | | | | PAGE | 1 | . – 22 | 9 | |
|------|-----------|-------------|-------|------------------------|--------|-----------|-------|---------|---------|-------|--------|-------------|--|
| SALE | S JRNL # | 0334 LOC | 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | LTC NUR | SING | HOMEW/ | O WALLS (LT | |
| | | | | S | SALES | REGISTER | | | BILL WE | EK EN | IDING | 5/24/13 | |
| | | | | | | | | | | | | | |
| INVO | ICE# DA | ATE CUS | ON T | CUSTOMER NAME | RE | FERENCE | HOURS | TAX AMT | AMO | TUUC | TYP | SURPLUS | |
| | | | | | | | | | | | | | |
| 2431 | 61 5/1 | 17/13 000 | 8000 | VISITING NURSE SERVICE | SIL | LS, JAMES | 42.00 | | 67 | 4.52 | I | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | CATEGORY | 42.00 | 0.00 | 67 | 4.52 | | | |

| | | | YSIDE CITYWIDE | DDG NV NV | | | PAGE 1 - | 230 |
|-----------|-----------|---------|------------------------|-----------------------------|-------|---------|------------------------------------|-----------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | VCP CHOICE LHCS BILL WEEK ENDIN | |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243162 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SINGH, BADREE | 42.00 | | 674.52 | <u>.</u> |
| 243163 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SINGH, JAMOONIE | 15.00 | | 240.90 | - - |
| | | | | CUSTOMER | 57.00 | 0.00 | 915.42 | |
| | | | | COSTOMER | 37.00 | 0.00 | 913.42 | |
| | | | | | | | | |
| | | | | CATEGORY | 57.00 | 0.00 | 915.42 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 231 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|---------------------------|-----|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS | (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | ı |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | ; |
| 243164 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SOLDATI, RONDA | 15.00 | | 240.90 I | |
| | | | | | | | | - |
| | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| R | UN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 32 |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|-------------------|------------|
| S | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CA | RE PROGRAM |
| | | | | \$ | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| I | NVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 2 | 243165 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SOPCHEK, SAMUEL | 12.00 | | 192.72 I | |
| | | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 VCP CHOICE LHCSA | 233 |
|------------|---------|---------|--------------------------------------|----------------|-------|---------|--------------------------------|---------|
| | _ | 200 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243166 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SORIA, ROLANDO | 30.00 | | 481.80 I | |
| | | | | | | | | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| | E 05/22/13 RNL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 ADU ADULT | |
|---------|-----------------------|----------------|--------------------------------------|------------------------------|-------|---------|-------------------------|---------|
| THEOLOG | | GUGE NO | | SALES REGISTER | HOUDG | WAY AM | BILL WEEK ENDING | 5/24/13 |
| 243167 | # DATE 5/17/13 | CUST NO 000008 | CUSTOMER NAME VISITING NURSE SERVICE | REFERENCE SOTIRIOU, EVANG | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243107 | 3/11/13 | 000008 | VISITING NORSE SERVICE | SOTIKIOU, EVANG | | | | |
| | | | | CATEGORY | 1.00 | 0.00 | 16.06 | |

| | | | | YSIDE CITYWIDE | | | | | - 23 | 35 |
|-----|----------|---------|---------|------------------------|-----------------|-------|---------|----------------|------|---------|
| SAI | LES JRNI | # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHO | | |
| | | | | i | SALES REGISTER | | | BILL WEEK END | ING | 5/24/13 |
| INV | /OICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | ГҮР | SURPLUS |
| 243 | 3168 | 5/17/13 | 800000 | VISITING NURSE SERVICE | SOTO, MARCELINA | 24.00 | | 385.44 | I | |
| | | | | | CATEGORY | 24.00 | 0.00 | 385.44 | | |

| RUN DATE C | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 ADU ADULT | 36 |
|------------|--------------------|------------------|--|----------------|--------------|---------|-------------------------|---------|
| SALES ORNI | 1 # 0334 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 6.00 4.00 | | 96.36 I 64.24 I | |
| | | | | CUSTOMER | 10.00 | 0.00 | 160.60 | |
| | | | | CATEGORY | 10.00 | 0.00 | 160.60 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - | |
|-----------|----------|---------|------------------------|----------------------------|--------|---------|-----------------|-----------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCS | |
| | | | | SALES REGISTER | | | BILL WEEK ENDIN | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243171 | 5/17/13 | 000008 | VISITING NURSE SERVICE | SPYROPOULOS, AS | 12.00 | | 192.72 I | |
| 243172 | 5/10/13 | 800000 | VISITING NURSE SERVICE | STAFILIAS, EVAN | 12.00 | | 192.72 I | |
| 243173 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STAFILIAS, EVAN | 53.00 | | 851.18 I | |
| 243174 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STAMBOULIDIS, V | 54.50 | | 875.29 I | |
| | | | | CUSTOMER | 131.50 | 0.00 | 2,111.91 | |
| | | | | CATEGORY | 131.50 | 0.00 | 2,111.91 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - HOA HOSPICE ADU | |
|------------|---------|---------|--------------------------------------|-----------------|-------|---------|-----------------------------|-----------|
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | G 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | P SURPLUS |
| 243175 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STEIN, STEPHANI | 21.00 | | 337.26 I | |
| | | | | CATEGORY | 21.00 | 0.00 | 337.26 | |

| | | | YSIDE CITYWIDE | | | | - | 239 |
|-----------|----------|---------|------------------------|------------------|--------|---------|----------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | |
| | | | | SALES REGISTER | 2 | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243176 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STENOS, MOSHOUL | 30.00 | | 481.80 | I |
| 243177 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STICKELL, BLANC | 35.00 | | 562.10 | Ι |
| 243178 | 5/17/13 | 800000 | VISITING NURSE SERVICE | STROBL, ALFRED | 32.00 | | 513.92 | I |
| 243179 | 5/17/13 | 800000 | VISITING NURSE SERVICE | E SUAREZ, MARINA | 26.25 | | 421.58 | I |
| | | | | CUSTOMER | 123.25 | 0.00 | 1,979.40 | |
| | | | | CATEGORY | 123.25 | 0.00 | 1,979.40 | |

| RUN DATE 05/22/13 SALES JRNL # 0334 | | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 240 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/24/13 | |
|--|---------|--|-----------------------------|----------------|---------|---|--|
| INVOICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 243180 5/17/13 243181 5/17/13 | | VISITING NURSE SERVICE VISITING NURSE SERVICE | · | 23.75 30.00 | | 381.43 I 481.80 I | |
| | | | CUSTOMER | 53.75 | 0.00 | 863.23 | |
| | | | CATEGORY | 53.75 | 0.00 | 863.23 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 241 |
|-----------|------------|------------|------------------------|-----------------|-------|---------|----------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LHC | - |
| | | | | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243182 | 5/17/13 | 000008 | VISITING NURSE SERVICE | TAVERAS, BERNAR | 20.00 | | 321.20 | I |
| 243183 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TEJADA, BALDOME | 16.00 | | 256.96 | I |
| | | | | CUSTOMER | 36.00 | 0.00 | 578.16 | |
| | | | | 0001011111 | 22.00 | 0.00 | 270120 | |
| | | | | | | | | |
| 1 | | | | CATEGORY | 36.00 | 0.00 | 578.16 | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - ADU ADULT | 242 |
|-----------------------|--------------------|------------------|---|----------------------------------|----------------|---------|-----------------------|------------|
| SALES UKN | ш # 0334 | TOC 001 | | SALES REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243184 | 5/17/13 | 000008 | VISITING NURSE SERVICE | TEODORU, MIRELL | 15.00 | | | I |
| 243185 243186 | 5/17/13 5/17/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | TERZIAN, ASDGHI THUCH, SYVONN | 20.00 41.50 | | 321.20 666.50 | I I |
| | 0, =:, =0 | | | · | | | | |
| | | | | CUSTOMER | 76.50 | 0.00 | 1,228.60 | |
| | | | | CATEGORY | 76.50 | 0.00 | 1,228.60 | |

| | | | YSIDE CITYWIDE | | | | - | - 24 | 13 |
|-----------|-----------|---------|------------------------|-----------------------------|--------|---------|------------------------------|------|---------|
| SALES JRN | L # U334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTEI | 2 | | VCP CHOICE L BILL WEEK EN | | 5/24/13 |
| | | | | | | | DIDD WEEK EN | DING | 3/21/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 0.421.05 | E /1E /12 | 000000 | | | 04 55 | | 207 40 | _ | |
| 243187 | 5/17/13 | 800000 | VISITING NURSE SERVICE | , | 24.75 | | 397.49 | Τ | |
| 243188 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TOLENTINO, PASC | 25.00 | | 401.50 | I | |
| 243189 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TORO VEGA, LUZV | 24.00 | | 385.44 | I | |
| 243190 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TORRES, EMELINA | 40.00 | | 642.40 | I | |
| 243191 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TORRES, LUZ M | 84.00 | | 1,349.04 | I | |
| | | | | | 105 55 | | 2 185 08 | | |
| | | | | CUSTOMER | 197.75 | 0.00 | 3,175.87 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 197.75 | 0.00 | 3,175.87 | | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 244 |
|---|-----------|-------------|----------|------------------------|----------------|-------|---------|------------------|---------------|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOME | N/O WALLS (LT |
| ı | | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| ı | 0.401.00 | E /4 E /4 O | | | | 26.00 | | 550 16 - | |
| ı | 243192 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TORRES, MARGOT | 36.00 | | 578.16 I | |
| ı | | | | | | | | | |
| ı | | | | | | 26.00 | | | |
| ı | | | | | CATEGORY | 36.00 | 0.00 | 578.16 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 | | :5 |
|-----------|-----------|---------|------------------------|-----------------|-------|---------|---------------|-----|----------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE LE | | E /04/10 |
| | | | | SALES REGISTER | | | BILL WEEK END | ING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243193 | 5/17/13 | 000008 | VISITING NURSE SERVICE | TOUMA, MATTA | 40.00 | | 642.40 | I | |
| 243194 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TOVAR DE BOCAN, | 42.00 | | 674.52 | I | |
| | | | | CUSTOMER | 82.00 | 0.00 | 1,316.92 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 82.00 | 0.00 | 1,316.92 | | |

| | | | YSIDE CITYWIDE | | | | | 246 |
|-----------|----------|---------|------------------------|-----------------|-------|---------|------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | | REG NY NY | | | ADU ADULT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243195 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TRAVLOS, GERASI | 8.75 | | 140.53 I | |
| | | | | | | | | |
| | | | | CATEGORY | 8.75 | 0.00 | 140.53 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 VCP CHOICE LE | - 24 | 17 |
|-----------------------|---------|---------|--------------------------------------|-----------------|-------|---------|-------------------------|------|---------|
| Bribbs ord | 0551 | 100 001 | | ALES REGISTER | | | BILL WEEK ENI | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243196 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TRUJILLO, AMPAR | 20.00 | | 321.20 | I | |
| 243197 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TSOLISOS, FOTIN | 56.00 | | 899.36 | | |
| | | | | CUSTOMER | 76.00 | 0.00 | 1,220.56 | | |
| | | | | CATEGORY | 76.00 | 0.00 | 1,220.56 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 248 | |
|-----------|------------|------------|------------------------|----------------|-------|---------|-------------------------------|--|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LAD NURSING HOME W/O WALLS LT | |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| 243198 | 5/17/13 | 800000 | VISITING NURSE SERVICE | TSUAI, PING | 12.00 | | 192.72 I | |
| | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

| RUN DATE 05/2 | 22/13 - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 24 | 19 |
|---------------|------------------|------------------------|----------------|--------|---------|--------------|------|---------|
| SALES JRNL # | 0334 LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | VCP CHOICE L | HCSA | |
| | | S | ALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# DA | ATE CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243199 5/3 | 17/13 000008 | VISITING NURSE SERVICE | TZOUMAS, EFFIE | 63.00 | | 1,011.78 | I | |
| 243200 5/3 | 10/13 000008 | VISITING NURSE SERVICE | URBINA, ANA | 5.00 | | 80.30 | I | |
| 243201 5/3 | 17/13 000008 | VISITING NURSE SERVICE | URBINA, ANA | 26.00 | | 417.56 | I | |
| 243202 5/3 | 17/13 000008 | VISITING NURSE SERVICE | URENA, ARGELIA | 30.00 | | 481.80 | I | |
| | | | CUSTOMER | 124.00 | 0.00 | 1,991.44 | | |
| | | | CATEGORY | 124.00 | 0.00 | 1,991.44 | | |

| | DATE 05/22/13 S JRNL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 250 ADU ADULT | |
|------|--------------------------------|---------|-----------------------------------|-----------------|-------|---------|---------------------------|------|
| | | | | SALES REGISTER | | | BILL WEEK ENDING 5/2 | 4/13 |
| INVO | ICE# DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SUR | PLUS |
| 2432 | 03 5/17/13 | 800000 | VISITING NURSE SERVICE | URUCHIMA, VICTO | 42.00 | | 674.52 I | |
| | | | | CATEGORY | 42.00 | 0.00 | 674.52 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 251 | _ |
|-----------|------------|------------|------------------------|-----------------|-------|---------|---------------------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CARE | PROGRAM |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243204 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VALENCIA, BERNA | 25.00 | | 401.50 I | |
| | | | | | | | | |
| | | | | CATEGORY | 25.00 | 0.00 | 401.50 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - HOA HOSPICE ADUI | |
|------------|----------|---------|-----------------------------------|----------------|-------|---------|------------------------------|---------|
| DALLS UKN | u # 0334 | 100 001 | | SALES REGISTER | | | BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYPE | SURPLUS |
| 243205 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VALENCIA, EMMA | 15.00 | | 240.90 I | |
| | | | | | | | | |
| 1 | | | | CATEGORY | 15.00 | 0.00 | 240.90 | |

| RUN DATE | 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 253 | |
|-----------|-----------|------------|------------------------|----------------|-------|---------|--------------------------|-----|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CARE PROG | RAM |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 5/24/ | 13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPL | JUS |
| | _ ,,_ ,,_ | | | | | | | |
| 243206 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VALENTI, HELEN | 55.75 | | 895.35 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 55.75 | 0.00 | 895.35 | |

| | | | YSIDE CITYWIDE | | | | PAGE 1 - 2 | 154 |
|------------|----------|---------|-------------------------|----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRNI | L # U334 | LOC 001 | SUNNYSIDE CITYWIDE S | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243207 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VALENZA, GIUSEP | 37.75 | | 606.28 I | |
| | | | | CATEGORY | 37.75 | 0.00 | 606.28 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 25 | 55 |
|-----------|------------|------------|------------------------|----------------|-------|---------|-------------------|-------------|
| SALES JRN | 1L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW | O WALLS (LT |
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | |
| 243208 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VAROL, ELMAS | 9.00 | | 144.54 I | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | CATEGORY | 9.00 | 0.00 | 144.54 | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - | 256 |
|-----------|---------------|------------|---------------------|------------------|------------|---------|----------------|------------|
| SALES JRN | rL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | ADU ADULT | |
| | | | | SALES REGI | STER | | BILL WEEK ENDI | NG 5/24/13 |
| | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 0.40000 | E / 1 E / 1 O | | | | | | 110.50 | _ |
| 243209 | 5/17/13 | 800000 | VISITING NURSE SERV | VICE VASQUEZ, DU | JLCE 28.00 | | 449.68 | I |
| | | | | | | | | |
| | | | | G2 TT G | | | 440.60 | |
| | | | | CATEG | ORY 28.00 | 0.00 | 449.68 | |

| ı | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 257 | |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|-------------------------------|--|
| ı | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/O WALLS (LT | |
| ı | | | | i | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 | |
| ı | | | | | | | | | |
| ı | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS | |
| | 243210 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VASQUEZ, EUSTAG | 29.00 | | 465.74 I | |
| | | | | | | | | | |
| ı | | | | | CATEGORY | 29.00 | 0.00 | 465.74 | |

| | | | YSIDE CITYWIDE | | | | | - | - 25 | 58 | |
|------------|----------|---------|------------------------|--------|---------------|-------|---------|---------------|------|---------|--|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY | | | VCP CHOICE LH | | | |
| | | | S | SALES | REGISTER | | | BILL WEEK END | ING | 5/24/13 | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | R | EFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 243211 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VA | SQUEZ, RAPHAE | 17.50 | | 281.05 | I | | |
| | | | | | | | | | | | |
| | | | | | CATEGORY | 17.50 | 0.00 | 281.05 | | | |

| 1 | RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 25 | 59 |
|---|-----------|------------|----------|------------------------|-----------------|-------|---------|--------------------|-------------|
| 5 | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW, | O WALLS (LT |
| | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | | | | | | | | | |
| : | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | | | | | | | | | |
| : | 243212 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VAZQUEZ, ESTHER | 40.00 | | 642.40 I | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | CATEGORY | 40.00 | 0.00 | 642.40 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 260 ADU ADULT | |
|------------|---------|---------|--------------------------------------|-----------------|-------|---------|---------------------------|------|
| | | | 5 | SALES REGISTER | | | BILL WEEK ENDING 5/24 | 1/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURE | PLUS |
| 243213 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VAZQUEZ, FELIPE | 24.00 | | 385.44 I | |
| | | | | CATEGORY | 24.00 | 0.00 | 385.44 | |

| RUN DATE 05 SALES JRNL | 5/22/13 - SUP SUN # 0334 LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING | 61 5/24/13 |
|---------------------------|--|--|--|-------------------------|---------|--|---------------|
| INVOICE# | DATE CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243215 | 5/17/13 000008 5/17/13 000008 5/17/13 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE | VELASQUEZ, NELL VELECELA, LUIS VELECELA, MARIA | 16.00 15.00 19.75 | | 256.96 I 240.90 I 317.19 I | |
| | | | CUSTOMER | 50.75 | 0.00 | 815.05 | |
| | | | CATEGORY | 50.75 | 0.00 | 815.05 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 262 LAD NURSING HOME W/O WALLS LT |
|-----------------------|--------------------|-----------------------|--|----------------|-------|---------|---|
| | | | | SALES REGISTER | | | BILL WEEK ENDING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SURPLUS |
| 243217 243218 | 4/19/13 4/26/13 | 000008 000008 | VISITING NURSE SERVICE VISITING NURSE SERVICE | , | 4.00 | | 64.24 I 64.24 I |
| 243218 | 4/20/13 | 000008 | VISITING NURSE SERVICE | VELEZ, MIRYAM | 4.00 | | 04.24 1 |
| | | | | CUSTOMER | 8.00 | 0.00 | 128.48 |
| | | | | CATEGORY | 8.00 | 0.00 | 128.48 |

| | | | YSIDE CITYWIDE | | | | | | 263 |
|------------|----------|---------|------------------------|--------|----------------|-------|---------|------------------------------|------------|
| SALES JRNI | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY | NY REGISTER | | | ADU ADULT BILL WEEK ENDII | NG 5/24/13 |
| | | | | | KEGIBIEK | | | DIDD WEEK ENDI | 70 3/21/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | R | EFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243219 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VE | LOZ REYES, AL | 16.00 | | 256.96 | I |
| | | | | | | | | | |
| | | | | | CATEGORY | 16.00 | 0.00 | 256.96 | |

| | | | YSIDE CITYWIDE | DEG NY NY | | | PAGE 1 - | |
|------------------|--------------------|------------------|---|----------------------------|----------------|---------|----------------------------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHC BILL WEEK ENDI | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243220 243221 | 5/17/13 5/17/13 | 800000 800000 | VISITING NURSE SERVICE VISITING NURSE SERVICE | | 35.00 59.75 | | 562.10 959.59 | I |
| | | | | CUSTOMER | 94.75 | 0.00 | 1,521.69 | |
| | | | | CATEGORY | 94.75 | 0.00 | 1,521.69 | |

| RUN DATE (| | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - 2 HOA HOSPICE ADULT | |
|------------|-----------|---------|--------------------------------------|---------------|-------|---------|---------------------------------|---------|
| 0111111 | - 11 0001 | 200 001 | | SALES REGISTE | R | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243222 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VIGORITO, ANN | 10.00 | | 160.60 I | |
| | | | | | | | | |
| | | | | CATEGORY | 10.00 | 0.00 | 160.60 | |

| | | | TYSIDE CITYWIDE | | | | PAGE 1 - 2 | 266 |
|------------|----------|---------|------------------------|----------------------------|-------|---------|--------------------------------------|---------|
| SALES JRN. | L # 0334 | TOG 001 | SUNNYSIDE CITYWIDE | REGNY NY SALES REGISTER | | | VCP CHOICE LHCSA BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243223 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VILLAPOL, ANNA | 30.00 | | 481.80 I | |
| | | | | CAMEGODY | 30.00 | | 401 00 | |
| | | | | CATEGORY | 30.00 | 0.00 | 481.80 | |

| RUN DATE | 05/22/13 - | SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 26 | 57 |
|-----------|------------|----------|------------------------|----------------|-------|---------|--------------------|-------------|
| SALES JRN | ъ # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | LTC NURSING HOMEW/ | O WALLS (LT |
| | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243224 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VITO, CARMEN | 28.00 | | 449.68 I | |
| | | | | CATEGORY | 28.00 | 0.00 | 449.68 | |

| RUN DATE SALES JRN | | | IYSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHCSA | |
|-----------------------|-----------|---------|---------------------------------------|----------------|-------|---------|------------------------------|---------|
| SALES URI | 11 # 0334 | LOC UUI | | SALES REGISTER | | | BILL WEEK ENDING | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| 243225 | 5/17/13 | 800000 | VISITING NURSE SERVICE | VIVACQUA, EMMA | 70.00 | | 1,124.20 I | |
| | | | | CATEGORY | 70.00 | 0.00 | | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - ADU ADULT BILL WEEK ENDI | 207 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------------------|-------|---------|---|-------------|
| | | | 3 | ALES KEGISIEK | | | BILL MEEK END | ING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT 7 | TYP SURPLUS |
| 243226 | 5/17/13 | 000008 | VISITING NURSE SERVICE | VLAHOS, MARIE | 20.00 | | 321.20 | I |
| 243227 | 5/17/13 | 800000 | VISITING NURSE SERVICE | WATKINS, ELOISE | 9.00 | | 144.54 | I |
| | | | | CUSTOMER | 29.00 | 0.00 | 465.74 | |
| | | | | | | | | |
| | | | | CATEGORY | 29.00 | 0.00 | 465.74 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - VCP CHOICE LHO | - 27 | 0 |
|-----------------------|------------|-----------------------|--------------------------------------|-----------------|-------|---------|----------------------------|------|---------|
| Bribbs ord | 11 0331 | 100 001 | | ALES REGISTER | | | BILL WEEK END | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243228 | 5/17/13 | 000008 | VISITING NURSE SERVICE | WEINHAUS, SUSAN | 6.00 | | 96.36 | I | |
| 243229 | 5/17/13 | 800000 | VISITING NURSE SERVICE | YAGHDJIAN, SIRA | 12.00 | | 192.72 | т | |
| | | | | CUSTOMER | 18.00 | 0.00 | 289.08 | | |
| | | | | CATEGORY | 18.00 | 0.00 | 289.08 | | |

| ı | RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 - 27 | 71 |
|---|-----------|------------|------------|------------------------|-----------------|-------|---------|--------------------|------------|
| | SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CCL CONGREGATE CAR | RE PROGRAM |
| | | | | S | SALES REGISTER | | | BILL WEEK ENDING | 5/24/13 |
| | INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP | SURPLUS |
| | 243230 | 5/17/13 | 800000 | VISITING NURSE SERVICE | YELLAPAH, DOLLI | 12.00 | | 192.72 I | |
| | | | | | | | | | |
| | | | | | CATEGORY | 12.00 | 0.00 | 192.72 | |

RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 272 SALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/24/13 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 803.76 I 5/17/13 1,400.00 I 5/17/13 5/17/13 5/17/13 4/19/13 5/17/13 5/17/13 4/26/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 4/26/13 5/10/13 5/17/13 5/17/13 5/17/13 5/17/13 5/10/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 GARCIA, LUCIL
GARCIA, MARIA A
GOMEZ, YOLANDA 13.00
CONZALEZ MONTA 24.00
CONZALEZ MONTA 20.00 5/17/13 5/17/13 5/17/13 5/17/13 5/17/13 000010 GUILDNET

RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 273SALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/24/13 REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS GREAVES, BARBAR 16.00 252.16
GREENSDAN, ALIC 17.00 267.92
GUERRA, MAYRA 33.50 527.96
GUERRA, BALICIA 16.00 252.16
GUERRAN, EDELMIR 27.50 433.40
HENLEY, LUVENIA 60.00 945.60
HENRIQUEZ, TERE 48.00 756.48
HERNANDEZ, LUZ 30.00 472.80
HICKS, SYLVIA 43.50 6685.56
HUSTIU, SILVIA 4.00 63.04
IGLESIAS, JUNAN 168.00 2,647.68
IRIMIA, SIMONA 71.00 1,118.96
IRILARRY, ESTRE 34.75 547.66
JACKSON, PATRIC 25.00 394.00
JAINE ROSALBA 45.00 709.20
JUMENEZ, EUGENI 67.00 1,055.92
JOHNSON, DOROTH 48.00 756.48
JONES, LUCILLE 4.00 63.04
LANZILOTTA, ROS 48.00 756.48
LOGA, FERNANDO 38.00 756.48
LOGA, FERNANDO 38.00 598.88
LORDIS, FERNANDO 38.00 598.88
LORDISSO, ANNA 54.00 851.04
LUZADA, RAMON 36.00 567.36
LUGO, DOLORES 8.00 126.08
LUIS, MAXIMINA 18.00 428.68
LUIS, MAXIMINA 18.00 472.80
MARTANI, MARIA 20.00 472.80
MARTANI, RAMIA 20.00 472.80
MARTANI, RAMIA 20.00 472.80
MARTINI, RUTH 7.00 1,400.00
MARTINIEZ, LORI 56.00 12.00 1394.00
MONCALES, ISIDRO 12.00 1394.00
MONCALES, ISIDRO 12.00 1394.00
MONCALES, ISIDRO 12.00 12.60.80
MONCALES, MARGAR 8.00 126.68
MONCALES, MARGAR 8.00 126.68
MONCALES, MARGAR 8.00 126.68
MONCALES, MARGAR 8.00 126.69
MONCALES, MARGAR 8.00 126.08
MONCALES, MARGAR 8.00 126.08
MONCALES, MARGAR 8.00 126.08
MONCALES, MARGAR 8.00 126.08
MONCALES, MARGAR 8.00 126.09
MONCALES, MARGAR 8.00 126.03
MONCALES, MARGAR 8.00 126.04
MONCALES, MARGAR 8.00 126.04
MONCALES, MARGAR 8.00 126.04
MONCALES, MARGAR 8.00 126.04
MONCALES, M GREAVES, BARBAR 16.00 243280 252.16 5/10/13 000010 GUILDNET I 243281 4/26/13 000010 GUILDNET I 243282 5/10/13 000010 GUILDNET I 243283 5/17/13 000010 GUILDNET GUILDNET 243284 5/17/13 000010 GUILDNET 243285 5/17/13 000010 243286 5/10/13 000010 GUILDNET 243287 GUILDNET 5/17/13 000010 5/17/13 243288 000010 GUILDNET 243289 5/17/13 000010 GUILDNET 243290 5/17/13 000010 GUILDNET GUILDNET 243291 5/17/13 000010 243292 5/03/13 000010 GUILDNET 243293 5/17/13 000010 GUILDNET 243294 5/17/13 000010 GUILDNET 243295 5/17/13 000010 GUILDNET 243296 5/17/13 000010 GUILDNET 243297 5/17/13 000010 GUILDNET 243298 5/17/13 000010 GUILDNET 243299 5/17/13 000010 GUILDNET 243300 5/17/13 GUILDNET 000010 243301 GUILDNET 5/17/13 000010 243302 5/17/13 000010 GUILDNET 243303 5/17/13 000010 GUILDNET 243304 5/17/13 000010 GUILDNET 243305 5/17/13 000010 GUILDNET Ι 243306 5/17/13 000010 GUILDNET 243307 5/17/13 000010 GUILDNET 243308 5/17/13 000010 GUILDNET 243309 5/17/13 000010 GUILDNET 243310 5/17/13 000010 GUILDNET 243311 5/17/13 000010 GUILDNET 243312 5/17/13 000010 GUILDNET 243313 5/17/13 000010 GUILDNET 243314 000010 5/17/13 GUILDNET 243315 5/10/13 000010 GUILDNET 243316 5/17/13 000010 GUILDNET 243317 000010 GUILDNET 5/10/13 243318 000010 GUILDNET 5/17/13 243319 000010 GUILDNET 5/17/13 243320 5/17/13 000010 GUILDNET 243321 5/17/13 000010 GUILDNET 243322 5/17/13 000010 GUILDNET 243323 000010 GUILDNET 5/17/13 243324 5/17/13 000010 GUILDNET 243325 5/17/13 000010 GUILDNET 243326 5/17/13 000010 GUILDNET 243327 5/17/13 000010 GUILDNET 5/17/13 000010 GUILDNET 243328

RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 274 SALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/24/13 REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 243329 315.20 I 5/17/13 000010 1,260.80 I 243330 5/10/13 000010 5/17/13 243331 000010 243332 5/17/13 000010 243333 5/17/13 000010 243334 5/17/13 000010 243335 5/17/13 000010 243336 5/17/13 000010 5/17/13 243337 000010 243338 5/17/13 000010 243339 5/17/13 000010 243340 5/17/13 000010 243341 5/10/13 000010 243342 5/17/13 000010 243343 5/17/13 000010 243344 5/17/13 000010 243345 5/17/13 000010 243346 5/17/13 000010 243347 5/17/13 000010 243348 5/10/13 000010 243349 5/10/13 000010 243350 5/17/13 000010 243351 5/17/13 000010 243352 5/17/13 000010 243353 5/17/13 000010 243354 5/17/13 000010 243355 5/17/13 000010 243356 5/17/13 000010 243357 5/17/13 000010 243358 5/17/13 000010 243359 5/03/13 000010 243360 5/17/13 000010 243361 5/17/13 000010 243362 000010 5/17/13 243363 5/17/13 000010 243364 5/17/13 000010 243365 5/17/13 000010 243366 000010 5/17/13 243367 000010 5/17/13 243368 5/03/13 000010 243369 5/17/13 000010 GUILDNET 243370 5/17/13 000010 243371 5/17/13 000010 243372 5/17/13 000010 243373 4/26/13 000010 Ι 243374 4/26/13 000010 243375 5/17/13 000010 243376 4/26/13 000010 5/17/13 000010 GUILDNET 243377

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 4 | - 27 | 15 |
|-----------|------------|------------|--------------------|---|----------|---------|--------------|------|---------|
| SALES JRN | NL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | GUI GUILDNET | | |
| | | | | SALES REGISTER | | | | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243378 | 5/17/13 | 000010 | GUILDNET | SANCHEZ, ESTERV | 42.00 | | 661.92 | I | |
| 243379 | 5/17/13 | 000010 | GUILDNET | SANTANA, OCTAVI | 25.00 | | 394.00 | I | |
| 243380 | 5/17/13 | 000010 | GUILDNET | SANTIAGO, ARMIN | 20.00 | | 315.20 | I | |
| 243381 | 5/17/13 | 000010 | GUILDNET | SANTIAGO, ILIA | 55.75 | | 878.62 | I | |
| 243382 | 5/17/13 | 000010 | GUILDNET | SANTIAGO, IVETH | 49.00 | | 772.24 | I | |
| 243383 | 5/17/13 | 000010 | GUILDNET | SANTIAGO, VICTO | 20.00 | | 335.20 | I | |
| 243384 | 5/17/13 | 000010 | GUILDNET | SCHNEIDER, RUTH | 56.00 | | 882.56 | I | |
| 243385 | 5/03/13 | 000010 | GUILDNET | SHELTON, AGUEDA | 49.00 | | 772.24 | I | |
| 243386 | 5/17/13 | 000010 | GUILDNET | SOLIS, JUDITH | 48.00 | | 756.48 | I | |
| 243387 | 5/17/13 | 000010 | GUILDNET | SOMRAJ, UMILLA | 8.00 | | 126.08 | I | |
| 243388 | 5/17/13 | 000010 | GUILDNET | SWABY, CLARENCE | 7.00 | | 1,400.00 | I | |
| 243389 | 5/17/13 | 000010 | GUILDNET | THEN, MARIA | 24.00 | | 378.24 | I | |
| 243390 | 5/17/13 | 000010 | GUILDNET | THERMOSY, MARIE | 45.00 | | 709.20 | I | |
| 243391 | 5/10/13 | 000010 | GUILDNET | TORO, ROSARIO | 58.00 | | 914.08 | I | |
| 243392 | 5/17/13 | 000010 | GUILDNET | TORRES, JUANITA | 38.50 | | 606.76 | I | |
| 243393 | 5/17/13 | 000010 | GUILDNET | TOUSSAINT, MIGU | 33.00 | | 520.08 | I | |
| 243394 | 5/03/13 | 000010 | GUILDNET | TROISI, DELIA | 40.00 | | 630.40 | I | |
| 243395 | 5/17/13 | 000010 | GUILDNET | VARGAS, ALCIBIA | 35.00 | | 551.60 | I | |
| 243396 | 5/17/13 | 000010 | GUILDNET | VARGAS, AUREA | 35.00 | | 586.60 | I | |
| 243397 | 5/17/13 | 000010 | GUILDNET | VAZQUEZ 2, ROSA | 20.00 | | 315.20 | I | |
| 243398 | 4/26/13 | 000010 | GUILDNET | VEGA, ADELAIDA | 9.99 | | 1,998.00 | I | |
| 243399 | 5/17/13 | 000010 | GUILDNET | VELEZ, CARMEN | 34.00 | | 535.84 | I | |
| 243400 | 5/17/13 | 000010 | GUILDNET | VELEZ, WILLIAM | 20.00 | | 315.20 | I | |
| 243401 | 5/17/13 | 000010 | GUILDNET | VICTORIO, ROQUE | 65.00 | | 1,024.40 | I | |
| 243402 | 5/17/13 | 000010 | GUILDNET | VLAHOS, MARIE | 64.00 | | 1,008.64 | I | |
| 243403 | 5/17/13 | 000010 | GUILDNET | WARD, ALTHEA | 4.00 | | 63.04 | I | |
| 243404 | 5/17/13 | 000010 | GUILDNET | WARD, ALTHEA | 4.00 | | 58.40 | I | |
| 243405 | 5/17/13 | 000010 | GUILDNET | WEISZ, KLARA | 8.00 | | 126.08 | I | |
| 243406 | 5/17/13 | 000010 | GUILDNET | WEST, BALDWIN | 20.00 | | 315.20 | I | |
| 243407 | 5/17/13 | 000010 | GUILDNET | WHITLEY, MYRNA | 16.00 | | 252.16 | I | |
| 243408 | 5/17/13 | 000010 | GUILDNET | YI, CARLOS | 24.00 | | 378.24 | I | |
| 243409 | 5/17/13 | 000010 | GUILDNET | ZARAGOZA, ISABE | 40.00 | | 630.40 | I | |
| 243410 | 5/17/13 | 000010 | GUILDNET | ZARE, GLORIA | 48.25 | | 760.42 | I | |
| 243411 | 5/17/13 | 000010 | GUILDNET | ZUMAETA, FANNY | 24.00 | | 378.24 | I | |
| | | | | REFERENCE SANCHEZ, ESTERV SANTANA, OCTAVI SANTIAGO, ARMIN SANTIAGO, ILIA SANTIAGO, IVETH SANTIAGO, VICTO SCHNEIDER, RUTH SHELTON, AGUEDA SOLIS, JUDITH SOMRAJ, UMILLA SWABY, CLARENCE THEN, MARIA THERMOSY, MARIE TORO, ROSARIO TORRES, JUANITA TOUSSAINT, MIGU TROISI, DELIA VARGAS, ALCIBIA VARGAS, ALCIBIA VARGAS, AUREA VAZQUEZ 2, ROSA VEGA, ADELAIDA VELEZ, CARMEN VELEZ, WILLIAM VICTORIO, ROQUE VLAHOS, MARIE WARD, ALTHEA WARD, ALTHEA WARD, ALTHEA WEST, BALDWIN WHITLEY, MYRNA YI, CARLOS ZARAGOZA, ISABE ZARE, GLORIA ZUMAETA, FANNY | 6,294.49 | 0.00 | 109,090.04 | | |
| | | | | CATEGORY | | | 109,090.04 | | |

| RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE | | | | E REGNY NY SALES REGISTER | | | PAGE 1 - 276 | | |
|--|----------|---------|--------------------|--|----------|---------|--------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | HFS HEALTH F | IRST | |
| | | | | SALES REGISTER | 2 | | BILL WEEK EN | DING | 5/24/13 |
| | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | |
| 243412 | 5/17/13 | 000122 | HEALTH FIRST | BEGUM, MANWARA | 28.00 | | 472.64 | I | |
| 243413 | 5/17/13 | 000122 | HEALTH FIRST | BHAIRO, KOWSILI | 56.00 | | 945.28 | I | |
| 243414 | 5/17/13 | 000122 | HEALTH FIRST | BLANCO, CARMELI | 20.00 | | 337.60 | I | |
| 243415 | 5/17/13 | 000122 | HEALTH FIRST | BOCHENEC, JOLAN | 35.00 | | 590.80 | I | |
| 243416 | 5/17/13 | 000122 | HEALTH FIRST | BOWERS *, DIANE | 50.00 | | 844.00 | I | |
| 243417 | 5/17/13 | 000122 | HEALTH FIRST | CARMONA, LUZ | 40.00 | | 675.20 | I | |
| 243418 | 5/17/13 | 000122 | HEALTH FIRST | CARRILLO, MARIA | 25.00 | | 422.00 | I | |
| 243419 | 5/17/13 | 000122 | HEALTH FIRST | CARRION, MARIA | 48.00 | | 810.24 | I | |
| 243420 | 5/17/13 | 000122 | HEALTH FIRST | CEBALLOS, ANA | 48.00 | | 810.24 | I | |
| 243421 | 5/17/13 | 000122 | HEALTH FIRST | CORTES DE GALIN | 30.00 | | 506.40 | I | |
| 243422 | 5/17/13 | 000122 | HEALTH FIRST | ESPAILLAT, AMPA | 38.00 | | 641.44 | I | |
| 243423 | 5/17/13 | 000122 | HEALTH FIRST | ESTEVES, JOSE | 32.00 | | 540.16 | I | |
| 243424 | 5/17/13 | 000122 | HEALTH FIRST | FERRERA, FRANCI | 70.00 | | 1,181.60 | I | |
| 243425 | 5/17/13 | 000122 | HEALTH FIRST | FONTANES, PEDRO | 56.00 | | 945.28 | I | |
| 243426 | 5/17/13 | 000122 | HEALTH FIRST | FRANCISCO, RICH | 56.00 | | 945.28 | I | |
| 243427 | 5/17/13 | 000122 | HEALTH FIRST | FRIAS, BARBARA | 12.00 | | 202.56 | I | |
| 243428 | 5/17/13 | 000122 | HEALTH FIRST | ISKANDER, JACOU | 56.00 | | 945.28 | I | |
| 243429 | 5/17/13 | 000122 | HEALTH FIRST | KAUR, HARBANS | 42.00 | | 708.96 | I | |
| 243430 | 5/17/13 | 000122 | HEALTH FIRST | LARA, TOMASA | 48.00 | | 810.24 | I | |
| 243431 | 5/17/13 | 000122 | HEALTH FIRST | LAZALA, GLADYS | 84.00 | | 1,417.92 | I | |
| 243432 | 5/17/13 | 000122 | HEALTH FIRST | LOPEZ-RAMIREZ, | 69.00 | | 1,164.72 | I | |
| 243433 | 5/10/13 | 000122 | HEALTH FIRST | MACARENA, SAHAR | 108.00 | | 1,823.04 | I | |
| 243434 | 5/17/13 | 000122 | HEALTH FIRST | ORTIZ, TULA | 30.00 | | 506.40 | I | |
| 243435 | 5/10/13 | 000122 | HEALTH FIRST | PALAZZOLO, FLOR | 108.00 | | 1,823.04 | I | |
| 243436 | 5/17/13 | 000122 | HEALTH FIRST | REINOSO, EMELIA | 66.00 | | 1,114.08 | I | |
| 243437 | 5/10/13 | 000122 | HEALTH FIRST | RIVERA, CHRISTO | 42.00 | | 708.96 | I | |
| 243438 | 5/17/13 | 000122 | HEALTH FIRST | RIVERA, EDDIE | 12.00 | | 202.56 | I | |
| 243439 | 5/17/13 | 000122 | HEALTH FIRST | RODRIGUEZ, MARG | 20.00 | | 337.60 | I | |
| 243440 | 5/17/13 | 000122 | HEALTH FIRST | SALAZAR, LUZ MA | 55.00 | | 928.40 | I | |
| 243441 | 5/17/13 | 000122 | HEALTH FIRST | SALHUANA, YOLAN | 40.00 | | 675.20 | I | |
| 243442 | 5/17/13 | 000122 | HEALTH FIRST | SCHOONMAKER, JE | 53.00 | | 894.64 | I | |
| 243443 | 5/17/13 | 000122 | HEALTH FIRST | SPIVEY, PATRICI | 40.00 | | 675.20 | I | |
| 243444 | 5/17/13 | 000122 | HEALTH FIRST | ST ROMAINE, CLA | 68.00 | | 1,147.84 | I | |
| 243445 | 4/12/13 | 000122 | HEALTH FIRST | SURIEL, GERTRUD | 94.00 | | 1,586.72 | I | |
| 243446 | 5/17/13 | 000122 | HEALTH FIRST | THORNTON, SHIRL | 39.00 | | 658.32 | I | |
| 243447 | 5/17/13 | 000122 | HEALTH FIRST | VALENCIA, ESTHE | 12.00 | | 202.56 | I | |
| 243448 | 5/17/13 | 000122 | HEALTH FIRST | VASQUEZ, OLGA | 20.00 | | 337.60 | I | |
| 243449 | 5/17/13 | 000122 | HEALTH FIRST | VEGA, GLORIA | 40.00 | | 675.20 | I | |
| | | | | REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BLANCO, CARMELI BOCHENEC, JOLAN BOWERS *, DIANE CARMONA, LUZ CARRILLO, MARIA CARRION, MARIA CEBALLOS, ANA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA ISKANDER, JACOU KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR ORTIZ, TULA PALAZZOLO, FLOR REINOSO, EMELIA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SCHOONMAKER, JE SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD THORNTON, SHIRL VALENCIA, ESTHE VASQUEZ, OLGA VEGA, GLORIA | 1,790.00 | 0.00 | 30,215.20 | | |
| | | | | CATEGORY | 1,790.00 | 0.00 | 30,215.20 | | |

| | 05/22/13 IL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG | NY NY S REGISTER | | | PAGE 1 NHP NEIGHBOR | - 27 HOOD F | HEALTH |
|----------|-----------------------|---------|--------------------------------------|-----------|--|--------|---------|------------------------------|----------------|---------|
| | | | | SALE | SREGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243450 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | AHMED, UMARA | 56.00 | | 945.28 607.68 1,417.92 | I | |
| 243451 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | | AKHTER, SELINA | 36.00 | | 607.68 | I | |
| 243452 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | AKHTER, SELINA DEKMAK, GRISEL | 84.00 | | 1,417.92 | I | |
| 243453 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | DIAZ 1, CARMEN | 28.00 | | 472.64 202.56 1,350.40 | I | |
| 243454 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | FERNANDEZ, MARI | 12.00 | | 202.56 | I | |
| 243455 | 5/03/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | FLORES, MARITZA | 80.00 | | 1,350.40 | I | |
| 243456 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | GARDNER, DIANE | 20.00 | | 337.60 | I | |
| 243457 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | JONES, CYNTHIA | 25.00 | | 337.60 422.00 | I | |
| 243458 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | KHAN, FARUQUE KROLL, KATHERIN MORALES HERNAD MOSKOWITZ, RONA OCASIO, VIRGINI RODRIGUEZ -2, M RODRIGUEZ, JESS | 84.00 | | 1,417.92 | I | |
| 243459 | 5/10/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | KROLL, KATHERIN | 35.00 | | 590.80 | I | |
| 243460 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | MORALES HERNAD | 42.00 | | 708.96 | I | |
| 243461 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | MOSKOWITZ, RONA | 36.00 | | 607.68 | I | |
| 243462 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | OCASIO, VIRGINI | 30.00 | | 506.40 | I | |
| 243463 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | RODRIGUEZ -2, M | 30.00 | | 506.40 | I | |
| 243464 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | RODRIGUEZ, JESS | 25.00 | | 422.00 | I | |
| 243465 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | SHEPPARD, ERMA | 70.00 | | 1,181.60 | I | |
| 243466 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | WELLS, WYNORIA | 16.00 | | 270.08 | I | |
| 243467 | 5/17/13 | 000120 | NEIGHBORHOOD HEALTH | PROVIDERS | SHEPPARD, ERMA WELLS, WYNORIA WILSON, SHERYL | 38.00 | | 641.44 | I | |
| | | | | | CUSTOMER | 747.00 | | 12,609.36 | | |
| | | | | | CATEGORY | 747.00 | | 12,609.36 | | |

| RUN DATE | | | YSIDE CITYWIDE | | | | | - 27 | |
|-----------|----------|---------|----------------------|-----------------|--------|---------|--------------|------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | FID NY CATHO | - / | |
| | | | | SALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243468 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | BATISTA, JOSE | 49.00 | | 826.63 | I | |
| 243469 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | BROWN, CARMEN | 7.00 | | 118.09 | I | |
| 243470 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | GARCIA, CLEMENT | 7.00 | | 118.09 | I | |
| 243471 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | GIL, ALICIA M | 35.00 | | 590.45 | I | |
| 243472 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | LITMAN, GAIL | 23.00 | | 388.01 | I | |
| 243473 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | ORTIZ, EDUARDO | 35.00 | | 590.45 | I | |
| 243474 | 5/03/13 | 000126 | NYS CATHOLIC/FIDELIS | PANOS, DESPINA | 54.00 | | 910.98 | I | |
| 243475 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | SALABERRY, ANA | 72.00 | | 1,214.64 | I | |
| 243476 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | SAMOJEDNY, MICH | 30.00 | | 506.10 | I | |
| 243477 | 5/17/13 | 000126 | NYS CATHOLIC/FIDELIS | SZE, BECKY | 41.00 | | 691.67 | I | |
| | | | | CUSTOMER | 353.00 | 0.00 | 5,955.11 | | |
| | | | | CATEGORY | 353.00 | 0.00 | 5,955.11 | | |

| RUN DATE SALES JRN | , , - | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 UHC UNITED HI | - 27 | 79 |
|-----------------------|---------|-----------------------|--------------------------------------|-----------------|--------|---------|-------------------------|------|---------|
| 511225 014 | ,, 0001 | 200 001 | | SALES REGISTER | | | BILL WEEK EN | | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243478 | 5/17/13 | 000128 | UNITED HEALTH CARE | CALDERON, MIGDA | 70.00 | | 1,201.20 | I | |
| 243479 | 5/17/13 | 000128 | UNITED HEALTH CARE | FARFAN, MARIA | 15.00 | | 257.40 | I | |
| 243480 | 5/17/13 | 000128 | UNITED HEALTH CARE | KHAN, FAZAL | 84.00 | | 1,441.44 | I | |
| 243481 | 5/17/13 | 000128 | UNITED HEALTH CARE | KOH, BYUNG CHOL | 21.00 | | 360.36 | I | |
| 243482 | 5/17/13 | 000128 | UNITED HEALTH CARE | MILLAN, ARMIDA | 45.00 | | 772.20 | I | |
| 243483 | 5/17/13 | 000128 | UNITED HEALTH CARE | REYES, RODOLFO | 24.00 | | 411.84 | I | |
| 243484 | 5/17/13 | 000128 | UNITED HEALTH CARE | SAFOS, PATRA | 56.00 | | 960.96 | I | |
| | | | | CUSTOMER | 315.00 | 0.00 | 5,405.40 | | |
| | | | | CATEGORY | 315.00 | 0.00 | 5,405.40 | | |

| RUN DATE | 05/22/13 - | | YSIDE CITYWIDE | | | | | PAGE 1 | - 28 | 30 |
|-----------|------------|---------|--------------------|----------|------------|--------|---------|--------------|-------|---------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY 1 | NY | | | EHP EMBLEM H | EALTH | |
| | | | | SALES RI | EGISTER | • | | BILL WEEK EN | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | RENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 243485 | 5/17/13 | 000114 | EMBLEM HEALTH | COPE, | WILLIE | 84.00 | | 1,417.92 | I | |
| 243486 | 5/17/13 | 000114 | EMBLEM HEALTH | COPEL | AND, ELISE | 48.00 | | 684.00 | I | |
| 243487 | 5/17/13 | 000114 | EMBLEM HEALTH | DE JE: | SUS, TIBUR | 84.00 | | 1,417.92 | I | |
| 243488 | 5/17/13 | 000114 | EMBLEM HEALTH | GAFFN | EY, FREDER | 20.00 | | 337.60 | I | |
| 243489 | 5/17/13 | 000114 | EMBLEM HEALTH | | ZZO, ANGEL | 59.00 | | 995.92 | I | |
| 243490 | 5/17/13 | 000114 | EMBLEM HEALTH | | ON, FRANCE | 42.00 | | 708.96 | T | |
| 243491 | 5/17/13 | 000114 | EMBLEM HEALTH | | N, CATHERI | 72.00 | | 1,215.36 | T | |
| 243492 | 5/17/13 | 000114 | EMBLEM HEALTH | | LOH, HOWAR | 36.00 | | 607.68 | T | |
| 243493 | 5/17/13 | 000114 | EMBLEM HEALTH | | LDS, HARRI | 12.00 | | 202.56 | T | |
| 243494 | 5/17/13 | 000114 | EMBLEM HEALTH | | IELD, BREN | 56.00 | | 945.28 | T | |
| 243495 | 5/17/13 | 000114 | EMBLEM HEALTH | | ITSIS, LEO | 25.00 | | 422.00 | T | |
| 213173 | 3/1//13 | 000111 | | 1 111111 | | | | | | |
| | | | | | CUSTOMER | 538.00 | 0.00 | 8,955.20 | | |
| | | | | | | | | | | |
| | | | | | CATEGORY | 538.00 | 0.00 | 8,955.20 | | |

| RUN DATE 05 SALES JRNL | | UP SUNNY OC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E | | | | PAGE 1 HIP HEALTH IN BILL WEEK END | | |
|----------------------------------|--|---|---|---|--|---------|---|------------------|---------|
| INVOICE# | DATE CU | UST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243497 5 243498 5 243499 5 | 5/17/13 00 5/17/13 00 5/17/13 00 | 00136 00136 00136 00136 00136 | HEALTH INSURANCE PLAN OF NY | AHMAD, AMATUL CIPRIAN, JACQUE ORR, LOUISE SHAH, HANSIKABE WILLIAMS, DIANE | 28.00 20.00 35.00 5.00 20.00 | | 472.64 337.60 590.80 84.40 337.60 | I I I I | |
| | | | | CUSTOMER | 108.00 | 0.00 | 1,823.04 | | |
| | | | | CATEGORY | 108.00 | 0.00 | 1,823.04 | | |

| | | | YSIDE CITYWIDE | 222 177 | | | | | - 28 | |
|-----------|----------|---------|--------------------|---------|-------------|--------|---------|--------------|------|---------|
| SALES JRN | L # 0334 | TOG 001 | SUNNYSIDE CITYWIDE | - | NY | | | MPH METROPLU | | |
| | | | | SALES R | EGISTER | ₹ | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFE | ERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243501 | 5/17/13 | 000130 | METROPLUS HEALTH | ARIAS | S, NORA | 68.00 | | 1,166.20 | I | |
| 243502 | 5/17/13 | 000130 | METROPLUS HEALTH | CORDE | ERO, ROSEND | 50.00 | | 857.50 | I | |
| 243503 | 5/17/13 | 000130 | METROPLUS HEALTH | DOBBI | INS, SANDRA | 168.00 | | 2,881.20 | I | |
| 243504 | 5/17/13 | 000130 | METROPLUS HEALTH | GALAS | S, TERESA | 27.00 | | 463.05 | I | |
| 243505 | 5/17/13 | 000130 | METROPLUS HEALTH | GOMEZ | Z, LUZ | 32.00 | | 548.80 | I | |
| 243506 | 5/17/13 | 000130 | METROPLUS HEALTH | MURDO | OCK, GERTRU | 49.00 | | 840.35 | I | |
| 243507 | 5/10/13 | 000130 | METROPLUS HEALTH | OSORI | IO, ELVIA | 24.00 | | 411.60 | I | |
| 243508 | 5/17/13 | 000130 | METROPLUS HEALTH | PERSA | AD, USHA | 70.00 | | 1,200.50 | I | |
| 243509 | 5/17/13 | 000130 | METROPLUS HEALTH | RAMPE | ERSAID, ALI | 24.00 | | 411.60 | I | |
| 243510 | 5/17/13 | 000130 | METROPLUS HEALTH | RYALS | S, CHARLES | 32.00 | | 548.80 | I | |
| 243511 | 5/17/13 | 000130 | METROPLUS HEALTH | VALLE | E, BLASINA | 37.00 | | 634.55 | I | |
| | | | | | CUSTOMER | 581.00 | 0.00 | 9,964.15 | | |
| | | | | | CATEGORY | 581.00 | 0.00 | 9,964.15 | | |

| RUN DATE | 05/22/13 | - SUP SUNN | YSIDE CITYWIDE | | REG NY NY LES REGISTER | | | PAGE 1 | - 28 | 3 |
|-----------|-----------|------------|----------------------|------|---|----------|---------|---------------|-------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | | REG NY NY | | | WEL WELCARE (| OF NY | |
| | | | | S A | LES REGISTER | <u>.</u> | | BILL WEEK EN | DING | 5/24/13 |
| | | | | | | | | | | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| | | | | | | | | | | |
| 243512 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | ALONSO, ANA | 35.00 | | 602.00 | I | |
| 243513 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | BATILO, MARTA | 47.00 | | 808.40 | I | |
| 243514 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | BISRAM, ROOPKAL | 20.00 | | 344.00 | I | |
| 243515 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | CEBALLOS, FRANC | 70.00 | | 1,204.00 | I | |
| 243516 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | CHOUDHURY, MEHE | 84.00 | | 1,444.80 | I | |
| 243517 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | CRUZ, LUIS | 56.00 | | 963.20 | I | |
| 243518 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | FRANCISCO, BRIG | 35.00 | | 602.00 | I | |
| 243519 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | GODINOT, CARMEN | 30.00 | | 516.00 | I | |
| 243520 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | GOMEZ, RANNIE | 35.00 | | 602.00 | I | |
| 243521 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | HAYNES, LAMONT | 30.00 | | 516.00 | I | |
| 243522 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | HUDGINS, LOUZET | 30.00 | | 516.00 | I | |
| 243523 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | LOPEZ, ISABEL | 35.00 | | 602.00 | I | |
| 243524 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | LOPEZ, MANUEL | 84.00 | | 1,444.80 | I | |
| 243525 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | LOPEZ, VITALIA | 84.00 | | 1,444.80 | I | |
| 243526 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | MARTINEZ, MARIA | 36.00 | | 619.20 | I | |
| 243527 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | MEDINA, MARTHA | 18.00 | | 309.60 | I | |
| 243528 | 4/26/13 | 000124 | WELCARE OF NEW YORK, | INC. | MOHAMED, DENISE | 40.00 | | 688.00 | I | |
| 243529 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | MORALES, FRANCI | 35.00 | | 602.00 | I | |
| 243530 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | NAVARRO, ANTONI | 45.00 | | 774.00 | I | |
| 243531 | 5/10/13 | 000124 | WELCARE OF NEW YORK, | INC. | ORTIZ, DOLORES | 82.00 | | 1,410.40 | I | |
| 243532 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | ORTIZ, JOSE | 8.00 | | 137.60 | I | |
| 243533 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | PATRICK, IMAGEN | 48.00 | | 825.60 | I | |
| 243534 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | PERALTA RODRIGO | 20.00 | | 344.00 | I | |
| 243535 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | PERALTA, INEZ | 20.00 | | 344.00 | I | |
| 243536 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | PEREZ, JULIO | 15.00 | | 258.00 | I | |
| 243537 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | RAMIREZ, ALIDA | 63.00 | | 1,083.60 | I | |
| 243538 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | REGLA, MARIA F | 48.00 | | 825.60 | I | |
| 243539 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | REYES, TERESA | 56.00 | | 963.20 | I | |
| 243540 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | RODRIGUEZ, FRAN | 30.00 | | 516.00 | I | |
| 243541 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | SANCHEZ FLORES, | 12.00 | | 206.40 | I | |
| 243542 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | SANCHEZ, BETANI | 30.00 | | 516.00 | I | |
| 243543 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | SANTOS MARQUEZ, | 12.00 | | 206.40 | I | |
| 243544 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | SERRANO, CARMEN | 35.00 | | 602.00 | I | |
| 243545 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | SOTO, RAFAEL B | 54.00 | | 928.80 | I | |
| 243546 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | VAZQUEZ 1, ROSA | 39.00 | | 670.80 | I | |
| 243547 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | VENTURA, CLARA | 16.00 | | 275.20 | I | |
| 243548 | 5/17/13 | 000124 | WELCARE OF NEW YORK, | INC. | YOUNG, MARY | 56.00 | | 963.20 | I | |
| | | | | | CUSTOMER | 1,493.00 | 0.00 | 25,679.60 | | |
| | | | | | REFERENCE ALONSO, ANA BATILO, MARTA BISRAM, ROOPKAL CEBALLOS, FRANC CHOUDHURY, MEHE CRUZ, LUIS FRANCISCO, BRIG GODINOT, CARMEN GOMEZ, RANNIE HAYNES, LAMONT HUDGINS, LOUZET LOPEZ, ISABEL LOPEZ, MANUEL LOPEZ, WANUEL LOPEZ, WANTEL MARTINEZ, MARIA MEDINA, MARTHA MOHAMED, DENISE MORALES, FRANCI NAVARRO, ANTONI ORTIZ, JOSE PATRICK, IMAGEN PERALTA RODRIGO PERALTA, INEZ PEREZ, JULIO RAMIREZ, ALIDA REGLA, MARIA F REYES, TERSA RODRIGUEZ, FRAN SANCHEZ FLORES, SANCHEZ, BETANI SANTOS MARQUEZ, SERRANO, CARMEN SOTO, RAFAEL B VAZQUEZ 1, ROSA VENTURA, CLARA YOUNG, MARY CUSTOMER CATEGORY | 1,493.00 | 0.00 | 25,679.60 | | |

| RUN DATE SALES JRN | | - SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY | | | PAGE 1 - AMG AMERIGROUP | 284 |
|-----------------------|----------|------------|-----------------------------------|-----------------|--------|---------|----------------------------|------------|
| SALES UKN | ш # 0334 | HOC 001 | SUNNISIDE CITIWIDE | SALES REGISTER | | | BILL WEEK ENDI | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243549 | 5/17/13 | 000132 | AMERIGROUP | GUERRA, LORRAIN | 52.00 | | 877.76 | I |
| 243550 | 5/17/13 | 000132 | AMERIGROUP | PRUITT, JOHNNY | 4.00 | | 67.52 | I |
| 243551 | 5/17/13 | 000132 | AMERIGROUP | WALTERS, BYRON | 30.00 | | 506.40 | I |
| 243552 | 5/17/13 | 000132 | AMERIGROUP | YOUNG, KALEILE | 23.00 | | 388.24 | I |
| | | | | CUSTOMER | 109.00 | 0.00 | 1,839.92 | |
| | | | | CATEGORY | 109.00 | 0.00 | 1,839.92 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE | DEC NY NY | | | PAGE 1 - | - 285 D 2 |
|-----------------------|----------|-----------------------|--------------------|-----------------------------|--------|---------|---------------|--------------|
| SALES URN | ш # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | BILL WEEK END | |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT ' | TYP SURPLUS |
| 243553 | 5/10/13 | 000204 | AMERIGROUP 2 | AKHTAR, CATHRIN | 85.00 | | 1,275.00 | I |
| 243554 | 5/17/13 | 000204 | AMERIGROUP 2 | COLCHAMIRO, EST | 25.00 | | 375.00 | I |
| 243555 | 5/17/13 | 000204 | AMERIGROUP 2 | CRUZ, SALVADOR | 24.00 | | 360.00 | I |
| 243556 | 5/17/13 | 000204 | AMERIGROUP 2 | DENNISON, KELVI | 23.00 | | 345.00 | I |
| 243557 | 5/17/13 | 000204 | AMERIGROUP 2 | ESPINAL, MARIA | 36.00 | | 540.00 | I |
| 243558 | 5/17/13 | 000204 | AMERIGROUP 2 | FERNANDEZ, NORK | 42.00 | | 630.00 | I |
| 243559 | 5/03/13 | 000204 | AMERIGROUP 2 | HARDING, EDNA | 24.00 | | 360.00 | I |
| 243560 | 5/17/13 | 000204 | AMERIGROUP 2 | MARTINEZ, TOMAS | 20.00 | | 300.00 | I |
| 243561 | 5/17/13 | 000204 | AMERIGROUP 2 | RIVERA, CARMEN | 25.00 | | 375.00 | I |
| | | | | CUSTOMER | 304.00 | 0.00 | 4,560.00 | |
| | | | | CATEGORY | 304.00 | 0.00 | 4,560.00 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - HCP HEALTHCARE BILL WEEK ENDII | PARTNERS |
|----------------------------|-------------------------------|----------------------------|--|---|-------------------------|---------|---|-------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | YP SURPLUS |
| 243562 243563 243564 | 5/17/13 5/17/13 5/10/13 | 000148 000148 000148 | HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS | GOMEZ, AGUSTINA SCOTT, AKHNATON ZAMBRANO, ZOILA | 63.00 36.00 24.00 | | 1,063.44 607.68 405.12 | [[[|
| | | | | CUSTOMER | 123.00 | 0.00 | 2,076.24 | |
| | | | | CATEGORY | 123.00 | 0.00 | 2,076.24 | |

| - | , , - | | YSIDE CITYWIDE | | | | _ | - 2 | |
|-----------|-----------|---------|---------------------------|-----------------|--------|---------|--------------|--------|--------------|
| SALES JRN | 1L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE RE | EG NY NY | | | ICS INDEPEND | ENCE (| CARE SYSTEMS |
| | | | S A L | ES REGISTEF | 8 | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243565 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | AGOSTINI, MONSE | 30.00 | | 492.00 | I | |
| 243566 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | BERRY, ANGELINA | 28.00 | | 459.20 | I | |
| 243567 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | JONES, VALERIE | 20.00 | | 328.00 | I | |
| 243568 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | MUSHAYEV, BORIS | 20.00 | | 328.00 | I | |
| 243569 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | PEREZ, RAFAELA | 24.00 | | 393.60 | I | |
| 243570 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | POLANCO, BRIGID | 5.00 | | 1,125.00 | I | |
| 243571 | 5/17/13 | 000172 | INDEPENDENCE CARE SYSTEMS | RODRIGUEZ, SILV | 56.00 | | 918.40 | I | |
| | | | | CUSTOMER | 183.00 | 0.00 | 4,044.20 | | |
| | | | | CATEGORY | 183.00 | 0.00 | 4,044.20 | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | | PAGE 1 | - 288 |
|-----------|------------|------------|---------------------|----------|-----------------|-------|---------|---------------|-------------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG N | Y NY | | | VCS VNSNY CHO | DICE SELECTHEALTH |
| | | | | SALES | REGISTER | | | BILL WEEK ENI | DING 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP SURPLUS |
| 243572 | 5/17/13 | 000170 | VNSNY CHOICE SELECT | HEALTH F | KARASSAVIDES, A | 28.00 | | 480.48 | I |
| 243573 | 5/17/13 | 000170 | VNSNY CHOICE SELECT | HEALTH F | REYES, LORGIO | 26.00 | | 446.16 | I |
| | | | | | CUSTOMER | 54.00 | 0.00 | 926.64 | |
| | | | | | | | | | |
| | | | | | CATEGORY | 54.00 | 0.00 | 926.64 | |

| | | | YSIDE CITYWIDE | | | | - | 289 |
|-----------|----------|---------|------------------------------|-----------------|-----------|---------|----------------|------------|
| SALES JRN | L # 0334 | LOC 001 | SUNNYSIDE CITYWIDE REG | | | | PAR PRIVATE | |
| | | | SALE | S REGISTER | | | BILL WEEK ENDI | NG 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TY | YP SURPLUS |
| 243574 | 5/17/13 | 000002 | SUNNYSIDE COMMUNITY SERVICES | BENZ, ROBERT | 12.00 | | 174.00 | Т |
| 243575 | 5/17/13 | 000002 | SUNNYSIDE COMMUNITY SERVICES | JONES-MORGAN, V | 4.00 | | 58.00 | - I |
| | -, , - | | | | | | | |
| | | | | CUSTOMER | 16.00 | 0.00 | 232.00 | |
| 243576 | 5/17/13 | 000040 | DUISIN, CHRISTINE | DUISIN, XENIA | 24.00 | | 378.00 | I |
| 243577 | 5/17/13 | 000049 | DOMINICAN SISTERS FAM HLTH | DIOP, SERIGNE | 26.25 | | 380.64 | I |
| 243578 | 5/17/13 | 000078 | MCDERMOTT, LOUISE | MCDERMOTT, LOUI | 8.00 | | 124.00 | I |
| | | | | CATEGORY | 74.25 | 0.00 | 1,114.64 | |
| | | | | | | | | |

| RUN DATE | 05/22/13 - | - SUP SUNN | YSIDE CITYWIDE | | | | PAGE 1 | - 29 | 0 |
|-----------|------------|------------|------------------------|----------------|-------|---------|--------------|--------|---------|
| SALES JRN | IL # 0334 | LOC 001 | SUNNYSIDE CITYWIDE | REG NY NY | | | CAS CHILDREN | 'S AID | |
| | | | S | ALES REGISTER | | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243579 | 5/17/13 | 000088 | CHILDREN'S AID SOCIETY | DUNNE, MYEISHA | 25.00 | | 387.50 | I | |
| 243580 | 5/17/13 | 000088 | CHILDREN'S AID SOCIETY | SALAS, HELENA | 24.00 | | 372.00 | I | |
| | | | | CUSTOMER | 49.00 | 0.00 | 759.50 | | |
| | | | | CODIONER | 17.00 | 0.00 | 755.50 | | |
| | | | | | | | | | |
| | | | | CATEGORY | 49.00 | 0.00 | 759.50 | | |

| | 05/22/13 - NL # 0334 | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | 1 | | PAGE 1 - 291 PAR PRIVATE BILL WEEK ENDING 5/ | 24/13 |
|----------|-------------------------|---------|--------------------------------------|-----------------------------|-------|---------|--|--------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT TYP SU | JRPLUS |
| 243581 | 5/17/13 | 000098 | MILDRED PANSE | PANSE, MILDRED | 20.00 | | 310.00 I | |
| | | | | CATEGORY | 20.00 | 0.00 | 310.00 | |

| RUN DATE SALES JRN | | - SUP SUNN LOC 001 | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY NY SALES REGISTER | | | PAGE 1 - ELD ELDERSERVE BILL WEEK ENDI | |
|-----------------------|--------------------|-----------------------|--------------------------------------|---------------------------------|----------------|---------|--|------------|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243582 243583 | 5/17/13 5/17/13 | 000101 000101 | ELDERSERVEHEALTH ELDERSERVEHEALTH | BEAN, ELMIRA MEYSTER, LYUBOV | 25.00 25.00 | | 362.50 362.50 | I I |
| | | | | CUSTOMER | 50.00 | 0.00 | 725.00 | |
| | | | | CATEGORY | 50.00 | 0.00 | 725.00 | |

| RUN DATE SALES JRN | | | YSIDE CITYWIDE SUNNYSIDE CITYWIDE | REG NY S A L E S | NY REGISTEF | 2 | | PAGE 1 PAR PRIVATE BILL WEEK EN | - 29 DING | 4 5/24/13 | |
|-----------------------|---------|---------|--------------------------------------|---------------------|----------------|--------|---------|---------------------------------------|--------------|--------------|--|
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | RI | EFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS | |
| 243594 | 5/17/13 | 000155 | ROSEMARY JIBAJA | JII | BAJA, ROSEMAR | 168.00 | | 2,676.00 | I | | |
| 243595 | 5/17/13 | 000179 | DOROTHY TABICKMAN | TAI | BICKMAN, DORT | 16.00 | | 248.00 | I | | |
| | | | | | CATEGORY | 184.00 | 0.00 | 2,924.00 | | | |

| | | | YSIDE CITYWIDE | | | | | | 295 |
|------------|----------|---------|----------------------|--------------------|--------------|-------|---------|----------------|-------------|
| SALES JRNI | L # 0334 | TOG 001 | SUNNYSIDE CITYWIDE | REG N S A L E S | | | | HHH HHH HOME C | |
| | | | | DALLD | | | | DIDD WEEK BNDI | 110 5/21/15 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | | REFERENCE | HOURS | TAX AMT | AMOUNT T | YP SURPLUS |
| 243596 | 5/17/13 | 000192 | HHH LONG TERM HOME F | HLTH CARE | TOVAR, ELENA | 32.00 | | 480.00 | I |
| | | | | | CATEGORY | 32.00 | 0.00 | 480.00 | |

| RUN DATE SALES JRN | | SUP SUNN | YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG | | | | PAR PRIVATE | - 29 | |
|-----------------------|--------------------|------------------|--|------------------------------------|---------------|---------|------------------|------|---------|
| | | | SALI | ES REGISTE | R | | BILL WEEK EN | DING | 5/24/13 |
| INVOICE# | DATE | CUST NO | CUSTOMER NAME | REFERENCE | HOURS | TAX AMT | AMOUNT | TYP | SURPLUS |
| 243597 | 5/17/13 | 000205 | BILL NANIS | NANIS, KOSTAS | 60.00 | | 948.00 | I | |
| 243598 | 5/17/13 | 000211 | CATHERINE BARLIS/ | BARLIS, CATHERI | 10.00 | | 170.00 | I | |
| 243599 | 5/17/13 | 002215 | KEITH SALMON | LAWRANCE, LILLA | 19.75 | | 318.13 | I | |
| 243600 | 5/17/13 | 003108 | NIGRO, CATHERINE | NIGRO, CATHERIN | 20.00 | | 310.00 | I | |
| 243601 | 5/17/13 | 004784 | CAMILLERI, JOSEPH | CAMILLERI, JOSE | 15.00 | | 202.50 | I | |
| 243602 | 5/17/13 | 009498 | LOUIS LE NOACH | LENOACH, LOUIS | 9.00 | | 148.50 | I | |
| 243603 | 5/17/13 | 009752 | PETER CAPORASO | CAPORASO, VINCE | 23.75 | | 403.75 | I | |
| 243604 | 5/17/13 | 010269 | ANGELINA MARASA | MARASA, ANGELIN | 6.00 | | 93.00 | I | |
| 243605 | 5/17/13 | 010529 | STEPHEN WEISS | WEISS, STELLA | 6.00 | | 102.00 | I | |
| 243606 | 5/17/13 | 010530 | DANA SITILDES | ANSELMI, PETER | 23.50 | | 370.26 | I | |
| 243607 | 5/17/13 | 011016 | MICHAEL SIANO | SIANO, ANDREW | 30.00 | | 405.00 | I | |
| 243608 | 5/17/13 | 011060 | ROBIN WARREN CHARLES | WARREN, CYNTHIA | 132.75 | | 2,114.25 | I | |
| 243609 243610 | 5/03/13 5/17/13 | 011394 011394 | HELGA JENSEN HELGA JENSEN | JENSEN, HELGA JENSEN, HELGA | 10.00 | | 170.00 480.00 | I | |
| | | | | CUSTOMER | 40.00 | 0.00 | 650.00 | | |
| 243611 | 5/17/13 | 011630 | JAMES BENZ | CAGAN, RUMANDO | 4.00 | | 62.00 | I | |
| 243612 | 5/17/13 | 011642 | ROSA FLORES | FLORES, ROSA | 30.00 | | 465.00 | I | |
| 243613 243614 | 4/19/13 5/17/13 | 012326 012326 | LORRAINE BIANCO-HOPKINS LORRAINE BIANCO-HOPKINS | BIANCO HOPKINS, BIANCO HOPKINS, | 4.00 20.00 | | 62.00 310.00 | I | |
| | | | | CUSTOMER | 24.00 | 0.00 | 372.00 | | |
| 243615 | 5/17/13 | 012565 | AMY L. WELTMAN | LUSKIND, FRANCE | 7.00 | | 1,338.00 | I | |
| 243616 | 5/17/13 | 012929 | JENNA SPERO | SPERO, NICHOLAS | 19.00 | | 305.00 | I | |
| 243617 | 5/17/13 | 013244 | FRANK JARAMILLO | FLOREZ, CAROLIN | 6.00 | | 93.00 | I | |
| | | | | CATEGORY | 485.75 | 0.00 | 8,870.39 | | |
| | | | | | 28,824.49 | | 481,345.00 | | |
| | | | | COMPANY | 28,824.49 | | 481,345.00 | | |

RUN DATE 05/22/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 297
SALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

ALES JRNL # 0334 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 5/24/13

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

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