RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 11/04/11 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS SENIOR HEALTH PARTNERS
WOO, LUZ 171075 10/28/11 000082 4.00 52.40 I 171076 10/28/11 000082 24.00 314.40 I 10/28/11 40.00 171077 000082 524.00 171078 10/28/11 000082 8.00 104.80 8.00 4.00 171079 10/28/11 000082 104.80 171080 10/28/11 000082 52.40 171081 10/28/11 000082 25.00 327.50 171082 10/28/11 000082 31.50 412.65 171083 10/28/11 000082 126.50 1,657.15 171084 10/28/11 000082 16.00 209.60 171085 10/28/11 000082 4.75 62.23 171086 10/28/11 000082 76.00 995.60 171087 10/28/11 76.00 995.60 000082 171088 10/28/11 000082 20.00 262.00 171089 10/28/11 000082 10.00 131.00 171090 10/28/11 8.00 104.80 000082 171091 10/28/11 40.00 524.00 000082 171092 10/28/11 000082 4.00 52.40 171093 32.00 419.20 10/28/11 000082 171094 10/28/11 000082 12.00 157.20 171095 10/28/11 000082 4.00 52.40 I _____ CUSTOMER 573.75 0.00 7,516.13

CATEGORY

573.75

0.00

7,516.13

			YSIDE CITYWIDE				PAGE 1 -	2
SALES JR	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171096 171097	10/28/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	53.50 7.50		780.03 I 109.35 I	
				CUSTOMER	61.00	0.00	889.38	
				CATEGORY	61.00	0.00	889.38	

RUN DATE 11/02/11 - SALES JRNL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	3 EM /O MATIC / IT
SALES URNL # 0253	TOC 001		SALES REGISTER			BILL WEEK ENDIN	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171098 10/28/11	800000	VISITING NURSE SERVICE	ACUNA, JOSE	28.00		408.24 I	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	4
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
		S	ALES REGISTER			BILL WEEK ENI	DING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171099 10/28/11	000008	VISITING NURSE SERVICE	ADAMES, OLGA	24.00		349.92	I	
171100 10/28/11	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	35.00		510.30	I	
171101 10/28/11	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	70.00		1,020.60	I	
171102 10/28/11	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	25.00		364.50	I	
			CUSTOMER	154.00	0.00	2,245.32		
			CATEGORY	154.00	0.00	2,245.32		

RUN DATE 11/02/11 -	SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	5
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171102 10/20/11	00000	TITATETNA NUDAR ARRIVAR	3 CHILL 3 D	40 00		F03 20 +	
171103 10/28/11	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	
			CALEGORI	40.00	0.00	363.20	

	11/02/11 NL # 0253	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	•
BALLS OR	IVL # 0255	100 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171104	10/28/11	000008	VISITING NURSE SERVICE	AKBAR, NASEEM	4.00		58.32	I
171105	10/28/11	800000	VISITING NURSE SERVICE	ALESSIU, AGRIPI	3.00		43.74	I
171106	10/28/11	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	24.75		360.86	I
171107	10/28/11	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	48.00		699.84	I
171108	10/28/11	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	56.00		816.48	I
171109	10/21/11	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	8.00		116.64	I
171110	10/28/11	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	24.00		349.92	I
171111	10/28/11	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	24.00		349.92	I
				CUSTOMER	191.75	0.00	2,795.72	
				CATEGORY	191.75	0.00	2,795.72	

			YSIDE CITYWIDE				PAGE 1	_	7
SALES JR	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING BILL WEEK EN		
				SALES REGISIER			DILL MEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171110	10/00/11	000000	THE CHEENIC NUMBER OF THE	ANGUI O DI GV	20 00		201 60	-	
171112 171113	10/28/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	20.00 61.00		291.60 889.38	T T	
1,1113	10/20/11	00000	VIBILING NORDE BERVICE						
				CUSTOMER	81.00	0.00	1,180.98		
				CATEGORY	81.00	0.00	1,180.98		

			YSIDE CITYWIDE				PAGE 1 -	- 8
SALES JR	NL # 0253	LOC 001		REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
171114	10/28/11	000008	VISITING NURSE SERVICE	AOUN, ODETTE	20.00		291.60	I
171115	10/28/11	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	39.75		579.56	I
				CUSTOMER	59.75	0.00	871.16	
				CATEGORY	59.75	0.00	871.16	

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE			PAGE 1 -	9
SALES JRNL # 0253 LOC 001 SUNNYSIDE CI			ADU ADULT	
	SALES REGISTE	R	BILL WEEK ENDING	11/04/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP	SURPLUS
171116 10/28/11 000008 VISITING NURS	E SERVICE ASADOURIAN, COR	4.00	58.32 I	
	CATEGORY	4.00 0	.00 58.32	

RUN DAT	E 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	10
SALES J	RNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			5	SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171117	10/28/11	800000	VISITING NURSE SERVICE	ASGHAR, MUHAMMA	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY	D.		PAGE 1 - LTC NURSING HOM	
			SALES REGISTE	K		BILL WEEK ENDIN	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171118 10/14/11	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	7.00		102.06 I	
171119 10/21/11	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	7.00		102.06 I	
171120 10/28/11	000008	VISITING NURSE SERVICE	ASHLEY, CLYDE	42.00		612.36 I	
171121 10/28/11	000008	VISITING NURSE SERVICE	AZAD, ABUL	7.25		105.71 I	
			CUSTOMER	63.25	0.00	922.19	
			 CATEGORY	63.25	0.00	922.19	

RUN DATE 11/02/11 SALES JRNL # 0253							12
SALES URNL # 0253	LOC UUI		REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171122 10/28/11	800000	VISITING NURSE SERVICE	BAEZ, JUAN	35.00		510.30 I	
			CATEGORY	35.00	0.00		

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK EN	DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171123 10/28/11	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	25.00		364.50	I
171124 10/28/11	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	64.00		933.12	I
			CUSTOMER	89.00	0.00	1,297.62	
			CATEGORY	89.00	0.00	1,297.62	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING 1	1/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171125 10/14/11	000008	VISITING NURSE SERVICE	BARBARITO, FRAN	5.00		72.90 I	
171126 10/28/11	800000	VISITING NURSE SERVICE	BARBARITO, FRAN	34.75		506.66 I	
			CUSTOMER	39.75	0.00	579.56	
			CATEGORY	39.75	0.00	579.56	

RUN DATE 1:	1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- :	15
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW	O WALLS (LT
				SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171127 10	0/28/11	000008	VISITING NURSE SERVICE	BARDEANU, VICTO	45.00		656.10	I	
171128 1	0/28/11	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	48.50		707.13	I	
171129 1	0/28/11	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	38.00		554.04	I	
				CUSTOMER	131.50	0.00	1,917.27		
				CATEGORY	131.50	0.00	1,917.27		

RUN DATE 11/02/11	- SUP SUNNYSIDE CITYWIDE				PAGE 1	- 16
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
		SALES REGISTEI	₹		BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171130 10/28/11	000008 VISITING NURSE SERVICE	BEGUM, IQBAL	4.00		58.32	I
171131 10/28/11	000008 VISITING NURSE SERVICE	·	139.00		2,026.62	I
			1.40.00			
		CUSTOMER	143.00	0.00	2,084.94	
		CATEGORY	143.00	0.00	2,084.94	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYW	DE REGNY NY SALES REGISTE	R	PAGE 1 - 17 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171132 10/28/11 171133 10/28/11	000008 VISITING NURSE SI 000008 VISITING NURSE SI	· · · · · · · · · · · · · · · · · · ·	25.00 30.00	364.50 I 437.40 I
		CUSTOMER	55.00 0.00	801.90
		 CATEGORY	55.00 0.00	801.90

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 18 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171134 10/28/11 171135 10/28/11 171136 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BIANCO HOPKINS,	25.75 20.00 6.00		375.44 I 291.60 I 87.48 I
			CUSTOMER	51.75	0.00	754.52
			CATEGORY	51.75	0.00	754.52

RUN DATE 11/02/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	19
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171137 10/28/11	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
			CATEGORY	40.00	0.00		

RUN DATE 11/02/11 -						PAGE 1 -	20
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			VCP CHOICE LHCS	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171138 10/28/11	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	20.00		291.60	[
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 -						PAGE 1 - 21	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 11/04/11	
						DIED WEEK ENDING 11/01/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171139 10/28/11 171140 10/28/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	BOCANEGRA, GLAD BONILLA, ESPERA	19.75 47.00		287.96 I 685.27 I	
			CUSTOMER	66.75	0.00	973.23	
			CATEGORY	66.75	0.00	973.23	

RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	22	
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			S	SALES REGISTER			BILL WEEK ENDING	11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
171141 1	10/28/11	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	3.00		43.74 I		
				CATEGORY	3.00	0.00	43.74		

ı	RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	23
ı	SALES JRNI	և # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	· ·
ı					SALES REGISTER			BILL WEEK ENDING	11/04/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	171142 1	10/28/11	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
					CATEGORY	25.00	0.00	364.50	

RUN DATE 11/02/11 -						PAGE 1 -	
SALES JRNL # 0253	LOC 001 SU		REG NY NY ALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
		2				2122 N22N 2N21NO	11/01/11
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171143 10/28/11	000008 VIS	SITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
			CATEGORY	12.00	0.00	174.96	

	02/11 - SUP SUNI 0253 LOC 001		REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171144 10/	28/11 000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	29.00		422.82	I
			CATEGORY	29.00	0.00	422.82	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	26
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	J
			Si	ALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171145	10/28/11	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2'	7
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	
			2	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171146	10/28/11	800000	VISITING NURSE SERVICE	BROWN, BETTY	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE	777			-	28
SALES JR.	NL # 0253	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
							DIDD WEEK BREING	11/01/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171147 171148	10/28/11 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BURGOS, RAFAELA BURNS, MARGARET	9.00 51.00		131.22 I 743.60 I	
				CUSTOMER	60.00	0.00	874.82	
				CATEGORY	60.00	0.00	874.82	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LAD NURSING HOMI BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
171149 10/28/11	000008 VISITING NURSE SERV	CCE BUSCARELLO, JOH	56.00		816.48 I	
		CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 -	5 0
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHO	
								, , ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
171150	10/28/11	000008	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80	I
171151	10/28/11	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	40.00		583.20	I
				CUSTOMER	50.00	0.00	729.00	
				002101121	50.00	0.00	723.00	
				CATECODY	EO OO	0.00	720 00	
				CUSTOMER CATEGORY	50.00	0.00	729.00 729.00	

RUN DATE 11/02/11 - SUP SU						31
SALES JRNL # 0253 LOC 00					ADU ADULT	
	SALE	S REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171152 10/28/11 000008	VISITING NURSE SERVICE	CALDERON, ELISA	20.00		291.60 I	
		CATEGORY	20.00	0.00		

	11/02/11 - NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY					32
SALES UKI	иш # 0255	LOC UUI		SALES REGISTER			VCP CHOICE LI BILL WEEK EN		11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171153 171154	10/28/11 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	CALDERON, FRANC CALDERON, VIRGI	44.00 36.00		641.52 524.88	I	
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

ı	RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33	
ı	SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	Т	
ı				S	SALES REGISTER			BILL WEEK ENDING	; 11/04/11	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	171155	10/28/11	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54 I		
ı										
ı										
ı					CATEGORY	63.00	0.00	918.54		

RUN DATE 11/02/11 - S SALES JRNL # 0253 I			NY			PAGE 1 VCP CHOICE L	- HCSA	34
		SALES	REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DATE C	CUST NO CUSTOMER NAME	:	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171156 10/28/11 0	000008 VISITING NURS	E SERVICE C.	AMBARA, JOSEFA	56.00		816.48	I	
			CATEGORY	 56.00	0.00	816.48		

RUN DATE 11/02/11 - SALES JRNL # 0253		IDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	35
SALES URNL # 0253	TOC OOL S		ALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE# DATE	CUST NO CU	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171157 10/28/11		ISITING NURSE SERVICE	CANO, ADELINA	26.00		379.08	[
171158 10/21/11 171159 10/28/11		ISITING NURSE SERVICE ISITING NURSE SERVICE	CANTO, THERESA CANTO, THERESA	3.00 8.50		43.74 123.94	[[
			CUSTOMER	37.50	0.00	546.76	
			CATEGORY	37.50	0.00	546.76	

	11/02/11 - NL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	5 0	
			S	SALES REGISTER			BILL WEEK ENDI	NG 11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS	
171160	10/28/11	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,224.72	I	
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	37
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	E W/O WALLS LT
			SALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171161 10/28/11	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 11/02/11 - SALES JRNL # 0253	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	SA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171162 10/28/11 171163 10/21/11 171164 10/28/11 171165 10/28/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CARELA-REYES, M CARELA-REYES, M	54.75 5.00 25.00 41.50		798.26 1 72.90 1 364.50 1 605.07 1	
			CUSTOMER	126.25	0.00	1,840.73	
			CATEGORY	126.25	0.00	1,840.73	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3 ADU ADULT	39
			\$	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171166	10/28/11	800000	VISITING NURSE SERVICE	CARTAFALSA, NEL	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN	DATE 11	/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	40
SALI	ES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				i	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INV	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1711	167 10	/28/11	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	47.50		692.55 I	
					CATEGORY	47.50	0.00		

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 41	
SALES JRN	IL # 0253	LOC 001		REG NY NY			CCL CONGREGATE CARE PRO	_
			5	SALES REGISTER			BILL WEEK ENDING 11/04	/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
171168	9/16/11	800000	VISITING NURSE SERVICE	CATALLI, ALICE	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE 11/02/11 - S SALES JRNL # 0253 I	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWID	E REGNY NY SALES REGISTER		PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDING	A
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TY	P SURPLUS
171169 10/28/11 0	000008 VISITING NURSE SER	VICE CEBALLOS, CLEME	16.00	233.28 I	
		CATEGORY	16.00	0.00 233.28	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	43
SALES UNIL # 0233	TOC 001		SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171170 10/28/11 171171 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 9.00		131.22 I 131.22 I	
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 -	44
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA	
	:	SALES REGISTER		BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP	SURPLUS
171172 10/28/11	000008 VISITING NURSE SERVICE	CERNILLI, MARIA	30.00	437.40 I	
		CATEGORY	30.00 0.00	437.40	

RUN DATE 11/02/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	45
SALES JRNL # 0253	LOC 001		REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171173 10/28/11	000008	VISITING NURSE SERVICE	CHAPDELAINE, JE	6.00		87.48 I	
20,20,11						27.10	
			CATEGORY	6.00	0.00	87.48	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 46	
SALES JRI	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
				SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171174	10/28/11	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	7.75		113.00 I	
				CATEGORY	7.75	0.00	113.00	

RUN DATE 11/0)2/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171175 10/2	28/11 000008	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 48 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171176 10/21/11 171177 10/28/11		VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00		291.60 I 291.60 I
			CUSTOMER	40.00	0.00	583.20
			CATEGORY	40.00	0.00	583.20

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	49
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
			\$	SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171178	10/28/11	000008	VISITING NURSE SERVICE	CHAUCA, PEDRO	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER		PAGE 1 - 50 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171179 10/28/11	000008 VISITING NURSE SERVICE	CHILLIOUS, THEO	15.00	218.70 I
		CATEGORY	15.00 0.00	218.70

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	51
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
171180	10/28/11	000008	VISITING NURSE SERVICE	CHIPA, PANAGIOT	15.00		218.70	I	
					15.00				
				CATEGORY	15.00	0.00	218.70		

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 52	
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
		SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171181 10/28/11	000008 VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40 I	
		CATEGORY	30.00	0.00	437.40	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	53
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE		
			5	SALES REGISTER			BILL WEEK E	NDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171182	10/28/11	800000	VISITING NURSE SERVICE	CHOUDHURY, SHAM	49.00		714.42	I	
				CATEGORY	49.00	0.00	714.42	_	

RUN DATE 11/02/1						PAGE 1 -	54
SALES JRNL # 025	3 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171183 10/28/1	1 000008	VISITING NURSE SERVICE	CHRITIS, STAMAT	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 11/0 SALES JRNL #	2/11 - SUP SUNNY 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK EN		
INVOICE# DA'	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171184 10/2 171185 10/2		VISITING NURSE SERVICE VISITING NURSE SERVICE	CHU, MOLLY CHUCK, ENA	40.00 31.25		583.20 455.64	I I	
			CUSTOMER	71.25	0.00	1,038.84		
			CATEGORY	71.25	0.00	1,038.84		

RUN DATE 11/02/1						-	56
SALES JRNL # 025	3 LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOM BILL WEEK ENDIN	•
			ALES REGISIER		1	DILL MEEK ENDIN	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171186 10/28/1	1 000008	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	57 G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171187 10/28/11	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 58
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		S	SALES REGISTED	R		BILL WEEK ENI	DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171188 10/28/11	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I
171189 10/28/11	800000	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I
171190 10/28/11	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I
171191 10/28/11	800000	VISITING NURSE SERVICE	COLON, ISABEL	24.00		349.92	I
			GHGMOMED.	101 00		1 470 50	
			CUSTOMER	101.00	0.00	1,472.58	
			CATEGORY	101.00	0.00	1,472.58	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
			2	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DATE	CODI NO	CODIONER WANE	KEI EKENCE	110010	IAM AITI	AMOONI III	DOKT HOD
171192	10/28/11	800000	VISITING NURSE SERVICE	CORDERO, NELLY	156.00		2,274.48 I	
				CATEGORY	156.00	0.00	2,274.48	

	- SUP SUNNYSIDE CITYWIDE			11101	1 - 60
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			HOMEW/O WALLS (LT
	S	SALES REGISTER		BILL WEEK E	NDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TA	X AMT AMOUNT	TYP SURPLUS
171193 10/28/11	000008 VISITING NURSE SERVICE	CORREA, MARGARI	30.00	437.40	I
		CATEGORY	30.00	0.00 437.40	

RUN DATE 1	.1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	61
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
171194 1	.0/28/11	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171195 10/28/11	000008 V	/ISITING NURSE SERVICE	COSTA, ARSENE	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	63
SALES JRN	ъ # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			5	SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171196	10/28/11	800000	VISITING NURSE SERVICE	COVALIU, SAVETA	15.50		226.00	I	
				CATEGORY	15.50	0.00	226.00		

RUN DATE 11/02/11 -						PAGE 1 - 64	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	/11
		:	SALES REGISTER			BILL WEEK ENDING 11/04	/ 11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
171197 10/14/11	000008	VISITING NURSE SERVICE	COVALIU, SIMION	4.00		58.32 I	
171198 10/28/11	800000	VISITING NURSE SERVICE	COVALIU, SIMION	19.75		287.96 I	
			CUSTOMER	23.75	0.00	346.28	
			CATEGORY	23.75	0.00	346.28	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 6	55	
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE A	-		
			\$	SALES R	EGISTER	<u>!</u>		BILL WEEK ENI	DING	11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFI	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
171199	10/28/11	800000	VISITING NURSE SERVICE	COX,	PETRA	19.00		277.02	I		
					 CATEGORY	19.00	0.00	277.02			

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	66 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171200 10/28/11	800000	VISITING NURSE SERVICE	CRUMPTON, LUCIL	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

			YSIDE CITYWIDE	556 377 377			PAGE 1 -	67
SALES JRNI	L # 0253	LOC 001		REGNY NY SALES REGISTER			LAD NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
171201	10/28/11	000008	VISITING NURSE SERVICE	CRUZ, HECTOR	38.50		561.33 I	
				CATEGORY	38.50	0.00	561.33	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 68	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171202 10/28/11	800000	VISITING NURSE SERVICE	CRUZ, JUANA	19.75		287.96 I	
171203 10/28/11	800000	VISITING NURSE SERVICE	CURLEY, INGEBOR	28.50		415.53 I	
			CUSTOMER	48.25	0.00	703.49	
				40.05			
			CATEGORY	48.25	0.00	703.49	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 69
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK EN	DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171204 10/28/11	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	25.00		364.50	I
171205 10/28/11	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	56.00		816.48	I
			CUSTOMER	81.00	0.00	1,180.98	
			CATEGORY	81.00	0.00	1,180.98	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1		70	
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE I	HCSA		
			5	SALES REGISTER			BILL WEEK EN	DING	11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
171206	10/28/11	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	42.00		612.36	I		
				CATEGORY	42.00	0.00	612.36			

RUN DATE 11/02/11 - SALES JRNL # 0253		REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	71 G 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
171207 10/28/11	000008 VISITING NURSE SERVICE	DE LIEUW, LIGIA	6.00		87.48 I	
		CATEGORY	6.00	0.00	87.48	

RUN DATE 11/02/11 - SALES JRNL # 0253		REG NY NY SALES REGISTER		PAGE 1 - 72 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171208 10/28/11	000008 VISITING NURSE SERVICE	DEL CARPIO, FEL	40.00	583.20 I
		CATEGORY	40.00 0.00	583.20

	11/02/11 - NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		73
SALES UK	NL # 0233	LOC 001		SALES REGISTER			BILL WEEK END		11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171209 171210	10/21/11 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	DELACRUZ, MANUE DELACRUZ, MANUE	9.00 54.25		131.22 790.97	I I	
				CUSTOMER	63.25	0.00	922.19		
				CATEGORY	63.25	0.00	922.19		

RUN DATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- '	74
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW,	O WALLS (LT
		S	SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171211 10/28/11	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	32.00		466.56	I	
171212 10/28/11	800000	VISITING NURSE SERVICE	•	35.00		510.30	I	
			CUSTOMER	67.00	0.00	976.86		
			CATEGORY	67.00	0.00	976.86		

RUN DATE 11/02/11 -						PAGE 1 - 75	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 11	1/04/11
		•	SALES KEGISIEK			BILL WEEK ENDING 11	-/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
171010 10/00/11				22 22		405 40 -	
171213 10/28/11 171214 10/28/11	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		30.00 18.00		437.40 I 262.44 I	
1/1214 10/28/11	000008	VISITING NORSE SERVICE	DELPOZO, MIGUEL	10.00		202.44 1	
			CUSTOMER	48.00	0.00	699.84	
				40.00			
			CATEGORY	48.00	0.00	699.84	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 76 ADU ADULT BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171215 10/28/11	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	27.50		400.95 I	
			CATEGORY	27.50	0.00	400.95	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER		PAGE 1 - 77 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171216 10/28/11	000008 VISITING NURSE SERVICE	DELVALLE, JESUS	29.00	422.82 I
		CATEGORY	29.00 0.00	422.82

RUN DATE 11/02/1	1 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	78
SALES JRNL # 025	3 LOC 001		REG NY NY			VCP CHOICE LHCS	
		:	SALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171217 10/28/1	1 000008	VISITING NURSE SERVICE	DEZUMARAN, REBE	18.50		269.73 I	
			CATEGORY	18.50	0.00	269.73	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE	E CITYWIDE				PAGE 1 -	79
SALES JRNL # 0253	LOC 001 SUN	NNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		S A	ALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO CUST	TOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171218 10/28/11	000008 VIS	ITING NURSE SERVICE	DIAZ, HILDA	28.00		408.24 I	
			CATEGORY	28.00	0.00	408.24	

			YSIDE CITYWIDE					PAGE 1		80
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE		NY	. D		VCP CHOICE L		11/04/11
			•	SALES R	EGISTI	s R		BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171219	10/28/11	800000	VISITING NURSE SERVICE	DIAZ,	MARIA	35.00		510.30	I	
171220	10/28/11	800000	VISITING NURSE SERVICE	DIAZ,	OLGA	42.00		612.36	I	
					CUSTOMER	77.00	0.00	1,122.66		
					CATEGORY	 77.00	0.00	1,122.66		

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	81 G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171221 10/28/11	000008	VISITING NURSE SERVICE	DIAZ, ROSA	35.50		517.59 I	
			CATEGORY	35.50	0.00	517.59	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE	1 - 82
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE	
		SALES REGISTER		BILL WEEK E	NDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	TRUOMA TMA	TYP SURPLUS
171222 10/28/11	000008 VISITING NURSE SERV	CE DILLUVIO, MATTI	61.00	1,049.76	I
171223 10/28/11	000008 VISITING NURSE SERV	CE DOMINGUEZ, MARI	36.00	524.88	I
		CUSTOMER	97.00	0.00 1,574.64	
		CATEGORY	97.00	0.00 1,574.64	

RUN DATE 11/02/13	L - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 83	
SALES JRNL # 0253	B LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
		:	SALES REGISTER			BILL WEEK ENDING 11/04/1	1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
171004 10/00/11				45.00		605.06	
171224 10/28/13	000008	VISITING NURSE SERVICE	DOMINICK, GINA	47.00		685.26 I	
				47.00		605.06	_
			CATEGORY	47.00	0.00	685.26	

ı	RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	84
ı	SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				S	SALES REGISTER			BILL WEEK ENDING	11/04/11
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	171225 1	10/28/11	800000	VISITING NURSE SERVICE	DUGLUS, MAY RUT	42.00		612.36 I	
ı									
ı									
ı					CATEGORY	42.00	0.00	612.36	

				YSIDE CITYWIDE					85
	SALES JRN	L # 0253	LOC 001		REG NY NY			LTC NURSING HOMEW	
				•	SALES REGISTER			BILL WEEK ENDING	11/04/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	171226	10/28/11	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	34.00		495.72 I	
ı					CATEGORY	34.00	0.00	495.72	

RUN D	ATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	6
SALES	JRNL # 0253	LOC 001		REG NY NY			CCL CONGREGATE CAR	
			\$	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
17122	7 10/28/11	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDING	87 § 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171228 10/28/11	000008 VISITING NURSE SERVICE	EDELMAN, MILDRE	4.00		58.32 I	
		CATEGORY	4.00	0.00	58.32	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171229 10/28/11	000008 V	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

			YSIDE CITYWIDE				PAGE 1 - 89
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171230	10/28/11	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I
				CATEGORY	20.00	0.00	 291.60

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R		PAGE 1 - ADU ADULT BILL WEEK ENDIN	90 G 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TY	P SURPLUS
171231 10/28/11	000008 VISITING NURSE SERVICE	ESCANDON, KLEBE	49.00	714.42 I	
		CATEGORY	49.00 0.00	714.42	

RUN DATE 3			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	91
SALES URNI	⊔ # 0253	LOC 001		SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
_	10/28/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 16.00		174.96 I 233.28 I	
				CUSTOMER	28.00	0.00	408.24	
				CATEGORY	28.00	0.00	408.24	

RUN DATE 11/02/11 -						PAGE 1 - 92	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 11/0	04/11
						BILL WELK BINDING II,	, 1, 11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
171234 10/28/11 171235 10/28/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	FADEN, ROBIN FAY, JULIA	55.25 9.00		805.55 I 131.22 I	
			CUSTOMER	64.25	0.00	936.77	
			CATEGORY	64.25	0.00	936.77	

RUN DATE 11/	02/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1	_	93	
SALES JRNL #	0253 LOC 001		REG NY NY			VCP CHOICE L			
		\$	SALES REGISTER			BILL WEEK EN	DING	11/04/11	
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
171236 10/	28/11 000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI	20.00		291.60	I		
			CATEGORY	20.00	0.00	291.60			

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 94 CCL CONGREGATE CARE PROGREGATE WEEK ENDING 11/04/	
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
171237	10/28/11	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	95 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171238 10/28/11	800000	VISITING NURSE SERVICE	FERNANDEZ, MATI	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 11/02	2/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	_	96
SALES JRNL # 0	0253 LOC 001		REG NY NY			VCP CHOICE L		
		:	SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171239 10/28	8/11 000008	VISITING NURSE SERVICE	FERREIRO, JOSEP	6.00		87.48	I	
			CATEGORY	6.00	0.00	87.48	-	

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE# DATE	CUST NO CU	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171240 10/28/11	000008 VI	ISITING NURSE SERVICE	FIUMARA, ROSE	52.00		758.16 I	
			CATEGORY	52.00	0.00	758.16	

RUN DATE 11/0	2/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	98
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C.	ARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171241 10/2	8/11 000008	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 11/02/11 -		YSIDE CITYWIDE				PAGE 1 -	- 99
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
		S	SALES REGISTER			BILL WEEK ENDI	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
171242 10/28/11	000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	35.00		510.30	I
171243 10/28/11	000008	VISITING NURSE SERVICE	FONSECA, EUGENI	7.00		102.06	I
171244 10/28/11	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		510.30	I
171245 10/28/11	800000	VISITING NURSE SERVICE	FRAGALE, CONCET	6.00		87.48	I
			CUSTOMER	83.00	0.00	1,210.14	
			CATEGORY	83.00	0.00	1,210.14	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	100
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171246 10/28/11	800000	VISITING NURSE SERVICE	FRANKEL, LISA	9.00		131.22 I	
			CATEGORY	9.00	0.00	131.22	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L01
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	V/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
151045	10/00/11	00000			F.C. 0.0		016 40 7	
171247	10/28/11	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	
1				CALEGORY	50.00	0.00	010.48	

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWID	E		PAGE 1 -	102
SALES JRNL # 0253 LOC 001 SUNNYSIDE C	ITYWIDE REG NY NY		VCP CHOICE LHCS	SA
	SALES REGIST	E R	BILL WEEK ENDIN	IG 11/04/11
INVOICE# DATE CUST NO CUSTOMER NAM	E REFERENCE	HOURS TAX	AMT AMOUNT TY	P SURPLUS
171040 10/00/11 000000 1110101110 1110	OF GERMANE EDEDECK AME	24.75	260 07 7	
171248 10/28/11 000008 VISITING NUR	SE SERVICE FREDERICK, AME	L 24.75	360.87 I	-
	CATEGORY	24.75	0.00 360.87	
	CALEGORI	24.75	3.00	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	EW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
171249 10/28/11	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	46.00		670.68 I	
			CATEGORY	46.00	0.00	670.68	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	104
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171250	10/28/11	800000	VISITING NURSE SERVICE	FRIAS, BARBARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 11,	/02/11 - SUI	P SUNNYS	SIDE CITYWIDE				PAGE 1 -	105
SALES JRNL ‡	# 0253 LOC	C 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	ALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# I	DATE CUS	ST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171251 10/	/28/11 000	0008 V	VISITING NURSE SERVICE	FUNES, GEORGINA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	106
SALES URNL # U255	TOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171252 10/28/11 171253 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALLARDO, ZOILA GALLINA, VIRGIN	41.75 9.00		608.72 I 131.22 I	
			CUSTOMER	50.75	0.00	739.94	
			CATEGORY	50.75	0.00	739.94	

	/02/11 - SUP SUNN	YSIDE CITYWIDE					107
SALES JRNL ‡	‡ 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171254 10/	/28/11 000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	40.00		583.20 I	
171255 10/	/28/11 000008	VISITING NURSE SERVICE	GARAY, ANGELES	9.00		131.22 I	
			CUSTOMER	49.00	0.00	714.42	
			COBTONER	13.00	0.00	711.12	
			CATEGORY	49.00	0.00	714.42	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	108
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
171256 10/28/11	000008	VISITING NURSE SERVICE	GARCIA, ADRIANO	35.00		510.30	I
171257 10/28/11	800000	VISITING NURSE SERVICE	GARCIA, DORA	20.00		291.60	I
			CUSTOMER	55.00	0.00	801.90	
			CATEGORY	55.00	0.00	801.90	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 109 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171258 10/28/11	000008 VISITING NURSE SERVICE	GARCIA, JOSEFIN	55.00		801.90 I
		CATEGORY	55.00	0.00	801.90

RUN DATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 110
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
		2	SALES REGISTER	-		BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171259 10/28/11	000008	VISITING NURSE SERVICE	GARCIA, OLGA	30.75		448.34	I
171260 10/28/11	800000	VISITING NURSE SERVICE	GARY, MIKE	27.75		404.60	I
171261 10/21/11	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	8.00		116.64	I
171262 10/28/11	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	40.00		583.20	I
			CUSTOMER	106.50	0.00	1,552.78	
			CATEGORY	106.50	0.00	1,552.78	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	11
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171263	10/28/11	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	19.50		284.32 I	
				CATEGORY	19.50	0.00	284.32	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	112
SALES JRNL # 0253	LOC 001		REG NY NY			LTC NURSING HOME	
		S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171264 10/28/11	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	45.00		656.10 I	
			CATEGORY	45.00	0.00	656.10	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171265 10/28/11	800000	VISITING NURSE SERVICE	GLYPTIS, ARIADN	3.00		43.74 I	
			CATEGORY	3.00	0.00	43.74	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	.4
SALES JRN	rL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	
			:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171266	10/28/11	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	115
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			\$	SALES REGI	STER		BILL WEEK ENDIN	G 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171267	10/28/11	800000	VISITING NURSE SERVICE	GOMEZ, JOSE	EFINA 25.00		364.50 I	
				CATEG	GORY 25.00	0.00	364.50	

RUN DATE 11/0	2/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	116
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171268 10/2	8/11 000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I
			CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 -	==:
SALES J	RNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171269	10/28/11	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	31.25		455.63 I	
				CATEGORY	31.25	0.00	455.63	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 118
SALES JRNL # 0253		REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	S	SALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171270 10/28/11	000008 VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00	437.40 I
		CATEGORY	30.00 0.00	437.40

RUN DATE 11/02/11 - SALES JRNL # 0253		REGNY NY SALES REGISTER		PAGE 1 - 119 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171271 10/28/11	000008 VISITING NURSE SERVICE	GONZALEZ, JENNY	4.00	58.32 I
		CATEGORY	4.00 0.00	58.32

RUN DATE 11/02	2/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 120
SALES JRNL # (0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA
			SALES REGISTER			BILL WEEK ENI	DING 11/04/11
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171272 10/28	8/11 000008	VISITING NURSE SERVICE	GOYES, ELBA	18.00		262.44	I
171273 10/28	8/11 000008	VISITING NURSE SERVICE	GRAVER, EDNA	40.00		583.20	I
				F0 00	0.00	0.45 .64	
			CUSTOMER	58.00	0.00	845.64	
			CATEGORY	58.00	0.00	845.64	

١	RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	121
١	SALES JRN	ъ # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AID	S ADULT POPUL
١				:	SALES REGISTER			BILL WEEK ENDING	11/04/11
١									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١	1.710.74	10/00/11				25 22		510 00 -	
١	171274	10/28/11	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	35.00		510.30 I	
١									
١					CAMPICODY.	25 00	0.00		
ı					CATEGORY	35.00	0.00	510.30	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	122
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER	8		BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171275	10/28/11	800000	VISITING NURSE SERVICE	GROSS, BRENDA	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER			PAGE 1 - 123 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171276 10/28/11 0	000008 VISITING NURSE SERVICE	GUERRERO, SUSAN	9.00		131.22 I
		CATEGORY	9.00	0.00	131.22

I	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYW	IDE REG NY NY		PAGE VCP CHOI	1 - 1 ICE LHCSA	.24
		SALES REGISTER			EK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE			OUNT TYP	SURPLUS
171277 10/28/11	000008 VISITING NURSE S	ERVICE GUEVARA, ELENA	83.75	1,221	08 I	
		CATEGORY	83.75	0.00 1,221	1.08	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	125
		5	SALES REGISTER			BILL WEEK ENDING	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171278 10/28/11 171279 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUTIERREZ, ANGE HENRIQUEZ, MARI	40.00 56.00		583.20 I 816.48 I	
			CUSTOMER	96.00	0.00	1,399.68	
			CATEGORY	96.00	0.00	1,399.68	

RUN DATE 11/02/11		YSIDE CITYWIDE					- 126
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK EN	DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171280 10/28/11	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	29.75		433.76	I
171281 10/28/11	800000	VISITING NURSE SERVICE	HERRERA, HORACI	41.25		601.43	I
171282 10/28/11	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	40.00		583.20	I
				111 00	0.00	1 610 20	
			CUSTOMER	111.00	0.00	1,618.39	
			CATEGORY	111.00	0.00	1,618.39	

RUN DATE 11/02/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	127
SALES JRNL # 0253 LOC 001					VCP CHOICE LHCSA	
	SALES	S REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171283 10/28/11 000008	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
		CATEGORY	20.00	0.00		

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 LAD NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171284 10/28/11	000008	VISITING NURSE SERVICE	ICIANO, ALFREDO	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

ı	RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	129
ı	SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AID	S ADULT POPUL
ı					SALES REGISTER			BILL WEEK ENDING	11/04/11
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	101000					45.00		c=c 10 =	
ı	171285	10/28/11	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10 I	
ı									
ı					CATEGORY	45.00	0.00	656.10	
ı					CALEGORI	45.00	0.00	030.10	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.30
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171286 10/28/11	000008	VISITING NURSE SERVICE	INSERRA, CATHER	18.00		262.44 I	
171287 10/21/11	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	20.00		291.60 I	
171288 10/28/11	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	20.00		291.60 I	
			CUSTOMER	58.00	0.00	845.64	
			CATEGORY	58.00	0.00	845.64	

RUN DATE 11/02/11 - SALES JRNL # 0253		NYSIDE CITYWIDE	REGNY NY SALES REGISTER				- 131 HOMEW/O WALLS (LT DING 11/04/11
INVOICE# DATE	CUST NO CUSTO	OMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171289 10/28/11 171290 10/28/11		TING NURSE SERVICE TING NURSE SERVICE	JAGDE, MARIA JAKLITSCH, ELIZ	35.00 38.00		510.30 554.04	I I
			CUSTOMER	73.00	0.00	1,064.34	
			CATEGORY	73.00	0.00	1,064.34	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171291 10/28/11	800000	VISITING NURSE SERVICE	JARA, DELIA	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 11/02/11 - SALES JRNL # 0253		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	133
		S	A L E S R E G I S T E R			BILL WEEK ENDIN	IG 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	TP SURPLUS
171292 10/28/11	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 -	
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADU: BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171293	10/28/11	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11	/02/11 - 5	SUP SUNNY	SIDE CITYWIDE				PAGE 1 - 1	L35
SALES JRNL	# 0253 I	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE C	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171294 10	/28/11 0	80000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	25.50		371.79 I	
				CATEGORY	25.50	0.00	371.79	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	136
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171295	10/28/11	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE 11/	/02/11 - SUP	SUNNYSI	DE CITYWIDE					PAGE 1	- 13	7
SALES JRNL #	# 0253 LOC	001 ST	UNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	A L E S F	REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# I	DATE CUS	T NO CU	STOMER NAME	REF	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171296 10/	/28/11 000	008 VI	SITING NURSE SERVICE	JORF	RIN, HORTENS	27.25		397.31	I	
					CATEGORY	27.25	0.00	397.31		

RUN DATE 11/02/11			DEC NU NU			PAGE 1 - 13	38
SALES JRNL # 0253	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171297 10/28/11	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	14.00		204.12 I	
			CATEGORY	14.00	0.00	204.12	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 139	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT	
			5	SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171000	10/00/11	000000	WIGHTING MIDGE GERMAGE	KEGELED ELODEG	04.00		340 00 T	
171298	10/28/11	800000	VISITING NURSE SERVICE	KESTLER FLORES,	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END	110
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
171299 10/28/11 171300 10/28/11 171301 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KONSTANTINAKOS, KONTOMATIS, GEN KONTOMATIS, GEN	70.00 2.00 2.00		1,020.60 29.16 29.16	I I I
			CUSTOMER	74.00	0.00	1,078.92	
			CATEGORY	74.00	0.00	1,078.92	

RUN DATE 11/02/1						PAGE 1 -	= ==
SALES JRNL # 025	3 LOC 001		REG NY NY			VCP CHOICE LHCS	
			SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171302 10/28/1	.1 000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	
			CALEGORI	40.00	0.00	303.20	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	142 G 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
171303 10/28/11	800000	VISITING NURSE SERVICE	KOWLCZYK, GERTR	12.00		174.96 I	
			CATEGORY	12.00	0.00	174.96	

ı	RUN DATE 11/02/1	1 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 1	43
ı	SALES JRNL # 025	3 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	11/04/11
ı								
	INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı								
ı	171304 10/28/1	1 000008	VISITING NURSE SERVICE	LAFONTAINE, JOS	11.50		167.67 I	
ı				CATEGORY	11.50	0.00	167.67	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	144
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
	S	ALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171305 8/19/11	000008 VISITING NURSE SERVICE	LE, HO	4.00		58.32	I
171306 10/28/11	000008 VISITING NURSE SERVICE	LE, HO	19.75		287.96	I
		CUSTOMER	23.75	0.00	346.28	
		CATEGORY	23.75	0.00	346.28	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	145
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171307	10/28/11	000008	VISITING NURSE SERVICE	LEE, GOCK HAN	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 146 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171308 10/28/11 171309 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	20.00		291.60 I 291.60 I
		CUSTOMER	40.00	0.00	583.20
		CATEGORY	40.00	0.00	583.20

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	147
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHA	-
			2	SALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171310	10/28/11	800000	VISITING NURSE SERVICE	LEWANDROWSKI, C	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE 11/02/	11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 148	
SALES JRNL # 02	53 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 11	./04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
171311 10/28/	11 000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	56.00		816.48 I	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	117
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
171312 10/28/11	800000	VISITING NURSE SERVICE	LINARES, MYRIAM	15.50		225.99	I
			CATEGORY	15.50	0.00	225.99	

RUN DATE 1 SALES JRNI	11/02/11 - SUF L # 0253 LOC		UNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 VCP CHOICE LHO		
INVOICE#	DATE CUS	ST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS	
171313	10/28/11 000	0008 VIS	SITING NURSE SERVICE	LIRIANO, FRANCI	70.00		1,020.60	I	
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171314 10/28/11	000008	VISITING NURSE SERVICE	LIZZUL, GIUSEPP	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 152 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171315 10/28/11 171316 10/28/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	48.00 32.00		699.84 I 466.56 I
			CUSTOMER	80.00	0.00	1,166.40
			CATEGORY	80.00	0.00	1,166.40

RUN DATE 11/0 SALES JRNL #		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 153 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DA	re cust no	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171317 10/2	8/11 000008	VISITING NURSE SERVICE	LONDONO, AMIRA	70.00		1,020.60 I
			CATEGORY	70.00	0.00	1,020.60

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	l R		LTC NURSING H	- 154 OMEW/O WALLS (LT DING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171318 10/21/11 171319 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		6.00 30.00		87.48 437.40	I I
		CUSTOMER	36.00	0.00	524.88	
		- CATEGORY	36.00	0.00	524.88	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 155
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
		5	SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
171320 10/28/11	800000	VISITING NURSE SERVICE	LOOR, MAURA	10.50		153.10	I
171321 10/28/11	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	34.25		499.37	I
			CUSTOMER	44.75	0.00	652.47	
			COSTONER	44.75	0.00	032.47	
			CATEGORY	44.75	0.00	652.47	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 156 LTC NURSING HOMEW/O BILL WEEK ENDING 1	WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
171322 10/28/11	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	43.00		626.94 I	
			CATEGORY	43.00	0.00	626.94	

RUN DATE 11/0 SALES JRNL #	02/11 - SUP SUNN 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AD BILL WEEK ENDI	
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171323 10/2	28/11 000008	VISITING NURSE SERVICE	LOPEZ, RAFAEL	70.00		1,020.60	I
			CATEGORY	70.00	0.00	1,020.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 158 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171324 10/28/11	800000	VISITING NURSE SERVICE	LOPEZ, VIDA	56.00		816.48 I
			CATEGORY	56.00	0.00	816.48

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171325 10/28/11	800000	VISITING NURSE SERVICE	LORIA, DIANA	35.25		513.95 I	
			CATEGORY	35.25	0.00	513.95	

RUN DATE 11/02/11 - SALES JRNL # 0253	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 160 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171326 10/28/11 171327 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		19.75 25.00	287.96 I 364.50 I
		CUSTOMER	44.75 0.00	652.46
		CATEGORY	44.75 0.00	652.46

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE			PAGE 1 - 161
SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYW			ADU ADULT
	SALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	MT AMOUNT TYP SURPLUS
171328	ERVICE MACCHIA, CATHY	41.00	597.78 I
	CATEGORY	41.00 0.0	00 597.78
	0111200111	11.00	557.70

	11/02/11 - NL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171329	10/28/11	800000	VISITING NURSE SERVICE	MACK, BETTY	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 163	
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
			2	SALES REGISTER			BILL WEEK ENDING 11,	/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
171330 1	10/28/11	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	64
SALES JRI	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171331	10/28/11	800000	VISITING NURSE SERVICE	MAISSONET, DOMI	11.75		171.32 I	
				CATEGORY	11.75	0.00	171.32	

RUN DATE 11/0 SALES JRNL #	02/11 - SUP SUNN 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		65 11/04/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	28/11 000008 28/11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MANGAN, JOHN MANNINO, FRANCE	12.00 77.00		174.96 1,122.66	I I	
			CUSTOMER	89.00	0.00	1,297.62		
			CATEGORY	89.00	0.00	1,297.62		

RUN DATE 11/02/11 -						PAGE 1 -	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
171334 10/28/11	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	42.00		612.36	I
171335 10/07/11	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	3.00		43.74	I
171336 10/21/11	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	3.00		43.74	I
171337 10/28/11	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	21.00		306.18	I
			CUSTOMER	69.00	0.00	1,006.02	
			CATEGORY	69.00	0.00	1,006.02	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 167	
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE E	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 11/	04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
171338	10/28/11	000008	VISITING NURSE SERVICE	MARINO, ANN	18.75		273.38 I	
				CATEGORY	18.75	0.00	273.38	

	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 168
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA
		SALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171339 10/28/11	000008 VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00	364.50 I
		CATEGORY	25.00 0.00	364.50

RUN DATE 11	1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	169
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171340 10	0/28/11	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

	11/02/11 - NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 170 VCP CHOICE LHCSA
	1111 0233	100 001		SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171341 171342	10/28/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 15.00		218.70 I 218.70 I
				CUSTOMER	30.00	0.00	437.40
				CATEGORY	30.00	0.00	437.40

RUN DATE 11/02	/11 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	171
SALES JRNL # 0	253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
		:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171343 10/28	/11 000008	VISITING NURSE SERVICE	MARTINEZ, ELENA	69.50		1,013.31 I	
			CATEGORY	69.50	0.00	1,013.31	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END	- 172 ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171344 10/28/11 171345 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, JUNOT MARTINEZ, JUNOT	3.00 6.00		43.74 87.48	I
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 17 VCP CHOICE LHCSA BILL WEEK ENDING	73
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171346 10/28/11 171347 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARGA MARTINEZ, MARTA	30.00 31.75		437.40 I 462.92 I	
			CUSTOMER	61.75	0.00	900.32	
			CATEGORY	61.75	0.00	900.32	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 17 LTC NURSING HOMEW/ BILL WEEK ENDING	O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171348 10/28/11	800000	VISITING NURSE SERVICE	MARTINEZ, MARTI	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE				PAGE 1 - 17	5
SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYWID	E REG NY NY			VCP CHOICE LHCSA	
	SALES REGISTE	E R		BILL WEEK ENDING	11/04/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171349 10/28/11 000008 VISITING NURSE SER	VICE MARTINEZ, ROSA	84.00		1,224.72 I	
	-				
	CATEGORY	84.00	0.00	1,224.72	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 176 LTC NURSING HOMEW/C BILL WEEK ENDING	O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171350 10/28/11	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04 I	
			CATEGORY	38.00	0.00	 554.04	

· ·	2/11 - SUP SUNN 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT	- 177 DING 11/04/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	
171351 10/2	8/11 000008	VISITING NURSE SERVICE	MASI, RAFFAELE	8.00		116.64	I
			CATEGORY	8.00	0.00	116.64	

RUN DATE 1	.1/02/11 - SUP	SUNNYSIDE (CITYWIDE						PAGE 1	- 1	78
SALES JRNL	# 0253 LOC	001 SUNN	YSIDE CITY		REG NY	NY			VCP CHOICE L		
				S A	LES	REGISTE	R		BILL WEEK EN	DING	11/04/11
INVOICE#	DATE CUS	T NO CUSTO	MER NAME		R	EFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171352 1	.0/28/11 000	008 VISIT	ING NURSE	SERVICE	MA'	TOS, ROSA	18.00		262.44	I	
171353 1	.0/28/11 000	008 VISIT	ING NURSE	SERVICE	MA'	TTICH, OLGA	84.00		1,224.72	I	
						CUSTOMER	102.00	0.00	1,487.16		
						- CATEGORY	102.00	0.00	1,487.16		

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END	
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171354 10/28/11 171355 10/28/11 171356 10/28/11	000008 VI	ISITING NURSE SERVICE ISITING NURSE SERVICE ISITING NURSE SERVICE	MAZZONE, FRANCE MCBRAYER, SYLVI MCDONNELL, MART	63.00 168.00 2.00		918.54 2,449.44 29.16	I I
			CUSTOMER	233.00	0.00	3,397.14	
			CATEGORY	233.00	0.00	3,397.14	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R		PAGE 1 - 180 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171357 10/28/11	000008 VISITING NURSE SERVICE	MCGUIRE, HELEN	48.00	699.84 I
		CATEGORY	48.00 0.00	699.84

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	181
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171358	10/28/11	800000	VISITING NURSE SERVICE	MCPARTLAN, CATH	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 182 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171359 10/28/11 171360 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		19.75 23.50		287.96 I 342.63 I
			CUSTOMER	43.25	0.00	630.59
			CATEGORY	43.25	0.00	630.59

RUN DATE 11/02/11 -						PAGE 1 -	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171361 10/28/11	800000	VISITING NURSE SERVICE	MEJIA, ROSA	39.50		575.92 I	
			CATEGORY	39.50	0.00	575.92	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	84
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		\$	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171362 10/28/11	000008	VISITING NURSE SERVICE	MELILLO, GRACE	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	EW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
171363 10/28/11	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	20.50		298.90 I	
			CATEGORY	20.50	0.00	298.90	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITY	WIDE REGNY NY SALES REGISTI	E R		PAGE 1 - 186 ADU ADULT BILL WEEK ENDING 11/04/	/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	LUS
171364 10/28/11	000008 VISITING NURSE S	SERVICE MENDOLIA, ANTOI	9.00		131.22 I	
		- CATEGORY	9.00	0.00	131.22	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	87
SALES JRNL # 0253	LOC 001		REG NY NY			LTC NURSING HOMEW	,
		S	BALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171365 10/28/11	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	32.00		466.56 I	
			CATEGORY	32.00	0.00	466.56	

RUN DATE 11/02/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	.88
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171366 10/28/11	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				-	89
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			i	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171367	10/28/11	800000	VISITING NURSE SERVICE	MILEO, MARY	19.75		287.96 I	
				CATEGORY	19.75	0.00	287.96	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 190	
SALES JRN	rL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROG	
			5	SALES REGISTER			BILL WEEK ENDING 11/04/	11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	JUS
171368	10/28/11	800000	VISITING NURSE SERVICE	MOLINA, ANA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 1	1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	1
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171369 1	0/28/11	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	EW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171370 10/28/11	800000	VISITING NURSE SERVICE	MONTALVO, ANGEL	44.00		641.52 I	
			CATEGORY	44.00	0.00	641.52	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	93
SALES JR	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171371	10/28/11	000008	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40 I	
171372	10/28/11	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30 I	
				CUSTOMER	65.00	0.00	947.70	
				CATEGORY	65.00	0.00	947.70	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171373 10/14/11 171374 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 42.00		87.48 I 612.36 I	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 11/02/11 - SUP S SALES JRNL # 0253 LOC 0	001 SUNNYSIDE CITYWIDE REG I	NY NY S REGISTER		PAGE 1 - 195 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171375 10/28/11 00000	8 VISITING NURSE SERVICE	MORALES, GENERO	84.00	1,224.72 I
		CATEGORY	84.00 0.00	1,224.72

RUN DATE 11/02/11 -	- SUP SUNNY	YSIDE CITYWIDE					PAGE 1	- 196
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY N				VCP CHOICE L	
		S	SALES RE	GISTER			BILL WEEK EN	DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171376 10/28/11	000008	VISITING NURSE SERVICE	MOREL,	JUANA	12.00		174.96	I
171377 10/21/11	800000	VISITING NURSE SERVICE	NAGY,	GEORGE	6.00		87.48	I
171378 10/28/11	000008	VISITING NURSE SERVICE	NAGY,	GEORGE	29.25		426.47	I
				CUSTOMER	47.25	0.00	688.91	
				CATEGORY	47.25	0.00	688.91	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 197
SALES JR	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171379	10/28/11	000008	VISITING NURSE SERVICE	NAGY, GEORGE	11.00		160.38	I
171380	10/28/11	800000	VISITING NURSE SERVICE	NARANJO, HENRY	42.00		612.36	I
				CUSTOMER	53.00	0.00	772.74	
				CATEGORY	53.00	0.00	772.74	

			YSIDE CITYWIDE				PAGE 1 - 198	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARI	
			2	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171381	10/28/11	000008	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171382 10/28/11	800000	VISITING NURSE SERVICE	NELLINI, MARY	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 200
SALES JRNL # 0253		REG NY NY		LTC NURSING HOMEW/O WALLS (LT
	:	SALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
171383 10/28/11	000008 VISITING NURSE SERVICE	NIDO, MICHAEL	49.00	714.42 I
		CATEGORY	49.00 0.	 00 714.42

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	201
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE (CARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
171384	10/28/11	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	62.00		903.96 I	
				CATEGORY	62.00	0.00	903.96	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	202
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171385	10/28/11	800000	VISITING NURSE SERVICE	NIEVES, NANCY	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	203
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171386	10/28/11	800000	VISITING NURSE SERVICE	NIGRO, CATHERIN	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	204
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171387	10/28/11	800000	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60 I	
				CATEGORY	20.00	0.00		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		LTC NURSING F	- 205 HOMEW/O WALLS (LT DING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171388 10/28/11 171389 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	25.00 34.00		364.50 495.72	I I
		CUSTOMER	59.00	0.00	860.22	
		CATEGORY	59.00	0.00	860.22	

	11/02/11 NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWI	IDE REG NY	NY			PAGE 1 VCP CHOICE L		06
				SALES	REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	F	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171390	10/28/11	800000	VISITING NURSE SE	ERVICE NU	JZIALE, CONCET	49.00		714.42	I	
171391	10/28/11	800000	VISITING NURSE SE	ERVICE OC	CHOA, LUIS	39.00		568.62	I	
171392	10/28/11	800000	VISITING NURSE SE	ERVICE OF	RTEGA, CARLOS	36.00		524.88	I	
171393	10/21/11	800000	VISITING NURSE SE	ERVICE OF	RTIZ, LILIA	6.00		87.48	I	
171394	10/28/11	800000	VISITING NURSE SE	ERVICE OF	RTIZ, LILIA	35.75		521.24	I	
171395	10/28/11	800000	VISITING NURSE SE	ERVICE OS	SPINA, ANA	8.00		116.64	I	
171396	10/28/11	000008	VISITING NURSE SE	ERVICE PA	ANASKAROLIDIS,	25.00		364.50	I	
					CUSTOMER	198.75	0.00	2,897.78		
					CATEGORY	198.75	0.00	2,897.78		

	11/02/11 - IL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY S A L E S R E G I S T E R			PAGE 1 - HOA HOSPICE AD BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171397	10/28/11	000008	VISITING NURSE SERVICE	PANAYIDES, APHR	15.00		218.70	I
				CATEGORY	15.00	0.00	218.70	

· ·			SIDE CITYWIDE						- 20	08	
SALES JRNL ‡	# 0253 I	LOC 001	SUNNYSIDE CITYWII	DE REGNY SALES R	NY			ADU ADULT	TMO	11/04/11	
				SALES R	EGISIEF	Χ.		BILL WEEK ENI	JING	11/04/11	
INVOICE# I	DATE C	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
171398 10	/28/11 0	80000	VISITING NURSE SEF	RVICE PAPA,	FRANCES	6.00		87.48	I		
					CATEGORY	6.00	0.00	87.48			

RUN DATE 11/02 SALES JRNL # 0			REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DAT	CE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171399 10/28 171400 10/28 171401 10/28	3/11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PAPADOPOULOS, M PAPAZIAN, MANNI PAPP, TEREZIA	12.00 50.00 3.00		174.96 729.00 43.74	I I
			CUSTOMER	65.00	0.00	947.70	
			CATEGORY	65.00	0.00	947.70	

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE			PAGE 1 - 210	
SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYW			ADU ADULT	
	SALES REGISTEI	₹	BILL WEEK ENDING 11/04/11	
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	T AMOUNT TYP SURPLUS	
171400 10/00/11 000000 WIGHTING WIDGE (EDITOR DADERET MARTE	F.C. 0.0	016 40 T	
171402 10/28/11 000008 VISITING NURSE S	ERVICE PARETTI, MARIE	56.00	816.48 I	
	CATEGORY	56.00 0.0	0 816.48	
	CAILGORI	36.00	0 010.40	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 211
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171403 10/28/11	800000	VISITING NURSE SERVICE	PARK, SUNG	20.00		291.60 I
			CATEGORY	20.00	0.00	291.60

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 212 ADU ADULT
		2	SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171404 10/28/11 171405 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	20.00 23.75		291.60 I 346.28 I
			CUSTOMER	43.75	0.00	637.88
			CATEGORY	43.75	0.00	637.88

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 213	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 11/04/13	1
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
171406	10/28/11	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	34.75		506.66 I	
				CATEGORY	34.75	0.00	506.66	_

RUN DATE 11/	/02/11 - SU	JP SUNNYS	SIDE CITYWIDE				PAGE 1	- 21	4
SALES JRNL #	# 0253 LC	C 001		REG NY NY			LTC NURSING H		•
			S A	LES REGISTER			BILL WEEK END	OING :	11/04/11
INVOICE# I	DATE CU	JST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171407 10/	/28/11 00	V 80000	JISITING NURSE SERVICE	PEREZ, DOMINGA	42.00		612.36	I	
				CATEGORY	42.00	0.00	612.36		

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 215
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
		i	SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171408 10/28/11	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	43.25		630.59	I
171409 10/28/11	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	48.00		699.84	I
			CUSTOMER	91.25	0.00	1,330.43	
			CODICIENT	71.25	0.00	1,330.13	
			CATEGORY	91.25	0.00	1,330.43	

RUN DA	ATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 216	
SALES	JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 1	1/04/11
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171410	0 10/28/11	000008	VISITING NURSE SERVICE	PIERREPONT, ELV	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI	HCSA	7
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171411 10/28/11 171412 10/28/11 171413 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PLACIDO, MERCED	24.50 30.00 29.50		357.21 437.40 430.12	I I I	
			CUSTOMER	84.00	0.00	1,224.73		
			CATEGORY	84.00	0.00	1,224.73		

RUN DATE 11/02/11 -	- SUP SUN	YSIDE CITYWIDE				PAGE 1 - 2	218
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171414 10/28/11	000008	VISITING NURSE SERVICE	PONCE, ALICIA	39.00		568.62 I	
			CATEGORY	39.00	0.00	 568.62	

		11/02/11 - L # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDI	217
II	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
17	71415	8/26/11	800000	VISITING NURSE SERVICE	PRIETO, MARLENE	3.00		43.74	I
					CATEGORY	3.00	0.00	43.74	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
171416 10/28/11 171417 10/21/11 171418 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PUISELLO, CIRA PULLIZA, DIANNE PULLIZA, DIANNE	27.75 6.00 42.00		404.60 87.48 612.36	I I
			CUSTOMER	75.75	0.00	1,104.44	
			CATEGORY	75.75	0.00	1,104.44	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	221
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	
		S	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
151410 10/00/11	00000		0111111111 W.D.T.	40.05		C1C 01 T	
171419 10/28/11	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	42.25		616.01 I	
			CATEGORY	42.25	0.00	616.01	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	222
SALES JRN	ъ # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171420	10/28/11	800000	VISITING NURSE SERVICE	RAINEY, JOHNNIE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 11	/02/11 - S	UP SUNNY	SIDE CITYWIDE				PAGE 1 - 223	
SALES JRNL	# 0253 L	OC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES	
			S	SALES REGISTER			BILL WEEK ENDING 1	1/04/11
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIE C	051 NO	COSTONER NAME	KEFEKENCE	1100105	IAA AMI	AMOUNT TIP	DORFIOS
171421 10	/28/11 0	80000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE 11/02/11 - SALES JRNL # 0253		UNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 224 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171422 10/28/11 171423 10/28/11		SITING NURSE SERVICE SITING NURSE SERVICE	,	41.00 25.00		597.78 I 364.50 I
			CUSTOMER	66.00	0.00	962.28
			CATEGORY	66.00	0.00	962.28

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - :	225
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		VCP CHOICE LHCSA	
		SALES REGISTER		BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP	SURPLUS
171424 10/28/11	000008 VISITING NURSE SERVICE	RAMOS, IRIS	10.00	145.80 I	
		CATEGORY	10.00 0.	00 145.80	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 AUR ADULT REH	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
171425 10/21/11 171426 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMOS, JENNIFER RAMOS, JENNIFER	8.00 42.50		116.64 619.65	I
			CUSTOMER	50.50	0.00	736.29	
			CATEGORY	50.50	0.00	736.29	

			YSIDE CITYWIDE				PAGE 1 - 227	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 11/0	14/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
171427	10/28/11	800000	VISITING NURSE SERVICE	RAMOS, JORGE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE				PAGE 1 - 2	28
SALES JRNL # 0253 LOC 001 SUNNYSIDE CITY	-	1 D		VCP CHOICE LHCSA	11/04/11
	SALES REGISTE	i R		BILL WEEK ENDING	11/04/11
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171428 10/28/11 000008 VISITING NURSE	SERVICE RAMPHAL, INDRIA	12.00		174.96 I	
171429 10/28/11 000008 VISITING NURSE	SERVICE RANDAZZO, ROSAL	16.00		233.28 I	
	- CUSTOMER	28.00	0.00	408.24	
	- CATEGORY	28.00	0.00	408.24	

RUN DATE 11/02/11 - SUP S' SALES JRNL # 0253 LOC 0	001 SUNNYSIDE CITYWIDE REG I			PAGE ADU ADULT	
INVOICE# DATE CUST	SALE:	S REGISTER REFERENCE	HOURS TAX	BILL WEEK X AMT AMOU	ENDING 11/04/11 NT TYP SURPLUS
171430 10/28/11 00000		REINA, JOSE	19.75	287.	
		CATEGORY	19.75	0.00 287.	96

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 230	
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
	5	SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171431 10/28/11	000008 VISITING NURSE SERVICE	RIVADENEIRA, OL	12.00		174.96 I	
		CATEGORY	12.00	0.00	174.96	

ı	RUN DATE 11	1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	231
ı	SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	· ·
ı				i	SALES REGISTER			BILL WEEK ENDING	11/04/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	INVOICE#	DAIE	COSI NO	COSTOMER NAME	REFERENCE	HOURS	IAX AMI	AMOUNT TIP	SURPLUS
	171432 10	0/28/11	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
					CATEGORY	56.00	0.00		

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	32 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171433 10/28/11 171434 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, CARMEN RIVERA, ERNESTO	15.00 20.00		218.70 I 291.60 I	
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	EW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
171435 10/28/11	000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 23 ADU ADULT	34
STEED STATE II SESS	200 001		A L E S R E G I S T E R			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171436 10/28/11	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	28.00		408.24 I	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 235 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171437 10/28/11 171438 10/28/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVERA, WANDA ROBERTS, SARAH	34.50 8.00		503.01 I 116.64 I
			CUSTOMER	42.50	0.00	619.65
			CATEGORY	42.50	0.00	619.65

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA	236
INVOICE# DATE	CUST NO		REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	SURPLUS
171439 10/28/11	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	49.00		714.42 I	
			CATEGORY	49.00	0.00	714.42	

RUN DATE 11/02/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 237	
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALL	S (LT
		Š	SALES REGISTER			BILL WEEK ENDING 11/04/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	JUS
171440 10/28/11	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	44.00		641.52 I	
			CATEGORY	44.00	0.00	641.52	

ı	RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	238
ı	SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA.
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	171441	10/28/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	13.50		196.83 I	•
ı									
ı					CATEGORY	13.50	0.00	196.83	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 239	
SALES JRN	ъ # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				SALES REGISTER			BILL WEEK ENDING 11	./04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
171442	10/28/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	240
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		S	ALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171443 10/28/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I	
			CATEGORY	25.00	0.00	364.50	

RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	241
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			S	SALES REGIS	STER		BILL WEEK ENDIN	NG 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171444 1	10/28/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, F	PORF 42.00		612.36	Γ
				CATEGO	DRY 42.00	0.00	612.36	

RUN DATE 11/02/11 - SALES JRNL # 0253	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 242 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	'AX AMT	AMOUNT TYP SURPLUS
171445 10/28/11 171446 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· ~	43.25 40.00		630.59 I 583.20 I
		CUSTOMER	83.25	0.00	1,213.79
		CATEGORY	83.25	0.00	1,213.79

	11/02/11 NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			S	SALES REGISTER			BILL WEEK ENDII	NG 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171447 171448	10/21/11 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 56.00		116.64 816.48	I I
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

RUN DATE 11/02/11 -			DDG NV NV			PAGE 1 - 244
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171449 10/28/11	800000	VISITING NURSE SERVICE	ROMO, FLOR	56.00		816.48 I
			CATEGORY	56.00	0.00	816.48

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 245
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171450	10/28/11	800000	VISITING NURSE SERVICE	E ROSA, LUZ E	55.50		809.20 I
				CATEGORY	55.50	0.00	809.20

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171451 10/28/11 171452 10/28/11 171453 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSARIO, ELSA	16.00 35.00 27.75		233.28 510.30 404.60	I I
			CUSTOMER	78.75	0.00	1,148.18	
			CATEGORY	78.75	0.00	1,148.18	

RUN DATE 11/02/11 - SUP SU SALES JRNL # 0253 LOC 00	1 SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER		PAGE 1 - 247 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE CUST N	IO CUSTOMER NAME	REFERENCE	HOURS TAX AM	IT AMOUNT TYP SURPLUS
171454 10/28/11 000008	8 VISITING NURSE SERVICE	ROSEN, BESSIE	15.00	218.70 I
		CATEGORY	15.00 0.0	0 218.70

	11/02/11 - NL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S	STER		HOA HOSPICE	- 248 ADULT DING 11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
171455	10/28/11	800000	VISITING NURSE SERVICE	RUBERTO, MAI	RY 15.00		218.70	I	
				CATEG	ORY 15.00	0.00	218.70		

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 249 ADU ADULT BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171456 10/28/11	800000	VISITING NURSE SERVICE	RUBIN, EVGENY	8.00		116.64 I	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 11/02/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 - 250	
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171457 10/28/11	000008 VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
		CATEGORY	47.00	0.00	685.26	

RUN DATE 1	1/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	251
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171458 1	0/28/11	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	29.75		433.76	I
				CATEGORY	29.75	0.00	433.76	

RUN DATE 11/02/11 - SALES JRNL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 252 ADU ADULT	
			SALES REGISTER			BILL WEEK ENDING	, - ,
INVOICE# DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171459 10/28/11	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60 I	
			CATEGORY	70.00	0.00	1,020.60	

	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 253
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
	'	SALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171460 10/28/11	000008 VISITING NURSE SERVICE	SAAVEDRA, STELL	37.50	546.75 I
		CATEGORY	37.50 0.00	 546.75

RUN DATE 11/02/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 254
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171461 10/28/11	000008	VISITING NURSE SERVICE	SAKELL, CHRYSAN	42.00		612.36 I
			CATEGORY	42.00	0.00	612.36

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 255 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/1	.1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	IS
171462 10/28/11 171463 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 38.25		116.64 I 557.69 I	
			CUSTOMER	46.25	0.00	674.33	_
			CATEGORY	46.25	0.00	674.33	-

RUN DATE 11/02/11						PAGE 1 -	256
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	•
			SALES REGISTER			BILL WEEK ENDIN	IG 11/04/11
	GTTGT 170	GUGEOVED MANE	D===D=114=	******		3.40TPT	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171464 10/00/11	00000	TITATETHA NUMBER CONTINUE		00 75		221 70 7	_
171464 10/28/11	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	22.75		331.70	-
			CAMPRODIA	22 75		221 70	
			CATEGORY	22.75	0.00	331.70	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
171465 10/28/11 171466 10/28/11 171467 10/28/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SAMPOGNA, LUCY	16.00 15.75 48.00		233.28 229.64 699.84	I I
			CUSTOMER	79.75	0.00	1,162.76	
			CATEGORY	79.75	0.00	1,162.76	

RUN DATE 11/02/1	1 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 258	
SALES JRNL # 025	3 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
		:	SALES REGISTER			BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171468 10/28/1	1 000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	36.00		524.88 I	
			CATEGORY	36.00	0.00	524.88	

	11/02/11 · NL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY RALES REGI	ISTER		VCP CHOICE L	- 259 HCSA DING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	E HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171469	10/28/11	800000	VISITING NURSE SERVICE	SANCHEZ, N	NILSA 19.75		287.96	I
				CATE	EGORY 19.75	0.00	287.96	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20	50
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171470 10/21/11	800000	VISITING NURSE SERVICE	SANFRATELLO, AN	6.00		87.48 I	
171471 10/28/11	800000	VISITING NURSE SERVICE	SANFRATELLO, AN	3.00		43.74 I	
171472 10/28/11	800000	VISITING NURSE SERVICE	SCHRAFT, FREDER	8.00		116.64 I	
			CUSTOMER	17.00	0.00	247.86	
			CATEGORY	17.00	0.00	247.86	

RUN DATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 261
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171473 10/28/11	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	20.00		291.60 I
171474 10/28/11	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	24.00		349.92 I
			CUSTOMER	44.00	0.00	641.52
			CATEGORY	44.00	0.00	641.52

RUN DATE 11/02/11 -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 262 LTC NURSING HOMEW/O WALLS (LT
BINDED GIAVE II 0233	100 001		SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171475 10/28/11	800000	VISITING NURSE SERVICE	SEO, INJA	36.00		524.88 I
			CATEGORY	36.00	0.00	524.88

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK END		11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171476 10/28/11 171477 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SERAFIN, WALTER SERRANO, AGUEDA	47.25 56.00		688.92 816.48	I I	
			CUSTOMER	103.25	0.00	1,505.40		
			CATEGORY	103.25	0.00	1,505.40		

RUN DATE 11/02/11 - SALES JRNL # 0253	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	264
, and the second		S	ALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171478 10/28/11 171479 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SETHI, SURESH SEXTON, MARY	6.00 6.00		87.48 I 87.48 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 11,	/02/11 - 5	SUP SUNNY	SIDE CITYWIDE				PAGE 1 -	265
SALES JRNL :	# 0253 I	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
			S	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE# I	DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171480 10,	/28/11 (800000	VISITING NURSE SERVICE	SHANNON, ELNORA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 11	/02/11 - 3	SUP SUNNY	SIDE CITYWIDE				PAGE 1 - 2	66
SALES JRNL	# 0253 I	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE (CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171481 10	/28/11 (800000	VISITING NURSE SERVICE	SILLS, JAMES	41.75		608.72 I	
					41 85			
				CATEGORY	41.75	0.00	608.72	

RUN DATE 11/0 SALES JRNL #			REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LI BILL WEEK ENI		11/04/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171482 10/2 171483 10/2		VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, JAMOONIE	30.00 15.00		437.40 218.70	I	
			CUSTOMER	45.00	0.00	656.10		
			CATEGORY	45.00	0.00	656.10		

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 268 ADU ADULT
			SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171484 10/28/11 171485 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SLEVIN, JAMES SMELTZER, ESTEL	3.00 12.00		43.74 I 174.96 I
			CUSTOMER	15.00	0.00	218.70
			CATEGORY	15.00	0.00	218.70

			YSIDE CITYWIDE				PAGE 1 -	
SALES	JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	G 11/04/11
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171486	5 10/28/11	800000	VISITING NURSE SERVICE	SOLANO, SANTA	29.75		433.76 I	
				CATEGORY	29.75	0.00	433.76	

RUN DATE 11/02/3	L1 - SUP SUNI	NYSIDE CITYWIDE				PAGE 1 - :	270
SALES JRNL # 025	53 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171487 10/28/3	L1 000008	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90 I	
			CATEGORY	5.00	0.00	72.90	

1:	RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	71
Н	SALES JRN	rL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	11/04/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	171488	10/28/11	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

RUN DATE 11/02/11 -	SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	272
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171489 10/28/11	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 273 VCP CHOICE LHCSA BILL WEEK ENDING 1	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171490 10/28/11	000008 VISITING NURSE SERVIC	E STAMBOULIDIS, V	54.75		798.26 I	
		CATEGORY	54.75	0.00	798.26	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171491	10/28/11	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18	
				CATEGORY	21.00	0.00	306.18	

RUN DATE 11/02/11 -	- SUP SUNN LOC 001		DEC NV NV			PAGE 1 - 2	75
SALES JRNL # 0253	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171492 10/14/11	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	4.00		58.32 I	
171493 10/28/11	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	8.00		116.64 I	
			OHOMED	12.00	0.00	174.06	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 276 VCP CHOICE LHCSA
SALES URNL # U253	TOC 001		SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171494 10/28/11 171495 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STICKELL, BLANC STROBL, ALFRED	14.75 36.00		215.06 I 524.88 I
			CUSTOMER	50.75	0.00	739.94
			CATEGORY	50.75	0.00	739.94

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER				- 277 IOMEW/O WALLS (LT DING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171496 10/28/11	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	45.75		667.04	I
			CATEGORY	45.75	0.00	667.04	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 278 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171497 10/28/11	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	55.75		812.84 I
			CATEGORY	55.75	0.00	812.84

RUN DATE 11	L/02/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 279
SALES JRNL	# 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		S	ALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171498 10	0/28/11 000008	VISITING NURSE SERVICE	TACITO, CONSTAN	15.00		218.70 I
			CATEGORY	15.00	0.00	218.70

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEF	2		LTC NURSING	- 280 HOMEW/O WALLS (LT DING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171499 10/21/11 171500 10/28/11	000008 VISITING NURSE SERV VISITING NURSE SERV		2.50 55.50		36.45 809.19	I I
		CUSTOMER	58.00	0.00	845.64	
		CATEGORY	58.00	0.00	845.64	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171501 10/28/11	800000	VISITING NURSE SERVICE	TAMBURELLO, PAL	3.00		43.74	I
			CATEGORY	3.00	0.00	43.74	

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	32
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171502	10/28/11	000008	VISITING NURSE SERVICE	TAVANO, SILVIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 1	1/02/11 - ST	UP SUNNY	SIDE CITYWIDE				PAGE 1 -	283
SALES JRNL	# 0253 LO	OC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171500 1	0 / 0 0 / 1 1 0 /	00000	VITATETNA NUDAE ARRVITAR	MALIEDAG ADTAG	20.00		201 60 +	
171503 1	0/28/11 00	80000	VISITING NURSE SERVICE	TAVERAS ARIAS,	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/1 SALES JRNL # 02!		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 284 HOA HOSPICE ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171504 10/28/	000008	VISITING NURSE SERVICE	TEMBELIS, DAPHN	12.00		174.96 I
			CATEGORY	12.00	0.00	 174.96

RUN DATE 1 SALES JRNL	1/02/11 - SUP SUNN # 0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
		S	ALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	0/28/11 000008 0/28/11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TERZIAN, ASDGHI TINOCO, INES	31.00 39.00		451.98 568.62	I I	
			CUSTOMER	70.00	0.00	1,020.60		
			CATEGORY	70.00	0.00	1,020.60		

	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 286
SALES JRNL # 0253	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT
	S	ALES REGISTER		BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171507 10/28/11	000008 VISITING NURSE SERVICE	TORO VEGA, LUZV	19.75	287.96 I
		CATEGORY	19.75 0.00	287.96

RUN DATE 11/02/11 SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - VCP CHOICE LHO BILL WEEK END	CSA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
171508 10/28/11 171509 10/28/11 171510 10/28/11	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TORO, PURA TORRES, EMELINA TORRES, LUZ M	83.25 20.00 69.75		1,213.79 291.60 1,016.96	I I I
			CUSTOMER	173.00	0.00	2,522.35	
			- CATEGORY	173.00	0.00	2,522.35	

RUN DATE 11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	288
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
171511 10/28/11	800000	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		612.36 I	
			CATEGORY	42.00	0.00	612.36	

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
171512 10/28/11 171513 10/28/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TRUJILLO, AMPAR TSOLISOS, FOTIN	16.00 55.75		233.28 812.84	I I
			CUSTOMER	71.75	0.00	1,046.12	
			CATEGORY	71.75	0.00	1,046.12	

RUN DATE 11/0	2/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - :	290
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		i	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DA'	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171514 10/2	8/11 000008	VISITING NURSE SERVICE	TSUAI, PING	24.00		349.92 I	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 11/02/11 - SUP SALES JRNL # 0253 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171515 10/28/11 0000	008 VISITING NURSE SERVICE	TURNER, VERONIC	3.00		43.74	I
		CATEGORY	3.00	0.00	43.74	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	92
SALES JRNL # 0253	LOC 001		REG NY NY			VCP CHOICE L		
		\$	SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171516 10/28/11	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	56.00		816.48	I	
171517 10/28/11	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	69.75		1,016.96	I	
			CUSTOMER	125.75	0.00	1,833.44		
			CODIONER	123.73	0.00	1,033.11		
			CATEGORY	125.75	0.00	1,833.44		

RUN DATE 11/02/1	.1 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 29	93
SALES JRNL # 025	3 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
		5	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171518 10/28/1	1 000008	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 1	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	294
SALES JRNI	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			5	SALES REGISTER			BILL WEEK ENDING	3 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
171519 1	10/28/11	800000	VISITING NURSE SERVICE	VALENCIANO-ROJ,	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

ı	RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	95
ı	SALES JRNI	և # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	11/04/11
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	171520	10/28/11	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I	
					CATEGORY	8.00	0.00	 116.64	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	R		PAGE 1 - 296 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
171521 10/28/11 171522 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		6.00 6.00		87.48 I 87.48 I
		CUSTOMER	12.00	0.00	174.96
		CATEGORY	12.00	0.00	 174.96

	11/02/11 - IL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
171523	10/28/11	000008	VISITING NURSE SERVICE	VASQUEZ, ARTURO	48.75		710.78	I
				CATEGORY	48.75	0.00	710.78	

RUN DATE 11/02/11 -						PAGE 1 -	2,0
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
		2	SALES REGISTER			BILL WEEK END	ING 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
171524 9/16/11	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	0.75		10.94	I
171525 10/28/11	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	32.75		477.50	I
171526 9/16/11	000008	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	3.00		43.74	I
171527 10/28/11	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	21.00		306.18	I
			CUSTOMER	57.50	0.00	838.36	
			CATEGORY	 57.50	0.00	 838.36	

RUN DATE 1	1/02/11 -	SUP SUNNY	YSIDE CITYWIDE					PAGE 1	- 2	99	
SALES JRNL	# 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY N				VCP CHOICE I			
			S	SALES RE	GISTER			BILL WEEK EN	DING	11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
171528 10	0/28/11	800000	VISITING NURSE SERVICE	VAZIRA	NI, CHAND	20.00		291.60	I		
					CATEGORY	20.00	0.00	291.60			

RUN DATE 11/02/11							300
SALES JRNL # 0253	LOC 001		REG NY NY SALES REGISTER			LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
171529 10/28/11	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20 I	
			CATEGORY	40.00	0.00	583.20	

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	301
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			:	SALES REGIS	TER		BILL WEEK ENDIN	G 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171530	10/28/11	800000	VISITING NURSE SERVICE	VELASQUEZ, NE	LL 17.50		255.15 I	
				CATEGOR	Y 17.50	0.00	255.15	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
171531 10/21/11 171532 10/28/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		7.00 21.00		102.06 306.18	I I
		CUSTOMER	28.00	0.00	408.24	
		CATEGORY	28.00	0.00	408.24	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171533 10/07/11 171534 10/14/11 171535 10/21/11 171536 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VERAS, JUANA VERAS, JUANA VERAS, JUANA VERAS, JUANA	8.00 8.00 8.00 32.00		116.64 I 116.64 I 116.64 I 466.56 I	
			CUSTOMER	56.00	0.00	816.48	
			CATEGORY	56.00	0.00		

RUN DATE 11/02	/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 304	
SALES JRNL # 0	253 LOC 001		REG NY NY			HOA HOSPICE ADULT	
		\$	SALES REGISTER			BILL WEEK ENDING 11/0	04/11
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
171537 10/28	/11 000008	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 305 ADU ADULT BILL WEEK ENDING 11	1/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
171538 10/28/11	800000	VISITING NURSE SERVICE	VILLADA, MARIA	4.00		58.32 I	
			CATEGORY	4.00	0.00	58.32	

RUN DATE 11/02/11 - SALES JRNL # 0253		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 306 VCP CHOICE LHCSA BILL WEEK ENDING 11/04/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171539 10/28/11	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 11/02/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	307
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		S	SALES REGISTER			BILL WEEK ENDING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171540 10/28/11	800000	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40 I	
			CATEGORY	30.00	0.00	437.40	

	11/02/11 - NL # 0253	SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 308 ADU ADULT BILL WEEK ENDING 11/04/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
171541	10/28/11	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	45.25		659.75 I	
				CATEGORY	45.25	0.00	 659.75	

RUN DATE 11/02/11 - SALES JRNL # 0253	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 3 VCP CHOICE LHCSA BILL WEEK ENDING	09 11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171542 10/28/11 171543 10/28/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 33.75		116.64 I 492.08 I	
			CUSTOMER	41.75	0.00	608.72	
			CATEGORY	41.75	0.00	608.72	

RUN DATE 11/02/11 - SALES JRNL # 0253	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 310 ADU ADULT BILL WEEK ENDING 11/04/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
171544 10/28/11 171545 10/28/11	000008 VISITING NURSE SERVE	,	16.75 1.00	244.22 I 14.58 I
		CUSTOMER	17.75 0.00	258.80
		CATEGORY	17.75 0.00	258.80

RUN DATE	11/02/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	311
SALES JRN	IL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTE	R		BILL WEEK ENDING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171546	10/28/11	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	15.75		229.64 I	
				CATEGORY	15.75	0.00	229.64	

RUN DATE	11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 312	
SALES JRN	L # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 1	1/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
171547	10/28/11	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 11/02/11 - ST SALES JRNL # 0253 L	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 313 ADU ADULT
		SALES REGISTER			BILL WEEK ENDING 11/04/11
INVOICE# DATE C	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	000008 VISITING NURSE SERVICE	- · · ·	20.00		291.60 I 131.22 I
171349 10720711 0	700000 VISITING NORSE SERVICE				
		CUSTOMER	29.00	0.00	422.82
		CATEGORY	29.00	0.00	422.82

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 314 SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 11/04/11 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS | GUILDRET | ACENNO, CLAIRE | 25.00 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 265.60 | 332.00 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 365.90 | 3 ACERNO, CLAIRE 25.00
ALI, AMRUNISSA 20.00
AYALA, ENRIQUE 52.00
BEGUM, JAMILA 70.00 171550 10/28/11 332.00 000010 GUILDNET Ι 171551 10/28/11 000010 I 171552 10/28/11 000010 171553 10/28/11 000010 171554 10/28/11 000010 171555 10/28/11 000010 171556 10/07/11 000010 171557 10/28/11 000010 171558 10/28/11 000010 171559 10/28/11 000010 171560 10/28/11 000010 171561 10/28/11 000010 171562 10/28/11 000010 171563 10/28/11 000010 171564 10/28/11 000010 171565 10/28/11 000010 171566 10/28/11 000010 171567 10/28/11 000010 171568 10/28/11 000010 171569 10/28/11 000010

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171573 10/14/11

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171598 10/28/11 000010 GUILDNET

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 2	- 3	15
SALES JRN	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			GUI GUILDNET		
				SALES	REGISTE	R		BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	I	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171599	10/28/11	000010	GUILDNET	זת	JBIANO, MARIA	12.00		159.36	I	
					,					
	10/28/11	000010	GUILDNET		ALJANIN, DILJA	60.50		803.44		
	10/28/11	000010	GUILDNET		ANCHEZ, ELIZAB	44.00		584.32	I	
	10/28/11	000010	GUILDNET		HELTON, AGUEDA	31.25		415.00	I	
171603	10/28/11	000010	GUILDNET	SI	HIRKES, MIRIAM	68.25		906.36	I	
171604	10/28/11	000010	GUILDNET	S	OMRAJ, UMILLA	2.00		26.56	I	
171605	10/28/11	000010	GUILDNET	T	DROSSIAN, PARI	28.00		371.84	I	
	10/28/11	000010	GUILDNET		ILLACRES, LUZ	8.00		106.24	I	
	10/28/11	000010	GUILDNET		LAHOS, MARIE			929.60	Т	
	10/28/11	000010	GUILDNET		EISZ, KLARA			106.24	T	
	10/28/11	000010	GUILDNET		HITLEY, MYRNA			265.60	T	
									± +	
	10/28/11	000010	GUILDNET		I, CARLOS			318.72		
	10/28/11	000010	GUILDNET		IANTSELIS, VIR			1,260.00	Τ	
171612	10/28/11	000010	GUILDNET	Zī	JMAETA, FANNY	64.00		849.92	I	
					CUSTOMER	2,067.75	0.00	30,627.40		
					CATEGORY	2,067.75	0.00	30,627.40		

RUN DATE	11/02/11	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTEI			PAGE 1	- 3	16
SALES JF	RNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	IRST	
				SALES REGISTED	R		BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
171613	10/28/11	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	Ι	
171614	10/28/11	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	Ι	
171615	10/28/11	000122	HEALTH FIRST	BOWERS, DIANE	40.00		675.20	I	
171616	10/28/11	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
171617	10/28/11	000122	HEALTH FIRST	CARRION, MARIA	40.00		675.20	I	
171618	10/28/11	000122	HEALTH FIRST	CEBALLOS, ANA	35.00		590.80	I	
171619	10/28/11	000122	HEALTH FIRST	CHARITAR, RAMKA	21.00		354.48	I	
171620	10/28/11	000122	HEALTH FIRST	DILLON, LAURA	20.00		337.60	I	
171621	10/14/11	000122	HEALTH FIRST	DORNELLAS, STEL	28.00		472.64	I	
171622	10/28/11	000122	HEALTH FIRST	ESPAILLAT, AMPA	20.00		337.60	I	
171623	10/28/11	000122	HEALTH FIRST	ESTEVES, JOSE	63.00		1,063.44	I	
171624	10/28/11	000122	HEALTH FIRST	FERGERSON, TINA	25.00		422.00	I	
171625	10/28/11	000122	HEALTH FIRST	FERRERA, FRANCI	12.00		202.56	I	
171626	10/21/11	000122	HEALTH FIRST	FONTANES, PEDRO	32.00		540.16	I	
171627	10/14/11	000122	HEALTH FIRST	FRANCISCO, RICH	64.00		1.080.32	Ī	
171628	10/28/11	000122	HEALTH FIRST	KAUR. HARBANS	48.50		818.68	T	
171629	10/28/11	000122	HEALTH FIRST	LARA. TOMASA	28.00		472.64	T	
171630	10/28/11	000122	HEALTH FIRST	LAZALA, GLADYS	84.00		1,417.92	Ī	
171631	10/28/11	000122	HEALTH FIRST	LOPEZ-RAMIREZ	77.00		1.299.76	T	
171632	10/28/11	000122	HEALTH FIRST	MACARENA SAHAR	54 00		911 52	T	
171633	10/28/11	000122	HEALTH FIRST	MARTIN ARIANA	12 00		202 56	T	
171634	10/28/11	000122	HEALTH FIRST	RIVERA CHRISTO	18 00		303.84	T	
171635	10/28/11	000122	HEALTH FIRST	RIVERA EDDIE	18 00		303.01	T	
171636	10/28/11	000122	UEALTH FIRST	PODRICHES MARC	20.00		337 60	т	
171637	10/28/11	000122	DEVLAR ELDCA	DIIT TO CAMILET	17 00		296 96	± T	
171638	10/28/11	000122	DEVILO EIDGE	CATAZAD TIIZ MA	56 00		200.90		
171639	10/28/11	000122	DEVILO ELDGE	CATHIIANA VOTAM	16 00		270 00	± +	
171640	10/28/11	000122	DEVILO EIDGE	CDIVEY DATEICI	0.00		125 04		
171641	10/28/11	000122	HEALTH FIRST	OT DOMAINE OLA	66.00		1 114 00		
171641		000122	UEALDI FIRSI	SI KOMAINE, CLA	24.00		1,114.00		
171642	10/28/11	000122	UEALIH FIKSI	SUKIEL, GERTRUD	24.UU		405.12		
	10/28/11	000122	HEALTH FIRST	TEJADA, PAULA	38.50		049.88	Τ Τ	
171644	10/28/11	000122	HEALTH FIRST	WILLIAMS, RODNE	12.00		202.56	Τ_	
				CUSTOMER	1,121.00	0.00	18,927.34		_
				REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOWERS, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA DILLON, LAURA DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD TEJADA, PAULA WILLIAMS, RODNE CUSTOMER CUSTOMER	1,121.00	0.00	18,927.34		

RUN DATE	E 11/02/11 -	- SUP SUNN	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1	- 3	17
SALES JE	RNL # 0253	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			NHP NEIGHBORE	HOOD :	HEALTH
			SALE	S REGISTE	R		BILL WEEK ENI	DING	11/04/11
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	'I'AX AM'I'	AMOUN'I'	J.A.b.	SURPLUS
171645	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AHMED IIMARA	56 00		945 28	т	
171646	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	AKHTAR, SELINA	54.25		915.74	T	
171647	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	ARDITTO PATRIC	20.00		337.60	T	
171648	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	BRATHWAITE, DON	24.00		405.12	Ī	
171649	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	CHUKWUJIORAH, T	43.00		725.84	Ī	
171650	10/07/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DARWISH, NADIA	16.00		270.08	Ī	
171651	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ, CARMEN	20.00		337.60	Ī	
171652	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	12.00		202.56	Ī	
171653	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	69.75		1,177.38	I	
171654	9/02/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	377.00		6,363.76	I	
171655	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	18.00		303.84	I	
171656	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHEREI	35.00		590.80	I	
171657	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
171658	9/30/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	30.00		506.40	I	
171659	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	22.00		371.36	I	
171660	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, JESS	30.00		506.40	I	
171661	9/02/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	103.75		1,751.30	I	
171662	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	49.00		827.12	I	
171663	10/21/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SANCHEZ, CHRIST	16.00		270.08	I	
171664	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
171665	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	48.25		814.46	I	
171666	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	SUERO, MICHAEL	84.00		1,417.92	I	
171667	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
171668	10/28/11	000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	20.50		346.04	I	
			NEIGHBORHOOD HEALTH PROVIDERS	CUSTOMER	1,246.50	0.00	21,040.92		
				- CATEGORY	1,246.50	0.00	21,040.92		

RUN DATE 11/	02/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 33	L8
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHO	- ,	
			SALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171669 10/	28/11 000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	54.00		911.52	I	
171670 10/	28/11 000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	40.00		675.20	I	
171671 10/	28/11 000126	NYS CATHOLIC/FIDELIS	BOCHENEK, JOLAN	41.00		692.08	I	
171672 10/	28/11 000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	40.00		675.20	I	
171673 10/	28/11 000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	15.00		253.20	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	7.00		118.16	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	MULLOKONDOVA, S	15.00		253.20	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	OLIVAPUIG, CARM	19.00		320.72	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,063.44	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	PEREZ, MARIA E	20.00		337.60	I	
	28/11 000126	NYS CATHOLIC/FIDELIS	ROMERO AYALA, A	28.00		472.64	I	
171680 10/	28/11 000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	54.00		911.52	I	
171681 10/	28/11 000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	33.00		557.04	I	
			CUSTOMER	429.00	0.00	7,241.52		
			CATEGORY	429.00	0.00	7,241.52		

RUN DATE	11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 31	.9
SALES JR	NL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			UHC UNITED HE	EALTH	
				SALES REGISTER			BILL WEEK ENI	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171682	10/28/11	000128	UNITED HEALTH CARE	CALDERON, MIGDA	48.00		823.68	I	
171683	9/02/11	000128	UNITED HEALTH CARE	KHODZAUDIEV, NI	40.00		686.40	I	
171684	10/28/11	000128	UNITED HEALTH CARE	LYMBERIS, HELEN	69.50		1,192.62	I	
171685	10/14/11	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	42.00		720.72	I	
171686	10/28/11	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	56.00		960.96	I	
171687	10/28/11	000128	UNITED HEALTH CARE	SAFOS, PATRA	54.00		926.64	I	
171688	10/28/11	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I	
171689	10/28/11	000128	UNITED HEALTH CARE	ZANE, GEORGE	13.25		227.37	I	
				CUSTOMER	350.75	0.00	6,018.87		
				CATEGORY	350.75	0.00	6,018.87		

RUN DATE 11/02/11 - SALES JRNL # 0253		IDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTEI	R		PAGE 1 EHP EMBLEM H BILL WEEK EN		
INVOICE# DATE	CUST NO CU	JSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171690 10/14/11 171691 10/28/11 171692 10/28/11 171693 10/28/11	000114 EM 000114 EM	MBLEM HEALTH MBLEM HEALTH MBLEM HEALTH MBLEM HEALTH	C	COPE, WILLIE COPELAND, ELISE DE LA O, MARIA DEYNOLDS, HARRI	84.00 30.00 7.00 12.00		1,176.00 427.50 98.00 168.00	I I I	
				CUSTOMER	133.00	0.00	1,869.50		
				CATEGORY	133.00	0.00	1,869.50		

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNN LOC 001		EG NY NY ES REGISTER			PAGE 1 HIP HEALTH II BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU	IS
171694 10/28/11 171695 10/21/11 171696 10/28/11 171697 10/28/11 171698 10/28/11 171699 10/28/11 171700 10/28/11 171701 10/28/11 171702 10/28/11 171703 10/28/11	000136 000136 000136 000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	ARAMBURU, MAXIM BORLAZA, FRANCI CARRION, MARIA DE JESUS, TIBUR GREGG, DAVID ORR, LOUISE SHAH, HANSIKABE TOWLES, ADA WILLIAMS, DIANE ZAMBRANO, ZOILA	83.75 8.00 8.00 56.00 30.00 34.50 4.00 20.00 19.50 8.00		1,413.70 1,620.48 135.04 945.28 506.40 582.36 67.52 337.60 329.16 135.04	I I I I I I I I	
			CUSTOMER	271.75	0.00	6,072.58		
			CATEGORY	271.75	0.00	6,072.58		-

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 HFS HEALTH F BILL WEEK ENI		11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171704 171705	9/02/11 9/02/11	000138 000138	HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC	HARDING, EDNA HARDING, EDNA	18.00 42.00		306.00 714.00	I I	
				CUSTOMER	60.00	0.00	1,020.00		
				CATEGORY	60.00	0.00	1,020.00		

RUN DATE 11/02/11 SALES JRNL # 0253	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYW	IDE REGNY NY SALES REGIST:	E R		PAGE 1 - HPS HEALTH PLUS BILL WEEK ENDIN	3
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
171705 9/16/11 171706 10/28/11 171707 10/28/11	000138 HEALTH PLUS PHSE 000138 HEALTH PLUS PHSE 000138 HEALTH PLUS PHSE	, INC VAZQUEZ, ARCADI	198.00 12.00 35.00		3,366.00 1 204.00 1 595.00 1	: : : :
		CUSTOMER	245.00	0.00	4,165.00	
		CATEGORY	245.00	0.00	4,165.00	

RUN DATE 11/02/11 - SALES JRNL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AFF AFFINITY	- 324 HEALTH	
			SALES REGISTER			BILL WEEK ENI	DING 1	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171708 10/28/11	000142	AFFINITY HEALTH PLUS	HERNANDEZ, ANTO	40.00		960.00	I	
171709 10/28/11	000142	AFFINITY HEALTH PLUS	VAMVAKAS, SOPHI	40.00		960.00		
			CUSTOMER	80.00	0.00	1,920.00		
			CATEGORY	80.00	0.00	1,920.00		

RUN DATE	11/02/11 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 32	25
SALES JE	RNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLUS	HEAL	_TH
				SALES REGISTER			BILL WEEK END	DING	11/04/11
TARKOT GEL	L D3.000	CITCE NO	CHCEOMED NAME						
INVOICE	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171710	10/28/11	000130	METROPLUS HEALTH	ABBAS, SENOWARA	84.00		1,440.60	I	
171711	10/28/11	000130	METROPLUS HEALTH	ANDERSON, BETH	42.00		720.30	I	
171712	10/28/11	000130	METROPLUS HEALTH	ARIAS, NORA	60.00		1,029.00	I	
171713	10/28/11	000130	METROPLUS HEALTH	BEDOYA, MONICA	35.00		600.25	I	
171714	10/28/11	000130	METROPLUS HEALTH	BESANT, NAOMI	23.00		394.45	I	
171715	10/28/11	000130	METROPLUS HEALTH	BRACERO, HELEN	84.00		1,440.60	I	
171716	10/28/11	000130	METROPLUS HEALTH	BRIGGS, LOUIS	77.00		1,320.55	I	
171717	10/28/11	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25	I	
171718	10/28/11	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
171719	10/28/11	000130	METROPLUS HEALTH	DAVIS, ANGIE	84.00		1,440.60	I	
171720	10/28/11	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
171721	10/28/11	000130	METROPLUS HEALTH	DURAHAM, CYNTHI	16.00		274.40	I	
171722	10/28/11	000130	METROPLUS HEALTH	GALAS, TERESA	37.00		634.55	I	
171723	10/28/11	000130	METROPLUS HEALTH	GONZALEZ, CARLO	20.00		343.00	I	
171724	10/28/11	000130	METROPLUS HEALTH	MANIACI, VINCEN	84.00		1,440.60	I	
171725	10/28/11	000130	METROPLUS HEALTH	MATUTE-CALLE, R	81.00		1,389.15	I	
171726	10/28/11	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I	
171727	10/28/11	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I	
171728	10/21/11	000130	METROPLUS HEALTH	PUCHUELA, MARIA	64.00		1,097.60	I	
171729	10/28/11	000130	METROPLUS HEALTH	RAMPERSAID, ALI	28.00		480.20	I	
171730	10/28/11	000130	METROPLUS HEALTH	RYALS, CHARLES	28.00		480.20	I	
171731	10/28/11	000130	METROPLUS HEALTH	VALLE, BLASINA	30.00		514.50	I	
				CUSTOMER 1			18,744.95		
						0.00			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - AMG AMERIGROUE	326
				SALES REGISTED	?		BILL WEEK END	ING 11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
171732	9/30/11	000132	AMERIGROUP	GIAMBRONE, JOSE	6.00		101.22	I
	10/28/11 10/28/11	000132 000132	AMERIGROUP AMERIGROUP	GIAMBRONE, JOSE GUERRA, LORRAIN	42.00 70.00		708.54 1,180.90	I
171735	10/28/11	000132	AMERIGROUP	PRUITT, JOHNNY	12.00		202.44	I
				CUSTOMER	130.00	0.00	2,193.10	
				CATEGORY	130.00	0.00	2,193.10	

RUN DATE 11/02/11 - SALES JRNL # 0253		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E				PAGE 1 WEL WELCARE (BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171736 10/28/11 171737 10/28/11 171738 10/28/11	000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA RAMIREZ, ALIDA RANJITSINGH, ES	41.50 84.00 56.00		713.80 1,444.80 963.20	I I I	
				CUSTOMER	181.50	0.00	3,121.80		
				 CATEGORY	181.50	0.00	3,121.80		

RUN DATE 11/02/11 - SUP SU	UNNYSIDE CITYWIDE				PAGE 1 -	328
SALES JRNL # 0253 LOC 00	1 SUNNYSIDE CITYWIDE REG	NY NY			NPS NY PRESBYT	ERIAN SELECT
	SALE	S REGISTER			BILL WEEK ENDI	NG 11/04/11
INVOICE# DATE CUST N	IO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
171739 10/28/11 000134	NY-PRESBYTERIAN SYSTEM SELECT	KARASSAVIDIS, A	49.00		840.84	I
		CATEGORY	49.00	0.00	840.84	

RUN DAT	TE 11/02/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 329	
SALES 3	TRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HCP HEALTHCARE PARTNERS	
				SALES REGISTER			BILL WEEK ENDING 11/04/1	L1
INVOICE	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
171740	10/28/11	000148	HEALTH CARE PATTNERS	MISIR, SAVITRI	9.75		164.58 I	
				CATEGORY	9.75	0.00	 164.58	

			YSIDE CITYWIDE				-	- 3	30
SALES JRN	NL # 0253	LOC 001					PAR PRIVATE		11/04/11
			S A L E	S REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171741	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	BECKFORD, DORIS	11.75		170.38	I	
	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	CARSWELL, LVELL	8.00			I	
	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	GENOA, ANTONIO	7.75			I	
	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	GOMEZ, YOLANDA	8.00		116.00	I	
	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	ORTIZ, AURA	4.00		58.00	I	
	10/28/11	000002	SUNNYSIDE COMMUNITY SERVICES	ROCSIN, FLORICA	20.00		290.00	I	
				CUSTOMER	59.50	0.00	862.76		
171747	10/28/11	000040	DUISIN, CHRISTINE	DUISIN, XENIA	16.00		248.00	I	
171748	10/28/11	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	25.00		344.75	I	
171749	10/28/11	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
171750	10/28/11	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
					115 50	0.00	0.017.51		
				CATEGORY	115.50	0.00	2,917.51		

	02/11 - SUP SUNN					11102	- 33	
SALES JRNL #	0253 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CAS CHILDREN		
		S A	ALES REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171751 10/2	28/11 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	17.50		271.26	I	
171752 9/0	09/11 000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	6.00		93.00	I	
171753 9/3	16/11 000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	5.00		77.50	I	
171754 10/2	28/11 000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	4.00		62.00	I	
171755 9/0	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	6.00		93.00	I	
171756 9/3	L6/11 000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	5.00		77.50	I	
171757 10/2	28/11 000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	4.00		62.00	I	
	28/11 000088	CHILDREN'S AID SOCIETY	REDDICK, LORENZ	20.00		310.00	I	
	L4/11 000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	3.00		46.50	I	
171760 10/2	28/11 000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	23.00		356.50	I	
171761 10/2	28/11 000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	27.50		426.26	I	
			CUSTOMER	121.00	0.00	1,875.52		
			CATEGORY	121.00	0.00	1,875.52		

RUN DATE 11/02/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 3	32
SALES JRNL # 0253	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY S R E G I S T E R			GHC GIRLING	HEALT:	H CARE OF NY
			SALE	S REGISTER			BILL WEEK EN	DING	11/04/11
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
171762 10/28/11	000090	GIRLING HEALTH CARE			6.00		78.00		
171763 10/28/11	000090	GIRLING HEALTH CARE	OF NY	AMABILE, ANTOIN	156.00		2,028.00	I	
171764 10/07/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	6.00		78.00	I	
171765 10/21/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	6.00		78.00	I	
171766 10/28/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	33.75		438.75	I	
171767 10/21/11	000090	GIRLING HEALTH CARE	OF NY	CARRILLO, MARIA			78.00	I	
171768 10/28/11	000090	GIRLING HEALTH CARE	OF NY	CARRILLO, MARIA	28.75		373.75	I	
171769 10/28/11	000090	GIRLING HEALTH CARE			9.00		117.00	I	
171770 10/28/11	000090	GIRLING HEALTH CARE			168.00		2,184.00	I	
171771 10/28/11	000090	GIRLING HEALTH CARE			4.00		52.00	Ī	
171772 10/28/11	000090	GIRLING HEALTH CARE		JOHNSON, ROBERT	25.75		334.75	T	
171773 10/28/11	000090	GIRLING HEALTH CARE		KILIMLIAN, PEPR	25.00		325.00	T	
171774 10/28/11	000090	GIRLING HEALTH CARE		SAK, FIRDWS			156.00	T	
171775 10/28/11	000090	GIRLING HEALTH CARE		THOMPSON, ORALI			1,092.00	T	
171773 10720711	000000	CIRCING HEADIN CARE	OI IVI	INOMI BON, OKALI			1,002.00		
				CUSTOMER	570.25	0.00	7,413.25		
				COSTOMER	370.23	0.00	7,113.23		
				CATEGORY	570.25	0.00	7,413.25		
				CATEGORI	3,0.23	3.00	,,113.23		

	11/02/11 NL # 0253	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	NY NY S REGISTE	R	PAGE 1 PAR PRIVATE BILL WEEK EN	- 3	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	 REFERENCE	HOURS	AMOUNT		SURPLUS
171776	10/28/11	000096	JIBAJA, ROSEMARY	JIBAJA, ROSEMAR	168.00	2,676.01	I	
171777	10/28/11	000098	MILDRED PANSE	PANSE, MILDRED	20.00	310.00	I	
171778	10/28/11	000143	ETTORE COPPOLA	COPPOLA, ETTORE	12.00	186.00	I	
171779	10/28/11	000145	LARRY EISENBERG	BERGER, TESS	77.00	1,219.00	I	
171780	10/28/11	002215	KEITH SALMON	LAWRANCE, LILLA	8.00	130.00	I	
171781	10/28/11	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	16.00	248.00	I	
171782	10/28/11	003743	VICTOR NICASSIO	NICASSIO, VICTO	5.75	89.13	I	
171783	10/28/11	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00	337.50	I	
171784	10/28/11	006173	SIANO, ANDREW	SIANO, ANDREW	16.00	216.00	I	
171785	10/28/11	006337	STEPHEN EDEL	EDEL, CANDACE	80.75	1,275.25	I	
171786	10/28/11	007521	DOROTHY GILBERT	GILBERT, DOROTH	30.00	465.00	I	
171787	10/28/11	007580	MICHAEL CAMPS	CAMPS, ELIZABET	15.00	232.50	I	
171788	10/28/11	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00	130.00	I	
171789	10/28/11	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00	195.00	I	
171790	10/28/11	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	5.00	83.50	I	
171791	10/28/11	008764	PATRICIA PHILION	GAFFNEY, FREDER	12.00	192.00	I	
171792	10/28/11	008870	SANFRATELLO ANGELINA	SANFRATELLO, AN	18.00	300.00	I	
171793	10/28/11	009036	MR. FERNANDO RIVERA	RIVERA, ALCIRA	9.00	139.50	I	
171794	10/28/11	997760	MARASA, ANTONIO	MARASA, ANTONIO	9.00	121.50	I	
				CATEGORY _	546.50	8,545.89		
				LOCATION	22,382.75	341,758.94		
				COMPANY	22,382.75	341,758.94		

RUN DATE 11/02/11 - SUP SUNNYSIDE CITYWIDE

SALES JRNL # 0253 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 11/04/11

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

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