RUN DATE 01/09/ SALES JRNL # 03

INVOICE#

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SENIOR HEALTH PARTNERS

SENIOR HEALTH PARTNERS

Ξ (01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	
RNI	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			SHP SENIOR HEALTH PARTI	NERS
			:	SALES REGISTER			BILL WEEK ENDING 1/11	1/13
#	DATE	CUST NO	CUSTOMER NAME	REG NY NY S A L E S R E G I S T E R REFERENCE ALVAREZ, ANGELA BANKS, ANASTAZJ BROOKS, NATALIE BROOKS, NATALIE BROOKS, NATALIE CARRILLO, MARIA CARRILLO, MARIA COLON, RAYMUNDA CUEVA, RAFAELA CUEVA, RAFAELA DEJESUS, YSABEL ESCANIO, ANTONI ESTRADA, MIRIAM FULLER, WILLIAM FULLER, WILLIAM GARCIA, VICTORI GARCIA, VICTORI GHILIOTTY, FLOR GODWIN, CLYDE GOODWIN, CLYDE GOO	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
	1/04/13	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		56.96 I	
	1/04/13	000082	SENTOR HEALTH PARTNERS	ALVAREZ ANGELA	4 00		56.96 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	RANKS ANASTAZI	24 00		342.00 I	
	12/28/12	000082	SENTOR HEALTH DARTNERS	BROOKS NATALIE	8 00		114.00 I	
-	1/04/13	000082	CENTOR HEALTH PARTNERS	BROOKS, NATALIE	14 00		199.50 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	CARRILLO MARIA	5 00		71.25 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	CARRILLO MARIA	15 00		213.75 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	COLON RAYMINDA	14 00		199.50 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	COLON PAYMINDA	14 00		199.50 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	CHENA DAFAELA	33 00		469.92 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	CHEVA, KAPAELA	44 00		626.56 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	DETECTIO VONDET	3 00		42.72 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	FECANTO ANTONI	9 00		113.92 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	ESCANIO, ANIONI	2.00		32.48 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	ESCANIO, ANIONI	2.00		113.92 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	ESIKADA, MIKIAM ESTRADA MIRIAM	32 00		455.68 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	FILLED WILLIAM	30.00		427.20 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	FILLED WILLIAM	40.00		569.60 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	CARCIA VICTORI	5 00		71.20 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	CARCIA, VICTORI	15 00		213.60 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	CHILIOTTY FLOD	4 00		57.00 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	CHILIOTTY FLOR	14 00		199.50 I	
	1/04/13	000082	CENTOR HEALTH PARTNERS	COODWIN CLYDE	30 00		427.20 I	
	1/04/13	000082	SENTOR HEALTH DARTNERS	GOODWIN, CLIDE	40 00		569.60 I	
	12/28/12	000082	SENIOR HEALTH PARTNERS	GRAFSTEIN LILL	4 00		800.00 I	
-	1/04/13	000082	SENTOR HEALTH PARTNERS	GUTTERREZ, LUCT	4.00		56.96 I	
	1/04/13	000082	SENTOR HEALTH PARTNERS	GUTTERREZ, LUCT	12.00		170.88 I	
	1/04/13	000082	SENTOR HEALTH PARTNERS	HARIDIN, KHAMAT	13.00		185.12 I	
	1/04/13	000082	SENTOR HEALTH PARTNERS	HARIDIN, KHAMAT	20.00		284.80 I	
	12/28/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	67.00		954.08 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	76.00		1,082.24 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	HARLEY, ETHEL	3.50		49.84 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	HARLEY, ETHEL	3.50		49.84 I	
	12/21/12	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	20.00		285.00 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	13.00		185.25 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, MARI	2.00		400.00 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, MARI	4.00		800.00 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, VICE	1.00		200.00 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, VICE	3.00		600.00 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MARTINEZ, EMMA	4.00		56.96 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MARTINEZ, EMMA	4.00		56.96 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MARTINEZ, ROSAR	4.00		56.96 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MARTINEZ, ROSAR	4.00		56.96 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MATOS, AUREA	19.00		270.56 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MATOS, AUREA	28.00		398.72 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MAYNARD, LILLIA	6.00		85.44 I	
	1/04/13	000082	SENIOR HEALTH PARTNERS	MAYNARD, LILLIA	12.00		170.88 I	
	10/01/10	00000	CONTACT TO A CONTACT OF CONTACT O	MEDGADO ELLA	00 00		1 205 50 -	

MERCADO, ELVA

MERCADO, ELVA

98.00

22.00

1,395.52

313.28

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 -SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS CITYWIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 1/11/13 SENIOR HEALTH PARTNERS MOROCHO, MANUEL 34,00 484.16 SENIOR HEALTH PARTNERS MOROCHO, MANUEL 42.00 598.08 SENIOR HEALTH PARTNERS MOROCHO, MANUEL 42.00 284.80 SENIOR HEALTH PARTNERS ORTIZ, SANTIAGO 20.00 284.80 SENIOR HEALTH PARTNERS ORTIZ, SANTIAGO 40.00 569.60 SENIOR HEALTH PARTNERS OSBORNE, DOROTH 15.00 213.60 SENIOR HEALTH PARTNERS OSBORNE, DOROTH 20.00 284.80 SENIOR HEALTH PARTNERS OSBORNE, DOROTH 20.00 284.80 113.92 SENIOR HEALTH PARTNERS OSBORNE, DOROTH 20.00 284.80 113.92 SENIOR HEALTH PARTNERS PERALTA, ANTONI 8.00 113.92 SENIOR HEALTH PARTNERS PERALTA, ANTONI 8.00 455.68 SENIOR HEALTH PARTNERS PERALTA, ANTONI 8.00 113.92 SENIOR HEALTH PARTNERS PIZARRO, RAMONA 4.00 800.00 SENIOR HEALTH PARTNERS PIZARRO, RAMONA 4.00 800.00 SENIOR HEALTH PARTNERS PIZARRO, RAMONA 4.00 800.00 170.88 SENIOR HEALTH PARTNERS POLANCO, ANTONI 12.00 170.88 SENIOR HEALTH PARTNERS POLANCO, ANTONI 12.00 170.88 SENIOR HEALTH PARTNERS POLANCO, ANTONI 12.00 170.88 SENIOR HEALTH PARTNERS POLANCO, RAMON 6.00 85.44 SENIOR HEALTH PARTNERS RAMOS, EFFAIN 12.00 171.00 55.00 171.00 SENIOR HEALTH PARTNERS RAMOS, ISABEL 22.00 327.52 SENIOR HEALTH PARTNERS ROBADOLUZZ, MARI 12.00 1170.88 SENIOR HEALTH PARTNERS ROBADOLUZZ, MARI 12.00 1170.88 SENIOR HEALTH PARTNERS SORO, CAMMEN 12.00 170.88 SENIOR HEALTH PARTNERS SORO, INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 222784 1/04/13 000082 484.16 I 598.08 I 222785 1/04/13 000082 222786 12/14/12 000082 284.80 I 222787 1/04/13 000082 222788 1/04/13 000082 222789 1/04/13 000082 222790 1/04/13 000082 222791 1/04/13 000082 222792 1/04/13 000082 222793 1/04/13 000082 222794 1/04/13 000082 222795 1/04/13 000082 222796 1/04/13 000082 222797 1/04/13 000082 222798 1/04/13 000082 222799 1/04/13 000082 222800 12/07/12 000082 222801 1/04/13 000082 222802 1/04/13 000082 222803 1/04/13 000082 222804 1/04/13 000082 222805 12/28/12 000082 222806 1/04/13 000082 222807 1/04/13 000082 222808 1/04/13 000082 222809 1/04/13 000082 222810 1/04/13 000082 222811 1/04/13 000082 222812 1/04/13 000082 222813 1/04/13 000082 222814 1/04/13 000082 222815 1/04/13 000082 222816 1/04/13 000082 222817 12/28/12 000082 222818 1/04/13 000082 222819 1/04/13 000082 222820 1/04/13 000082 222821 1/04/13 000082 222822 1/04/13 000082 222823 1/04/13 000082 222824 1/04/13 000082 1/04/13 222825 000082 1/04/13 222826 000082 1/04/13 222827 000082 222828 1/04/13 000082 CUSTOMER 1,529.00 0.00 28,281.39 CATEGORY 1,529.00 0.00 28,281.39

RUN DATE	- , , -		YSIDE CITYWIDE				11100	- 3	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
			S 2	ALES REGISTER			BILL WEEK END	ING I	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP S	SURPLUS
222829	1/04/13	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	24.00		349.92	I	
222830	1/04/13	800000	VISITING NURSE SERVICE	ABINANTI, IRENE	32.00		466.56	I	
222831	1/04/13	800000	VISITING NURSE SERVICE	ADAMES, OLGA	10.00		145.80	I	
222832	1/04/13	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	15.00		218.70	I	
222833	1/04/13	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	10.00		145.80	I	
222834	1/04/13	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	25.00		364.50	I	
222835	1/04/13	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	39.00		568.62	I	
222836	1/04/13	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	3.00		524.88	I	
222837	1/04/13	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	3.00		524.88	I	
				CUSTOMER	161.00	0.00	3,309.66		
				CATEGORY	 161.00	0.00	3,309.66		

RUN DATE 01/09/13 - SUP	SUNNYSIDE CITYWIDE				PAGE 1		4
SALES JRNL # 0315 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	•
	:	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222838 1/04/13 0000	008 VISITING NURSE SERVICE	AGUILAR, ZORAID	17.00		247.86	I	
222839 1/04/13 0000	008 VISITING NURSE SERVICE	AGUILAR, ZORAID	20.00		291.60	I	
		CUSTOMER	37.00	0.00	539.46		
		CATEGORY	37.00	0.00	539.46		

RUN DATE 01/09/		NYSIDE CITYWIDE				PAGE 1	_	5
SALES JRNL # 03	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		S	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222840 12/28/	L2 000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	21.00		306.18	I	
222841 1/04/	L3 000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	12.50		182.25	I	
222842 1/04/	L3 000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	21.00		306.18	I	
222843 1/04/	L3 000008	VISITING NURSE SERVICE	AKBAR, NASEEM	4.00		58.32	I	
222844 1/04/	L3 000008	VISITING NURSE SERVICE	AKBAR, NASEEM	16.00		233.28	I	
			CUSTOMER	74.50	0.00	1,086.21		
			CATEGORY	74.50	0.00	1,086.21		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING H BILL WEEK END	OMEW/	6 O WALLS (LT 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222845 222846	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	14.75 15.00		215.06 218.70	I I	
				CUSTOMER	29.75	0.00	433.76		
				CATEGORY	 29.75	0.00	433.76		

			YSIDE CITYWIDE	DDG 1911			PAGE 1 -	7
SALES JRN	L # U315	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222847 222848	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 24.00		87.48 I 349.92 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	8
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222849	1/04/13	800000	VISITING NURSE SERVICE	ALGECIRAS, NIRZ	2.00		29.16 I	
				CATEGORY	2.00	0.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	9
SALES URN	П # 0313	LOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222850 222851	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ALVAREZ, DALILA ALVAREZ, DALILA	4.00 12.00		58.32 I 174.96 I	
				CUSTOMER	16.00	0.00	233.28	
				CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - HOA HOSPICE AD BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
222852 222853	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ALVAREZ, NAZARE ALVAREZ, NAZARE	24.00 22.25		349.92 324.41	I I
				CUSTOMER	46.25	0.00	674.33	
				CATEGORY	46.25	0.00	674.33	

RU.	N DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	11
SA	LES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
				Ş	SALES REGISTER			BILL WEEK ENDING	G 1/11/13
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
22	2854	11/16/12	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	5.00		72.90 I	
					CATEGORY	5.00	0.00	72.90	

	01/09/13 - IL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 1	L2
BALLS OIGN	1L # 0313	100 001		SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222855 222856	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ANANIA, GLYGERI ANANIA, GLYGERI	5.00 23.75		72.90 346.28	I I	
				CUSTOMER	28.75	0.00	419.18		
				CATEGORY	28.75	0.00	419.18		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITY	MIDE	REG NY NY			PAGE 1 VCP CHOICE L		13
SALES UKI	ип # ОЭТЭ	LOC 001	SUNNISIDE CITI		ALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222857	1/04/13	000008	VISITING NURSE	SERVICE	ANDINO, ESTEBAN	15.25		222.36	I	
222858	1/04/13	800000	VISITING NURSE	SERVICE	ANDRADE, LOLA	36.00		524.88	I	
222859	1/04/13	800000	VISITING NURSE	SERVICE	ANDRADE, LOLA	48.00		699.84	I	
222860	1/04/13	000008	VISITING NURSE	SERVICE	ANDREWS, JOHNNI	27.00		393.66	I	
222861	1/04/13	000008	VISITING NURSE	SERVICE	ANDREWS, JOHNNI	36.00		524.88	I	
222862	1/04/13	000008	VISITING NURSE	SERVICE	ANGRISANO, RUTH	12.00		174.96	I	
222863	1/04/13	800000	VISITING NURSE	SERVICE	ANGRISANO, RUTH	12.00		174.96	I	
					CUSTOMER	186.25	0.00	2,715.54		
					CATEGORY	186.25	0.00	2,715.54		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	4
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	,	
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222864	1/04/13	000008	VISITING NURSE SERVICE	ANGULO, ELCY	4.00		58.32	I	
222865	1/04/13	800000	VISITING NURSE SERVICE	ANGULO, ELCY	12.00		174.96	I	
222866	1/04/13	800000	VISITING NURSE SERVICE	ANUT, ALICE	25.00		364.50	I	
222867	1/04/13	800000	VISITING NURSE SERVICE	ANUT, ALICE	36.00		524.88	I	
				CUSTOMER	77.00	0.00	1,122.66		
				CATEGORY	77.00	0.00	1,122.66		

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
222868 222869 222870 222871	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	AOUN, ODETTE AOUN, ODETTE ARIAS, MAGDALEN ARIAS, MAGDALEN	6.00 24.00 14.00 32.00		87.48 349.92 204.12 466.56	I I I
				CUSTOMER	76.00	0.00	1,108.08	
				CATEGORY	76.00	0.00	1,108.08	

SALES REGISTER BILL WEEK ENDING 1/11 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURP. 222872 12/21/12 000008 VISITING NURSE SERVICE ASHLEY, CLYDE 1.00 14.58 I 222873 1/04/13 000008 VISITING NURSE SERVICE AZAD, ABUL 3.50 51.03 I 222874 1/04/13 000008 VISITING NURSE SERVICE AZAD, ABUL 7.75 113.00 I	PAGE 1 - 16
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURP: 222872 12/21/12 000008 VISITING NURSE SERVICE ASHLEY, CLYDE 1.00 14.58 I 222873 1/04/13 000008 VISITING NURSE SERVICE AZAD, ABUL 3.50 51.03 I 222874 1/04/13 000008 VISITING NURSE SERVICE AZAD, ABUL 7.75 113.00 I	NY LTC NURSING HOMEW/O WALLS (LT
222872 12/21/12 000008 VISITING NURSE SERVICE ASHLEY, CLYDE 1.00 14.58 I	E G I S T E R BILL WEEK ENDING 1/11/13
222872 12/21/12 000008 VISITING NURSE SERVICE ASHLEY, CLYDE 1.00 14.58 I	DENIGE HOUDO HAY AME AMOUNTE HYD CHIDDLUG
222873	RENCE HOURS TAX AMI AMOUNT TIP SURPLUS
222873	Y, CLYDE 1.00 14.58 I
00007F 1/04/10 000000 VIGITATING NUDGE GERVIGE PALLAG VIOLA 10.00 14F.00 T	ABUL 7.75 113.00 I
222875 1/04/13 000008 VISITING NURSE SERVICE BALLAS, VIOLA 10.00 145.80 I	S, VIOLA 10.00 145.80 I
222876 1/04/13 000008 VISITING NURSE SERVICE BALLAS, VIOLA 20.00 291.60 I	
222877	,
222878 1/04/13 000008 VISITING NURSE SERVICE BAQUERIZO, ANNA 32.00 466.56 I	
222879 1/04/13 000008 VISITING NURSE SERVICE BARDEANU, VICTO 34.75 506.66 I	·
222880 1/04/13 000008 VISITING NURSE SERVICE BARDEANU, VICTO 48.00 699.84 I	-,
222881 1/04/13 000008 VISITING NURSE SERVICE BATTLE, JEANETT 19.50 284.31 I	
222882 1/04/13 000008 VISITING NURSE SERVICE BATTLE, JEANETT 22.00 320.76 I	E, JEANETT 22.00 320.76 I
CUSTOMER 222.50 0.00 3,244.06	CUSTOMER 222.50 0.00 3,244.06
CATEGORY 222.50 0.00 3,244.06	CATEGORY 222.50 0.00 3.244.06

RUN DATE 01/09/13 -						PAGE 1 -	17
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		2	SALES REGISTER			BILL WEEK ENDIN	G 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
222883 12/14/12	000008	VISITING NURSE SERVICE	BELLOROFONTE, M	8.50		123.93 I	
222884 1/04/13	800000	VISITING NURSE SERVICE	BELLOROFONTE, M	63.00		918.54 I	
222885 1/04/13	800000	VISITING NURSE SERVICE	BELLOROFONTE, M	88.00		1,283.04 I	
222886 1/04/13	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	3.00		43.74 I	
			CUSTOMER	162.50	0.00	2,369.25	
			CATEGORY	162.50	0.00	2,369.25	

RUN DATE O SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HC BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	1/04/13	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	7.00		102.06	I
222888	1/04/13	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	13.00		189.54	I
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 - 1	9
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222889	1/04/13	000008	VISITING NURSE SERVICE	BHATT, JYOTI	6.00		87.48 I	
222890	1/04/13	800000	VISITING NURSE SERVICE	BHATT, JYOTI	18.00		262.44 I	
				CUSTOMER	24.00	0.00	349.92	
				CATEGORY	24.00	0.00	349.92	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 LTC NURSING HOMEW	20 'O WALLS (LT
				S A L E S R E G I S T E R			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222891 222892	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE	•	6.00 12.00		87.48 I 174.96 I	
222092	1/04/13	000008	VISITING NORSE SERVICE	DHAWNANI, BISHU				
				CUSTOMER	18.00	0.00	262.44	
				CATEGORY	18.00	0.00	262.44	

	01/09/13 - JL # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	21	
			S	SALES REGISTER			BILL WEEK ENDI	NG 1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
222893	1/04/13	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	36.75		535.82	I	
				CATEGORY	36.75	0.00	535.82		

RUN DATE 01/09/13 - SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	
		2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222894 12/21/12	000008	VISITING NURSE SERVICE	BLANCAFLOR, PUR	8.00		116.64 I	
222895 1/04/13	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	8.00		116.64 I	
222896 1/04/13	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	24.00		349.92 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

-	- , , -		YSIDE CITYWIDE				PAGE 1 -	23
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	_		VCP CHOICE LHCS	
			S	SALES REGISTE	R		BILL WEEK ENDIN	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
222897	1/04/13	000008	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	4.00		58.32	Γ
222898	1/04/13	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	12.00		174.96	E
222899	1/04/13	000008	VISITING NURSE SERVICE	BOJORQUEZDECHA,	23.00		335.35	Ε
222900	1/04/13	000008	VISITING NURSE SERVICE	BONILLA, LYDIA	4.00		58.32	Ε
222901	1/04/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	16.00		233.28	Σ
				CUSTOMER	59.00	0.00	860.23	
				CATEGORY	59.00	0.00	860.23	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HO	- 24 DMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDI	ING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP SURPLUS
222902 222903	1/04/13 1/04/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	5.00 15.00		72.90 218.70	I I
	_, -, -,			CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 25 VCP CHOICE LHCSA	5
DALLO OIGNI	ш т 0313	DOC 001		SALES REGISTER				1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222904 222905	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BORYSEWICZ, MAR BORYSEWICZ, MAR	4.00 8.00		58.32 I 116.64 I	
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	26
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222906	1/04/13	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	11.00		160.38	I	
222907	1/04/13	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	18.00		262.44	I	
				CUSTOMER	29.00	0.00	422.82		
				CATEGORY	29.00	0.00	422.82		

-			YSIDE CITYWIDE				PAGE 1	-	27
SALES JRN	r∟ # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222908	1/04/13	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	20.00		291.60	I	
222909	1/04/13	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	40.00		583.20	I	
222910	1/04/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	22.75		331.70	I	
222911	1/04/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	45.00		656.10	I	
				CUSTOMER	127.75	0.00	1,862.60		
					107.75		1 060 60		
				CATEGORY	127.75	0.00	1,862.60		

			YSIDE CITYWIDE	DEG MV MV			-	28
SALES JRN	г # O3T2	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222912 222913	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	2.00 4.00		29.16 I 58.32 I	
				CUSTOMER	6.00	0.00	87.48	
				CATEGORY	6.00	0.00	87.48	

-	- , , -		YSIDE CITYWIDE				PAGE 1		
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		1 /11 /12
			S	ALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222914	1/04/13	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	3.00		43.74	I	
222915	1/04/13	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	6.00		87.48	I	
222916	1/04/13	800000	VISITING NURSE SERVICE	BURITICA, INES	15.00		218.70	I	
222917	1/04/13	800000	VISITING NURSE SERVICE	BURNS, MARGARET	24.00		349.92	I	
222918	1/04/13	800000	VISITING NURSE SERVICE	BURNS, MARGARET	32.00		466.56	I	
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 30
SALES URI	1T # 0312	TOC 001		REG NY NY S A L E S R E G I S T E R			LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
222919 222920	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE		8.00 32.00		116.64 I 466.56 I
222920	1/04/13	000008	VISITING NURSE SERVICE	BUSCARELLO, UUN			400.30 1
				CUSTOMER	40.00	0.00	583.20
				CATEGORY	40.00	0.00	583.20

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 3	31
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			5	SALES REGISTER			BILL WEEK ENI	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222921	1/04/13	800000	VISITING NURSE SERVICE	CABA, PURA	2.00		29.16	I	
222922	1/04/13	000008	VISITING NURSE SERVICE	CABA, PURA	8.00		116.64	I	
222923	1/04/13	800000	VISITING NURSE SERVICE	CAIPO, MATILDE	7.00		102.06	I	
222924	1/04/13	800000	VISITING NURSE SERVICE	CAIPO, MATILDE	28.00		408.24	I	
				CUSTOMER	45.00	0.00	656.10		
				CATEGORY	45.00	0.00	656.10		

	01/09/13 - NL # 0315	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	32	
SALES ON	NL # 0313	HOC 001		ALES REGISTER			BILL WEEK ENDI	NG 1	/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP S	URPLUS
222925 222926	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CALABRO, JOSEPH CALABRO, JOSEPH	30.00 39.75		437.40 579.56	I I	
				CUSTOMER	69.75	0.00	1,016.96		
				CATEGORY	69.75	0.00	1,016.96		

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 3	3
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			5	SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222927	1/04/13	000008	VISITING NURSE SERVICE	CALDERON, FRANC	20.00		291.60	I	
222928	1/04/13	800000	VISITING NURSE SERVICE	CALDERON, FRANC	24.00		349.92	I	
222929	1/04/13	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	24.00		349.92	I	
222930	1/04/13	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	32.00		466.56	I	
				GHGEOMED.	100.00		1 450 00		
				CUSTOMER	100.00	0.00	1,458.00		
				CATEGORY	100.00	0.00	1,458.00		

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING H BILL WEEK END	HOMEW/	34 /O WALLS (LT 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	CANO, ADELINA CANO, ADELINA	18.00 18.00		262.44 262.44	I I	
				CUSTOMER	36.00	0.00	524.88		
				CATEGORY	36.00	0.00	524.88		

			YSIDE CITYWIDE				-	35
SALES JRN	rL # 0315	LOC 001		REG NY NY			VCP CHOICE LHCSA	1 /11 /12
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222933	1/04/13	000008	VISITING NURSE SERVICE	CAPORASO, VINCE	36.00		524.88 I	
222934	1/04/13	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	34.25		499.37 I	
				CUSTOMER	70.25	0.00	1,024.25	
				CATEGORY	 70.25	0.00	1,024.25	

RUN DATE 01/09/13 SALES JRNL # 0315	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	
			SALES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
222935 1/04/13 222936 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	11.00 24.00		160.38 I 349.92 I	
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1	-	37
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		1 /11 /12
			2	SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222937	1/04/13	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	36.00		524.88	I	
222938	1/04/13	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	48.00		699.84	I	
222939	1/04/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	3.00		43.74	I	
222940	1/04/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	14.75		215.06	I	
222941	1/04/13	000008	VISITING NURSE SERVICE	CARLOS, JULIA	16.00		233.28	I	
				CUSTOMER	117.75	0.00	1,716.80		
				CATEGORY	117.75	0.00	1,716.80		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 38 LAD NURSING HOME W/C BILL WEEK ENDING	O WALLS LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNI IIP S	OURPLUS
222942	1/04/13	000008	VISITING NURSE SERVICE	- · · · · · · · · · · · · · · · · · · ·	23.75		346.28 I	
222943	1/04/13	000008	VISITING NURSE SERVICE	CARTAGENA, FRAN	32.00		466.56 I	
				CUSTOMER	55.75	0.00	812.84	
				CATEGORY	55.75	0.00	812.84	

RUN DATE 01/09	/13 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	39
SALES JRNL # (315 LOC 001		REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDI	NG 1/11/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
222944 1/04	/13 000008	VISITING NURSE SERVICE	CARUSO, GIUSEPP	4.00		58.32	I
222945 1/04	/13 000008	VISITING NURSE SERVICE	CARUSO, GIUSEPP	12.00		174.96	I
222946 12/28	1/12 000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	20.00		291.60	I
222947 1/04	/13 000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	5.00		72.90	I
222948 1/04	/13 000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	20.00		291.60	I
			CUSTOMER	61.00	0.00	889.38	
			CATEGORY	61.00	0.00	889.38	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 -	40
SALES JR	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			VCP CHOICE LHCS BILL WEEK ENDIN	
			5	ALES KESISIEK			DIDD WEEK BRDII	10 1/11/15
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
000040	1 (04 (12	000000		anniting armin	4 00		F0 20 3	
222949	1/04/13	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	4.00		58.32	-
222950	1/04/13	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	16.00		233.28	• •
222951	1/04/13	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	14.00		204.12	•
222952	1/04/13	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	6.50		94.77	
222953	1/04/13	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	4.50		65.61	•
222954	1/04/13	800000	VISITING NURSE SERVICE	CESPEDES, CRIST	9.50		138.51	•
				CUSTOMER	54.50	0.00	794.61	
				CATEGORY	54.50	0.00	794.61	

			YSIDE CITYWIDE					- 4	
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			LAD NURSING F		1/0 WALLS LT 1/11/13
				SALES REGISIER			DILL MEEV FINI	JING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222955	1/04/13	000008	VISITING NURSE SERVICE	·	3.75		54.68	I	
222956	1/04/13	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	12.00		174.97	I	
				CUSTOMER	15.75	0.00	229.65		
				COSTOPIER	15.75	0.00	229.03		
				CATEGORY	15.75	0.00	229.65		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	42
SALES JRN	rL # 0315	LOC 001		REG NY NY			VCP CHOICE LHC	
			:	SALES REGISTER			BILL WEEK ENDI	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
222957	1/04/13	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	18.00		262.44	I
				CATEGORY	18.00	0.00	262.44	

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 43
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT
		:	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
222958 12/28/12	000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		145.80 I
222959 1/04/13	800000	VISITING NURSE SERVICE	CHARLES, JOSE	15.00		218.70 I
			CUSTOMER	25.00	0.00	364.50
			CATEGORY	25.00	0.00	364.50

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222960	1/04/13	000008	VISITING NURSE SERVICE	CHAUCA, PEDRO	30.00		437.40 I	
222961	1/04/13	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	37.50		546.75 I	
				CUSTOMER	67.50	0.00	984.15	
				CATEGORY	67.50	0.00	984.15	

LT

			YSIDE CITYWIDE				PAGE 1 - 46	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 1	/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
222964	1/04/13	000008	VISITING NURSE SERVICE	CHUCK, ENA	12.75		185.90 I	
222965	1/04/13	800000	VISITING NURSE SERVICE	CHUCK, ENA	11.00		160.39 I	
				CUSTOMER	23.75	0.00	346.29	
				CATEGORY	23.75	0.00	346.29	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	47
SALES UKI	ш # ОЗІЗ	TOC 001		SALES REGISTER			BILL WEEK ENDIN	IG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
222966 222967	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE	COLEMAN, JAMES	2.00		29.16 1 58.32 1	
222967	1/04/13	000008	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		58.34	·
				CUSTOMER	6.00	0.00	87.48	
				CATEGORY	6.00	0.00	 87.48	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	DMEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
222968 222969 222970 222971 222972 222973	1/04/13 1/04/13 1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008 000008 000008	VISITING NURSE SERVICE	COLLER, FELISA COLLER, FELISA COLLER, JOSE COLLER, JOSE COLON, ANTONIA COLON, ANTONIA	4.00 16.00 4.00 16.00 18.00 24.00		58.32 233.28 58.32 233.28 262.44 349.92	I I I I
				CUSTOMER	82.00	0.00	1,195.56	
				CATEGORY	82.00	0.00	1,195.56	

RUN DATE 01/09/13 - SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE BILL WEEK ENDI	CARE PROGRAM
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
222974 11/02/12 222975 1/04/13 222976 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CORDERO, NELLY	12.00 71.50 96.00		174.96 1,042.47 1,399.68	I I
			CUSTOMER	179.50	0.00	2,617.11	
			CATEGORY	179.50	0.00	2,617.11	

	RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE REG NY NY LTC NURSING HOMEW/O WALLS (LT SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY LTC NURSING HOMEW/O WALLS (LT SALES REGISTER BILL WEEK ENDING 1/11/13									
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
222977 222978	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CORREA, MARGARI CORREA, MARGARI	6.00 18.00		87.48 262.44	I		
				CUSTOMER	24.00	0.00	349.92			
				CATEGORY	24.00	0.00	349.92			

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	~ —
Bribbs orde	0313	100 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
222979 222980	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	COSTA, ANTOINET COSTA, ANTOINET	4.00 16.00		58.32 233.28	I
222700	1/04/13	000000	VISITING NORSE SERVICE	COSTA, ANTOINET			255.20	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 5	52
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222981	1/04/13	000008	VISITING NURSE SERVICE	COSTA, ARSENE	22.00		320.76	I	
222982	1/04/13	800000	VISITING NURSE SERVICE	COSTA, ARSENE	24.00		349.92	I	
				CUSTOMER	46.00	0.00	670.68		
				CATEGORY	46.00	0.00	670.68		

			YSIDE CITYWIDE				PAGE 1 -	53	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIR	NG 1/11/1	13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLU	US
222983	1/04/13	000008	VISITING NURSE SERVICE	COX, GLORIA	8.75		127.58	Ω	
				CATEGORY	8.75	0.00	127.58		

	01/09/13 IL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUL BILL WEEK ENDING	
				SALES REGISTER			BILL MEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
222984 222985	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	COX, PETRA COX, PETRA	12.00 8.00		174.96 I 116.64 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 55
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			:	SALES REGISTER			BILL WEEK END:	ING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
222986	1/04/13	000008	VISITING NURSE SERVICE	CRAWFORD, CARME	30.00		437.40	I
222987	1/04/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	39.25		572.27	I
				CUSTOMER	69.25	0.00	1,009.67	
				CATEGORY	69.25	0.00	1,009.67	

	TE 01/09/13 JRNL # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	30	.3
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLU	JS
222988	1/04/13	800000	VISITING NURSE SERVICE	CRONIN, MARIE	3.00		43.74	I	
				CATEGORY	3.00	0.00	43.74		

RUN DATE 01/09/2	13 - SUP SUN	NYSIDE CITYWIDE					PAGE 1	_ 5	57
SALES JRNL # 031	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LAD NURSING	HOME V	N/O WALLS LT
			SALES R	EGISTE	E R		BILL WEEK EN	DING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222989 1/04/2	13 000008	VISITING NURSE SERVICE	CDII7	HECTOR	18.00		262.44	т	
222990 1/04/3		VISITING NURSE SERVICE		HECTOR	15.00		218.70	T	
222550 1/01/.	15 000000	VIBITING NORDE BERVICE	CROZ,	-					
				CUSTOMER	33.00	0.00	481.14		
				-					
				CATEGORY	33.00	0.00	481.14		

RUN DATE SALES JRN	- , , -	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 VCP CHOICE L		58
				SALES R	EGISTE	E R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222991	1/04/13	000008	VISITING NURSE SERV	ICE CRUZ,	JUANA	4.00		58.32	I	
222992	1/04/13	800000	VISITING NURSE SERV	ICE CRUZ,	JUANA	16.00		233.28	I	
222993	1/04/13	800000	VISITING NURSE SERV	ICE CRUZ,	LIDIA	7.00		102.06	I	
222994	1/04/13	800000	VISITING NURSE SERV	ICE CRUZ,	LIDIA	18.00		262.44	I	
					CUSTOMER	45.00	0.00	656.10		
					CATEGORY	45.00	0.00	656.10		

RUN DATE 01/0	9/13 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	_ 5	59
SALES JRNL #	0315 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING E	HOMEW/	O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENI	DING	1/11/13
INVOICE# DA'	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222995 1/0	4/13 000008	VISITING NURSE SERVICE	DAMICO, ANGELA	5.00		72.90	I	
222996 1/0	4/13 000008	VISITING NURSE SERVICE	DAMICO, ANGELA	20.00		291.60	I	
222997 1/0	4/13 000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	24.00		349.92	I	
222998 1/0	4/13 000008	VISITING NURSE SERVICE	DANNY, RAMDULAR	32.00		466.56	I	
			CUSTOMER	81.00	0.00	1,180.98		
			CATEGORY	81.00	0.00	1,180.98		

RUN DATE 01/09/13 SALES JRNL # 031	3 - SUP SUNNYSIDE LOC 001 SUNN	CITYWIDE YSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	0 0
SALES URNL # USI:	S LOC UUI SUNN		ALES REGISTER			BILL WEEK END	
INVOICE# DATE	CUST NO CUSTO	MER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
222999 1/04/13 223000 1/04/13		ING NURSE SERVICE	DAVIS, LOUELLEN DAVIS, LOUELLEN	12.00 24.00		174.96 349.92	I I
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGA	- 6 TF CAE	
BALLS OICH	ш н оэтэ	100 001		SALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223001 223002	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- , -	4.00		58.32 116.64	I I	
				CUSTOMER	12.00	0.00	174.96		
				CATEGORY	12.00	0.00	174.96		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	62
			i	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223003	1/04/13	000008	VISITING NURSE SERVICE	DEBAZALAR, ANTO	6.00		87.48 I	
223004	1/04/13	000008	VISITING NURSE SERVICE	,	6.00		87.48 I	
223005	1/04/13	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	11.00		160.38 I	
				CUSTOMER	23.00	0.00	335.34	
				CATEGORY	23.00	0.00	335.34	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 6	53
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223006	1/04/13	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	14.00		204.12	I	
223007	1/04/13	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	24.00		349.92	I	
				CUSTOMER	38.00	0.00	554.04		
				CATEGORY	38.00	0.00	554.04		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI		54
			S A	LES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223008	1/04/13	800000	VISITING NURSE SERVICE	DELOSSANTOS, MA	18.00		262.44	I	
223009	1/04/13	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	12.00		174.96	I	
223010	1/04/13	000008	VISITING NURSE SERVICE	DELPOZO, MIGUEL	16.00		233.28	I	
223011	1/04/13	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	12.00		174.96	I	
223012	1/04/13	800000	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I	
223013	1/04/13	800000	VISITING NURSE SERVICE	DEY, KRISHNA	5.75		83.84	I	
223014	1/04/13	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	12.00		174.96	I	
223015	1/04/13	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	27.00		393.66	I 	
				CUSTOMER	105.75	0.00	1,541.84		
				CATEGORY	105.75	0.00	1,541.84		

			YSIDE CITYWIDE					PAGE 1	-	65
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE		NY	_		LAD NURSING		
				SALES R	EGISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223016	1/04/13	800000	VISITING NURSE SERVICE	DIAZ,	HILDA	12.00		174.96	I	
223017	1/04/13	800000	VISITING NURSE SERVICE	DIAZ,	HILDA	21.00		306.18	I	
					CUSTOMER	33.00	0.00	481.14		
					CATEGORY	33.00	0.00	481.14		

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE	DEC MY MY					56
SALES URNI	L # 0315	TOC 001		REGNY NY ALES REGISTER			VCP CHOICE LI BILL WEEK EN		1/11/13
			5 -		•		2122 112211 2111	221.0	1,11,13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
000010	1 (04 (10						100.06	_	
	1/04/13	000008	VISITING NURSE SERVICE	DIAZ, MARIA				I	
223019	1/04/13	800000	VISITING NURSE SERVICE	DIAZ, MARIA	28.00		408.24	I	
223020	1/04/13	800000	VISITING NURSE SERVICE	DIAZ, OLGA	20.00		291.60	I	
223021	1/04/13	800000	VISITING NURSE SERVICE	DIAZ, OLGA	24.00		349.92	I	
223022	1/04/13	800000	VISITING NURSE SERVICE	DIAZ, ROSA	18.00		262.44	I	
	1/04/13	000008	VISITING NURSE SERVICE	DIAZ, ROSA			349.92	Т	
	1/04/13	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI			349.92	T	
	1/04/13	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI			145.80	Ť	
	1/04/13	000008	VISITING NURSE SERVICE	DOMINGUEZ, MARI			102.06	T	
				•			342.64	± +	
	1/04/13	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI					
	1/04/13	000008	VISITING NURSE SERVICE	DOMINGUEZ-REIN,			58.32	Τ	
223029	1/04/13	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	16.00		233.28	I	
					205 50	0.00	2 006 20		
				CUSTOMER	205.50	0.00	2,996.20		
				CATEGORY	205.50	0.00	2,996.20		

	01/09/13 - L # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOMEW	67 /O WALLS (LT
511225 0144	2 0313	200 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223030 223031	1/04/13	800000	VISITING NURSE SERVICE	•	12.00		174.96 I 306.18 I	
223031	1/04/13	000008	VISITING NURSE SERVICE	DUTAN, SELINDA	21.00		300.18 1	
				CUSTOMER	33.00	0.00	481.14	
				 CATEGORY	33.00	0.00	481.14	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 68	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROG	RAM
			5	SALES REGISTER			BILL WEEK ENDING 1/11/	13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
223032	1/04/13	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	9.00		131.22 I	
							121 00	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			·	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223033	1/04/13	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	15.00		218.70 I	
223034	1/04/13	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	28.00		408.24 I	
				CUSTOMER	43.00	0.00	626.94	
				COBTONER	13.00	0.00	020.91	
				CATEGORY	43.00	0.00	626.94	

RUN DATE 01/09/1 SALES JRNL # 031		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 70 ADU ADULT BILL WEEK ENDING 1	/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
223035 1/04/1 223036 1/04/1		VISITING NURSE SERVICE VISITING NURSE SERVICE	EDELMAN, MILDRE EDELMAN, MILDRE	3.00 12.00		43.74 I 174.96 I	
			CUSTOMER	15.00	0.00	218.70	
			CATEGORY	15.00	0.00	218.70	

١	RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	71
١	SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				5	SALES REGISTER			BILL WEEK ENDING	1/11/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	223037	1/04/13	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
					CATEGORY	4.00	0.00	58.32	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	2
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	E CAR	E PROGRAM
			:	SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
223038	1/04/13	800000	VISITING NURSE SERVICE	,	4.00		58.32	I	
223039	1/04/13	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	16.00		233.28	I	
				CUSTOMER	20.00	0.00	291.60		
				CATEGORY	20.00	0.00	291.60		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 73	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			·	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223040	1/04/13	000008	VISITING NURSE SERVICE	ESPEJO, FLORENC	6.00		87.48 I	
223041	1/04/13	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	18.00		262.44 I	
				CUSTOMER	24.00	0.00	349.92	
				CODICILL	21.00	0.00	317.72	
				CATEGORY	24.00	0.00	349.92	

			TYSIDE CITYWIDE	DEC MY MY			PAGE 1	- 74
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTE	D		ADU ADULT BILL WEEK END:	ING 1/11/13
			5	ALES REGISTE	K		DILL WEEK END.	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
223042	1/04/13	000008	VISITING NURSE SERVICE	ESPIN, CESAR	24.00		349.92	I
223043	1/04/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	32.00		466.56	I
223044	1/04/13	000008	VISITING NURSE SERVICE	ESPINAL, JOSE	5.00		72.90	I
223045	1/04/13	000008	VISITING NURSE SERVICE	ESPINAL, JOSE	15.00		218.70	I
223046	1/04/13	800000	VISITING NURSE SERVICE	ESTADES, MARIA	24.00		349.92	I
223047	1/04/13	800000	VISITING NURSE SERVICE	ESTADES, MARIA	32.00		466.56	I
				CUSTOMER	132.00	0.00	1,924.56	
				CATEGORY	132.00	0.00	1,924.56	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	75 A
				SALES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223048 223049	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		7.00 14.00		102.06 I 204.12 I	
	1,01,13		VIDITING NONDE DERVIOE	CUSTOMER	21.00	0.00	306.18	
				CODIONER	21.00		300.10	
				CATEGORY	21.00	0.00	306.18	

RUN DATE 01/09/13	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	- 76
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK END	ING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
223050 1/04/13	000008	VISITING NURSE SERVICE	FADEN, ROBIN	20.00		291.60	I
223051 1/04/13	800000	VISITING NURSE SERVICE	FADEN, ROBIN	10.00		145.80	I
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 7	7
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA	
			:	SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP	SURPLUS
223052	1/04/13	000008	VISITING NURSE SERVICE	FAMBIATOU, PARA	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUL' BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223053 223054	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	FARO, JOSEPH FARO, JOSEPH	8.75 12.00		127.58 I 174.96 I	
				CUSTOMER	20.75	0.00	302.54	
				CATEGORY	20.75	0.00	302.54	

RUN DATE 01/09/ SALES JRNL # 03			REG NY NY			PAGE 1 - ADU ADULT	79
		:	SALES REGISTER			BILL WEEK ENDI	NG 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223055 1/04/		VISITING NURSE SERVICE	,	3.00		43.74	I
223056 1/04/ 223057 1/04/		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 5.00		87.48 72.90	I I
223058 1/04/	13 000008	VISITING NURSE SERVICE	FAY, JULIA	15.00		218.70	I
			CUSTOMER	29.00	0.00	422.82	
			CATEGORY	29.00	0.00	422.82	

			YSIDE CITYWIDE				PAGE 1 - 8	30
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223059	1/04/13	000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI	24.00		349.92 I	
223060	1/04/13	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	16.00		233.28 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE				11102 1	- 8	
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223061	1/04/13	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	3.00		43.74	I	
223062	1/04/13	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	12.00		174.96	I	
					15.00		010 50		
				CUSTOMER	15.00	0.00	218.70		
				CATEGORY	15.00	0.00	218.70		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		82
511225 0141	2 11 0010	200 001		SALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223063	1/04/13	000008	VISITING NURSE SERVICE	FERNANDEZ, ROSA	4.00		58.32	I	
223064	1/04/13	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	11.25		164.03	I	
223065	1/04/13	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	16.00		233.28	I	
				CUSTOMER	31.25	0.00	455.63		
				CATEGORY	31.25	0.00	455.63		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	33
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223066	1/04/13	000008	VISITING NURSE SERVICE	FERRER, MARIE	9.00		131.22	I	
223067	1/04/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	3.00		43.74	I	
				CUSTOMER	12.00	0.00	174.96		
				COSTONER	12.00	0.00	174.50		
				CATEGORY	12.00	0.00	174.96		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	34
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENI	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223068	1/04/13	000008	VISITING NURSE SERVICE	FIUMARA, ROSE	20.00		291.60	I	
223069	1/04/13	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	24.00		349.92	I	
					44.00	0.00			
				CUSTOMER	44.00	0.00	641.52		
				CATEGORY	44.00	0.00	641.52		

			YSIDE CITYWIDE				11102	- 8	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
			i	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223070	1/04/13	000008	VISITING NURSE SERVICE	FLEITMAN, KLARA	3.00		43.74	I	
223071	1/04/13	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	12.00		174.96	I	
				CUSTOMER	15.00	0.00	218.70		
				CATEGORY	15.00	0.00	218.70		

-	01/09/13 - NL # 0315	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	86
SALES UKI	ип # ОЗІЗ	TOC 001		ALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223072	1/04/13	000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	7.00		102.06	[
223073	1/04/13	800000	VISITING NURSE SERVICE	FOLLETTO, ROSIN	21.00		306.18	Ε
223074	12/28/12	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	5.00		72.90	[
223075	1/04/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	5.00		72.90	[
223076	1/04/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	19.75		287.96	[
				CUSTOMER	57.75	0.00	842.00	
				CATEGORY	 57.75	0.00	842.00	

RUN DATE 0	1/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	37
SALES JRNL	# 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK END	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223077	1/04/13	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	14.00		204.12	I	
223078	1/04/13	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	24.00		349.92	I	
223079	1/04/13	000008	VISITING NURSE SERVICE	FUNES, GEORGINA	15.00		218.70	I	
223080	1/04/13	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	15.00		218.70	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	88
BALLS OICH	ш н оэтэ	100 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223081 223082	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALLINA, VIRGIN GALLINA, VIRGIN	3.00 6.00		43.74 I 87.48 I	
				CUSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 01/09/1	RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 89									
SALES JRNL # 031	.5 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT			
		S	SALES REGISTE:	R		BILL WEEK ENDING	1/11/13			
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS			
223083 1/04/1	3 000008	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32 I				
223084 1/04/1	.3 000008	VISITING NURSE SERVICE	GARAY, ANGELES	12.00		174.96 I				
223085 12/21/1	.2 000008	VISITING NURSE SERVICE	GARCIA, OLGA	6.00		87.48 I				
223086 1/04/1	.3 000008	VISITING NURSE SERVICE	GARCIA, OLGA	6.00		87.48 I				
223087 1/04/1	.3 000008	VISITING NURSE SERVICE	GARCIA, OLGA	24.00		349.92 I				
			CUSTOMER	52.00	0.00	758.16				
			CATEGORY	52.00	0.00	758.16				

			YSIDE CITYWIDE				PAGE 1 - 90	0
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223088	1/04/13	800000	VISITING NURSE SERVICE	GARCIA-VARGAS,	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 91
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223089 12/28/12	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	8.00		116.64 I
223090 1/04/13	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	7.00		102.06 I
223091 1/04/13	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	24.00		349.92 I
			CUSTOMER	39.00	0.00	568.62
			CATEGORY	39.00	0.00	568.62

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	92
SALES OR	ш # ОЭТЭ	100 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223092 223093	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	21.00 28.00		306.18 I 408.24 I	
				CUSTOMER	49.00	0.00	714.42	
				CATEGORY	49.00	0.00	714.42	

	01/09/13 - IL # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 9 LTC NURSING HOMEW/	
				S A L E S R E G I S T E R			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223094	1/04/13	800000	VISITING NURSE SERVICE	·	21.00		306.18 I	
223095	1/04/13	000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	26.75		390.02 I	
				CUSTOMER	47.75	0.00	696.20	
				CATEGORY	47.75	0.00	696.20	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_ 9	94
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	E CAR	RE PROGRAM
				SALES REGISTER			BILL WEEK END	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223096	1/04/13	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	24.00		349.92	I	
223097	1/04/13	800000	VISITING NURSE SERVICE		24.00		349.92	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	95
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223098	1/04/13	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	14.50		211.41 I	
1				CATEGORY	14.50	0.00	211.41	

RUN DATE 0	1/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRNL	# 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	ALES REGISTER			BILL WEEK ENDING	3 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223099	1/04/13	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	7.00		102.06 I	
223100	1/04/13	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	21.00		306.18 I	
223101	1/04/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	13.00		189.54 I	
223102	1/04/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	15.00		218.70 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	 56.00	0.00	816.48	

RUN DATE 01/09/13 SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 9 VCP CHOICE LHCSA BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223103	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GONGORA, MARUJA GONZALEZ, CARLO GONZALEZ, DOLOR GONZALEZ, DOLOR	4.00 12.00 7.00 28.00		58.32 I 174.96 I 102.06 I 408.24 I	
			CUSTOMER	51.00	0.00	743.58	
			CATEGORY	51.00	0.00	743.58	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223107 223108 223109 223110	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GONZALEZ, ELBA GONZALEZ, ELBA GOVERDOVSKIY, N GOVERDOVSKIY, N	5.00 19.75 6.00 6.00		72.90 I 287.96 I 87.48 I 87.48 I	
				CUSTOMER	36.75	0.00	535.82	
				CATEGORY	36.75	0.00	535.82	

RUN DATE 01/0	09/13 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	99
SALES JRNL #	0315 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
		S	A L E S R E G I S T E R			BILL WEEK ENDIN	G 1/11/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223111 1/0	04/13 000008	VISITING NURSE SERVICE	GOYES, ELBA	4.00		58.32 I	
223112 1/0	04/13 000008	VISITING NURSE SERVICE	GOYES, ELBA	16.00		233.28 I	
223113 1/0	04/13 000008	VISITING NURSE SERVICE	GRAVER, EDNA	8.00		116.64 I	
223114 1/0	04/13 000008	VISITING NURSE SERVICE	GRAVER, EDNA	32.00		466.56 I	
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

			YSIDE CITYWIDE				PAGE 1 - 100	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 1/11/1	L 3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
223115	1/04/13	000008	VISITING NURSE SERVICE	GREENBAUM, MASA	11.50		167.67 I	
223116	1/04/13	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	21.00		306.18 I	
				CUSTOMER	32.50	0.00	473.85	
				COSTONER	32.30	0.00	473.03	
				CATEGORY	32.50	0.00	473.85	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LAA LOMBARDI	- 10	
SALES URN	П # 0313	LOC UUI		SALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223117 223118	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		21.00 20.75		306.18 302.54	I T	
223110	1/01/13	000000	VIBILING NORDE BERVICE	·					
				CUSTOMER	41.75	0.00	608.72		
				CATEGORY	41.75	0.00	608.72		

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 102	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
				S A L E S R E G I S T E R			BILL WEEK END	ING 1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
223119	1/04/13	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	36.00		524.88	I	
223120	1/04/13	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	48.00		699.84	I	
223121	1/04/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	35.50		517.60	I	
223122	1/04/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	36.00		524.88	I	
				CUSTOMER	155.50	0.00	2,267.20		
				CATEGORY	155.50	0.00	2,267.20		

RUN DATE 01/09/13 - SALES JRNL # 0315		SIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	103 MEW/O WALLS (LT
SALES URIL # USIS	TOC 001		SALES REGISTER			BILL WEEK ENDI	· ·
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223123 12/28/12	7 800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	40.00		583.20	I
223124 1/04/13		VISITING NURSE SERVICE	,	16.00		233.28	I
223125 1/04/13	7 800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	24.00		349.92	I
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC MY MY			PAGE 1 - 104	
SALES URN.	г # 0312	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 1/	11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
223126	1/04/13	800000	VISITING NURSE SERVICE	HARRISON, GLORI	15.50		225.99 I	
					15 50			
				CATEGORY	15.50	0.00	225.99	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	5
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
				SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ГҮР	SURPLUS
223127	1/04/13	000008	VISITING NURSE SERV	ICE HARRISON, GLORI	22.25		324.41	I	
223128	1/04/13	800000	VISITING NURSE SERV	ICE HENAO, VICTORIA	8.00		116.64	I	
223129	1/04/13	800000	VISITING NURSE SERV	ICE HENAO, VICTORIA	16.00		233.28	I	
223130	1/04/13	000008	VISITING NURSE SERV	ICE HENDY, BERNICE	3.00		43.74	I	
223131	1/04/13	800000	VISITING NURSE SERV	ICE HENDY, BERNICE	11.00		160.38	I	
				CUSTOMER	60.25	0.00	878.45		
				CATEGORY	60.25	0.00	878.45		

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	06
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223132	1/04/13	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	24.00		349.92 I	
223133	1/04/13	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	32.00		466.56 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

_	01/09/13 NL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	107
SALES UK	TMT # 0212	TOC 001		ALES REGISTER			BILL WEEK ENDIN	
			_					_,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
223134	10/26/12	000008	VISITING NURSE SERVICE	HERNANDEZ, JUAN	6.00		87.48	Г
223131	12/14/12	000008	VISITING NURSE SERVICE	HERNANDEZ, JUAN	12.00		174.96	<u>-</u> Γ
223136	1/04/13	000008	VISITING NURSE SERVICE	HERNANDEZ, JUAN	24.00		349.92	Ī
223137	12/28/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	12.00		174.96	Ι
223138	1/04/13	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	12.00		174.96	Ι
223139	1/04/13	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	15.75		229.64	Ι
				CUSTOMER	81.75	0.00	1,191.92	
				CATEGORY	81.75	0.00	1,191.92	

RUN DATE 01/0	9/13 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 108	
SALES JRNL #	0315 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT	
		\$	SALES REGISTER			BILL WEEK EN	DING 1/11/13	
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
223140 1/0	4/13 000008	VISITING NURSE SERVICE	HERRERA, ANGELA	6.00		87.48	I	
223141 1/0	14/13 000008	VISITING NURSE SERVICE	HERRERA, ANGELA	24.00		349.92	I	
			CUSTOMER	30.00	0.00	437.40		
			COSTOMER	30.00	0.00	137.10		
			CATEGORY	30.00	0.00	437.40		

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10	9
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W	O WALLS LT
		5	SALES REGISTE:	R		BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223142 12/28/12	000008	VISITING NURSE SERVICE	HERRERA, CLARA	3.00		43.74 I	
223143 1/04/13	000008	VISITING NURSE SERVICE	HERRERA, CLARA	4.00		58.32 I	
223144 1/04/13	800000	VISITING NURSE SERVICE	HERRERA, CLARA	8.00		116.64 I	
			CUSTOMER	15.00	0.00	218.70	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 110
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		\$	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223145 12/28/12	000008	VISITING NURSE SERVICE	HERRERA, HORACI	8.00		116.64 I
223146 1/04/13	800000	VISITING NURSE SERVICE	HERRERA, HORACI	23.00		335.34 I
223147 1/04/13	800000	VISITING NURSE SERVICE	HERRERA, HORACI	11.50		167.67 I
			CUSTOMER	42.50	0.00	619.65
			CATEGORY	42.50	0.00	619.65

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223148 223149 223150	1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HUDSON, JANETTE	3.00 3.00 12.00		43.74 43.74 174.96	I I I	
				CUSTOMER	18.00	0.00	262.44		
				CATEGORY	18.00	0.00	262.44		

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 112 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, ·-	12.00 28.00		174.96 I 408.24 I
				CUSTOMER	40.00	0.00	583.20
				CATEGORY	40.00	0.00	583.20

			TYSIDE CITYWIDE					L13
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223153	12/28/12	000008	VISITING NURSE SERVICE	HUSSAIN, AHMED	20.00		291.60 I	
223154	1/04/13	800000	VISITING NURSE SERVICE	HUSSAIN, AHMED	4.00		58.32 I	
223155	1/04/13	800000	VISITING NURSE SERVICE	HUSSAIN, AHMED	13.00		189.54 I	
223156	12/28/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	16.00		233.28 I	
223157	1/04/13	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	4.00		58.32 I	
223158	1/04/13	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	4.00		58.32 I	
				CUSTOMER	61.00	0.00	889.38	
				CATEGORY	61.00	0.00	889.38	

RUN DATE 01/09/13 SALES JRNL # 0315		IDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 114 ADU ADULT	
BILLID SIGNE USIS	100 001 .		SALES REGISTER			BILL WEEK ENDING 1/11/13	
INVOICE# DATE	CUST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
223159 1/04/13 223160 1/04/13		ISITING NURSE SERVICE	INNISS, CARMEN INNISS, CARMEN	4.00 12.00		58.32 I 174.96 I	
			CUSTOMER	16.00	0.00	233.28	
			CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY SALES REGISTER			-	115 IDS ADULT POPUL NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223161 223162	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		17.00 20.50		247.86 298.90	I I
				CUSTOMER	37.50	0.00	546.76	
				CATEGORY	 37.50	0.00	 546.76	

			YSIDE CITYWIDE				-	116
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
223163	1/04/13	000008	VISITING NURSE SERVICE	INSERRA, CATHER	21.00		306.18 I	
223164	1/04/13	800000	VISITING NURSE SERVICE	INSERRA, CATHER	27.25		397.31 I	
				CUSTOMER	48.25	0.00	703.49	
				CATEGORY	48.25	0.00	703.49	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE BILL WEEK ENDI	CARE PROGRAM
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223165 223166 223167	1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JACKSON, REGINA	3.00 3.00 3.00		43.74 43.74 43.74	I I
				CUSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 01/09/ SALES JRNL # 03		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 118 LTC NURSING HOMEW/O WA BILL WEEK ENDING 1/1	ALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
223168 1/04/ 223169 1/04/		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	14.00 16.00		204.12 I 233.28 I	
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	.9
SALES JRN	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	ICSA	
			S	REG NY NY A L E S R E G I S T E R			BILL WEEK ENI	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223170	1/04/13	800000	VISITING NURSE SERVICE	JAMES, DAVINA	9.75		142.16	I	
223171	1/04/13	800000	VISITING NURSE SERVICE	JAMES, DAVINA	15.00		218.70	I	
223172	1/04/13	800000	VISITING NURSE SERVICE	JAMISON, BESSIE	4.00		58.32	I	
223173	1/04/13	800000	VISITING NURSE SERVICE	JAMISON, BESSIE	8.00		116.64	I	
223174	12/21/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I	
223175	12/28/12	000008	VISITING NURSE SERVICE	JARAMILLO PAL,			174.96	I	
223176	1/04/13	000008	VISITING NURSE SERVICE	JARAMILLO PAL,			58.32	I	
223177	1/04/13	000008	VISITING NURSE SERVICE	JARAMILLO PAL,			116.64	Ī	
223178	1/04/13	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE				I	
223179	1/04/13	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE			641.52	T	
223180	1/04/13	000008	VISITING NURSE SERVICE	JHAVERI, RAMESH			116.64	T	
223181	1/04/13	000008	VISITING NURSE SERVICE	JHAVERI, RAMESH			233.28	T	
223101	1/01/13	00000	VIBITING NORDE BERVICE						
				CUSTOMER	172.50	0.00	2,515.06		
				CODIONER	1,2.50	0.00	2,313.00		
				CATEGORY	172.50	0.00	2,515.06		
1				CAILGORI	1/2.50	0.00	2,313.00		

RUN DATE SALES JRN			TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUI BILL WEEK ENDING	T
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223182 223183	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	JIANNARAS, ANNA JIANNARAS, ANNA	29.75 30.00		433.76 I 437.40 I	
				CUSTOMER	59.75	0.00	871.16	
				CATEGORY	59.75	0.00	 871.16	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 - 121
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223184 223185	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	6.00 18.00		87.48 I 262.44 I
				CUSTOMER	24.00	0.00	349.92
				CATEGORY	24.00	0.00	349.92

RUN DATE SALES JRN		- SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 122 ADU ADULT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223186	1/04/13	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	12.00		174.96 I
				CATEGORY	12.00	0.00	 174.96

RUN DATE 01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 123
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK END	ING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
223187 12/28/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	6.00		87.48	I
223188 1/04/13	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	18.00		262.44	I
223189 1/04/13	800000	VISITING NURSE SERVICE	JORRIN, HORTENS	12.00		174.96	I
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

	ATE 01/09/13 JRNL # 0315			REG NY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223190	1/04/13	800000	VISITING NURSE SERVICE	KATCHMER, JOYCE	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 01/09/13 - SALES JRNL # 0315	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 12 VCP CHOICE LHCSA BILL WEEK ENDING	25 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223191 12/28/12 223192 1/04/13 223193 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SARD KAUR, SARD KAUR, SARD	1.00 1.00 4.00		14.58 I 14.58 I 58.32 I	
			CUSTOMER	6.00	0.00	87.48	
			CATEGORY	6.00	0.00	87.48	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 12	26
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	Y			ADU ADULT		
			5	SALES RE	GISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERI	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223194	1/04/13	000008	VISITING NURSE SERVICE	KAUR, S	SHARAN	24.00		349.92	I	
223195	1/04/13	800000	VISITING NURSE SERVICE	KAUR, S	SHARAN	31.50		459.27	I	
				(CUSTOMER	55.50	0.00	809.19		
				(CATEGORY	55.50	0.00	809.19		

			YSIDE CITYWIDE				PAGE 1 - 1	.27
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223196	1/04/13	800000	VISITING NURSE SERVICE	KHAN, MARGARET	13.50		196.83 I	
				CATEGORY	13.50	0.00	196.83	

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	28
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223197	12/14/12	800000	VISITING NURSE SERVICE	KILIMLIAN, PEPR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 - 129	
SALES JRN	г # 0312	TOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 1/11/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	S
223198	1/04/13	800000	VISITING NURSE SERVICE	KNOWLES, ANAMAR	8.00		116.64 I	
				CATECODY			116 64	_
				CATEGORY	8.00	0.00	116.64	

-			IYSIDE CITYWIDE	DEC NY NY			PAGE 1		30
SALES UK	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		1/11/13
			۵	ALES KEGISIEK	-		DITT MEEK ENT	JING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223199	1/04/13	800000	VISITING NURSE SERVICE	KOSTIKIAN, MARI	15.00		218.70	I	
223200	1/04/13	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	24.00		349.92	I	
223201	1/04/13	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	31.00		451.98	I	
223202	12/21/12	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	8.00		116.64	I	
223203	1/04/13	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	24.00		349.92	I	
223204	1/04/13	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	31.25		455.63	I	
				CHCHOMED	122 25	0.00	1 040 70		
				CUSTOMER	133.25	0.00	1,942.79		
				CATEGORY	133.25	0.00	1,942.79		

			YSIDE CITYWIDE				PAGE 1 - 1	31
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223205	1/04/13	000008	VISITING NURSE SERVICE	LASAK, MICHAEL	3.00		43.74 I	
223206	1/04/13	800000	VISITING NURSE SERVICE	LASAK, MICHAEL	6.00		87.48 I	
223207	1/04/13	000008	VISITING NURSE SERVICE	LAWRENCE, NANCY	2.00		29.16 I	
223208	1/04/13	800000	VISITING NURSE SERVICE	LAWRENCE, NANCY	4.00		58.32 I	
				CUSTOMER	15.00	0.00	218.70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY S A L E S R	NY EGISTE	I R		PAGE 1 LTC NURSING BILL WEEK EN	HOMEW	32 /O WALLS (LT 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223209 223210	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	KATHLEEN KATHLEEN	8.00 14.00		116.64 204.12	I I	
					CUSTOMER	22.00	0.00	320.76		
					CATEGORY	22.00	0.00	320.76		

			YSIDE CITYWIDE				PAGE 1 -	133
SALES JRNL	# 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTE	}		BILL WEEK ENDI	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223211	1/04/13	800000	VISITING NURSE SERVICE	LEE, MIRIAM G	2.00		29.16	I
223212	1/04/13	800000	VISITING NURSE SERVICE	LEE, MIRIAM G	6.00		87.48	I
				 CUSTOMER	8.00	0.00	116.64	
				COBTOLLER	0.00	0.00	110.01	
				CATEGORY	8.00	0.00	116.64	

	01/09/13 - L # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 134 LTC NURSING HOMEW/O	
	_			SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223213 223214	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	4.00		58.32 I 58.32 I	
	, - , -			CUSTOMER	8.00	0.00	116.64	
				CATEGORY	8.00	0.00	116.64	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY A L E S R E G I S T E R			PAGE 1 VCP CHOICE L BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223217 223218 223219 223220	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LEWIS, CATHERIN LITSAS, MARTHA LITSAS, MARTHA	24.00 32.00 5.00 13.50		349.92 466.56 72.90 196.83	I I I	
				CUSTOMER	74.50	0.00	1,086.21		
				CATEGORY	74.50	0.00	1,086.21		

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13	7
SALES JR	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK END	DING	1/11/13
T1770 T GT		G11GE 310	GUGEOVED MANE	2552254	*******		3340173777		G11D D1 11G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223221	1/04/13	000008	VISITING NURSE SERVIC	E LOCORRIERE, JOS	8.00		116.64	т	
223222	1/04/13	000008	VISITING NURSE SERVIC	,	24.00		349.92	T	
223223	11/16/12	000008	VISITING NURSE SERVIC	,	6.00		87.48	T	
223223	11/30/12	000008	VISITING NURSE SERVIC	*	6.00		87.48	<u>+</u>	
	, ,			'				Τ.	
223225	1/04/13	800000	VISITING NURSE SERVIC	E LOGAN, ADELE	12.00		174.96	I	
223226	1/04/13	800000	VISITING NURSE SERVIC	E LOGAN, ADELE	24.00		349.92	I	
				CILCHOMED		0.00	1 166 40		
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	138
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
223227	1/04/13	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	29.50		430.11 I	
223228	1/04/13	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	39.25		572.27 I	
				CUSTOMER	68.75	0.00	1,002.38	
				CATEGORY	68.75	0.00	1,002.38	

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 139
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223229 12/21/12	000008	VISITING NURSE SERVICE	LONDONO, MARIA	6.00		87.48 I
223230 1/04/13	800000	VISITING NURSE SERVICE	LONDONO, MARIA	12.00		174.96 I
223231 1/04/13	800000	VISITING NURSE SERVICE	LONDONO, MARIA	24.00		349.92 I
			CUSTOMER	42.00	0.00	612.36
			CATEGORY	42.00	0.00	612.36

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 140	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING 1/	11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
223232	1/04/13	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	10.00		145.80 I	
223233	1/04/13	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	20.00		291.60 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				CCL CONGREGA		RE PROGRAM
				SALES REC	GISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEREI	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223234	1/04/13	000008	VISITING NURSE SERVICE	LUCES, I		7.50		109.36	I	
223235 223236	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LYMN, AN LYMN, AN	-	20.00 27.00		291.60 393.66	I	
	_, ,			,						
				Ct	USTOMER	54.50	0.00	794.62		
				CA	ATEGORY	54.50	0.00	794.62		

RUN DATE 01/0 SALES JRNL #	09/13 - SUP SUNN 0315 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1	42
SALES URILL #	0313 LOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	04/13 000008 04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MACCHIA, CATHY MACCHIA, CATHY	21.00 15.00		306.18 I 218.70 I	
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	 524.88	

	01/09/13 - L # 0315	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 143 CCL CONGREGATE CARE	DROGRAM
BALLS OIGN	1L # 0313	HOC 001		SALES REGISTER				1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
223239 223240	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	12.00 18.00		174.96 I 262.44 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	14
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			:	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223241	1/04/13	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	36.00		524.88	I	
223242	1/04/13	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	48.00		699.84	I	
				CUSTOMER	84.00	0.00	1,224.72		
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATI BILL WEEK END	E CARE PROG	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPL	LUS
223243 223244	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, .=	4.00 20.00		58.32 291.60	I I	
				CUSTOMER	24.00	0.00	349.92		
				CATEGORY	24.00	0.00	349.92		

RUN DATE (01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	146
SALES JRNI	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223245	12/28/12	000008	VISITING NURSE SERVI	CE MALDONADO, DOMI	12.00		174.96 I	
223246	1/04/13	800000	VISITING NURSE SERVI	CE MALDONADO, MARI	4.25		61.97 I	
223247	1/04/13	800000	VISITING NURSE SERVI	CE MALDONADO, MARI	15.00		218.70 I	
223248	1/04/13	800000	VISITING NURSE SERVI	CE MANGAN, JOHN	4.00		58.32 I	
223249	1/04/13	800000	VISITING NURSE SERVI	CE MANGAN, JOHN	16.00		233.28 I	
				CUSTOMER	51.25	0.00	747.23	
				CATEGORY	51.25	0.00	747.23	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	17
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	IOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223250	1/04/13	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	21.00		306.18	I	
223251	1/04/13	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	28.00		408.24	I	
				CHOMOMED	40.00		714 40		
				CUSTOMER	49.00	0.00	714.42		
				CATEGORY	49.00	0.00	714.42		

-	. 01,00,10		YSIDE CITYWIDE				PAGE 1		18
SALES JR	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	SALES REGISTER			BILL WEEK END	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223252	1/04/13	000008	VISITING NURSE SERVICE	MARINO, ANN	7.00		102.06	I	
223253	1/04/13	000008	VISITING NURSE SERVICE	MARINO, ANN	14.00		204.12	I	
223254	12/21/12	000008	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50	I	
223255	12/28/12	000008	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50	I	
223256	1/04/13	000008	VISITING NURSE SERVICE	MARMOL ESPINAL,	5.00		72.90	I	
223257	1/04/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	20.00		291.60	I	
				CUSTOMER	96.00	0.00	1,399.68		
				CATEGORY	96.00	0.00	1,399.68		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING	- 14 HOMEW/	
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223258	1/04/13	800000	VISITING NURSE SERVICE	- ,	14.50		211.42	I	
223259	1/04/13	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	28.00		408.24		
				CUSTOMER	42.50	0.00	619.66		
				 CATEGORY		0.00	619.66		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 15	0
SALES UKN	ш # ОЭТЭ	LOC 001		SALES REGISTER			BILL WEEK ENI	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223260 223261	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ ' '	3.00 6.00		43.74 87.48	I I	
				CUSTOMER	9.00	0.00	131.22		
				CATEGORY	9.00	0.00	131.22		

RUN DATE 01/09 SALES JRNL # 0		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC: BILL WEEK ENDII	SA
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223262 1/04 223263 1/04 223264 1/04	/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTE, JOSE MARTINEZ, CAMIL MARTINEZ, CAMIL	4.00 3.00 12.00		58.32 43.74 174.96	I I I
			CUSTOMER	19.00	0.00	277.02	
			CATEGORY	19.00	0.00	277.02	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 15 CCL CONGREGATE CAR	E PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223265 223266	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, ELENA MARTINEZ, ELENA	30.00		437.40 I 437.40 I	
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
SALES UKN	т # 0313	TOC 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
223267	1/04/13	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	6.00		87.48	I
223268	1/04/13	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	24.00		349.92	I
223269	1/04/13	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	5.75		83.84	I
223270	1/04/13	000008	VISITING NURSE SERVICE	MARTINEZ, MARTA	17.75		258.80	I
223271	1/04/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	24.75		521.24	I
223272	1/04/13	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	15.00		699.84	I
				CUSTOMER	93.25	0.00	2,001.12	
				CATEGORY	93.25	0.00	2,001.12	

RUN DATE 01/09/3 SALES JRNL # 033			REG NY NY			PAGE 1 - 154 LTC NURSING HOMEW/O WALLS (LT
SALES URNL # US.	.5 LOC 001		SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223273 1/04/3 223274 1/04/3		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	14.00 24.00		204.12 I 349.92 I
			CUSTOMER	38.00	0.00	554.04
			CATEGORY	38.00	0.00	 554.04

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 155 VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
223275 223276	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MATOS, ROSA MATOS, ROSA	17.75 24.00		258.80 I 349.92 I	
223270	1/01/15	000000	VIDITING NORDE BERVICE	·			608.72	
				CUSTOMER	41.75	0.00	608.72	
				CATEGORY	41.75	0.00	608.72	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC MY MY				- 15	56
SALES UKN	г # 0312	TOC 001		REG NY NY A L E S R E G I S T E R	,		ADU ADULT BILL WEEK ENI	TNC	1/11/13
			5	ALES KEGISIEN	-		DILL WEEK ENI	JING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223277	1/04/13	800000	VISITING NURSE SERVICE	MAZZONE, FRANCE	27.00		393.66	I	
223278	1/04/13	800000	VISITING NURSE SERVICE	MAZZONE, FRANCE	27.00		393.66	I	
223279	1/04/13	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	72.00		1,049.76	I	
223280	1/04/13	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	96.00		1,399.68	I	
223281	1/04/13	800000	VISITING NURSE SERVICE	MCCULLAGH, UNA	15.00		218.70	I	
223282	1/04/13	800000	VISITING NURSE SERVICE	MCCULLAGH, UNA	28.00		408.24	I	
				CUSTOMER	265.00	0.00	3,863.70		
				CATEGORY	265.00	0.00	3,863.70		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 157	
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223283	1/04/13	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	24.00		349.92 I	
223284	1/04/13	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	32.00		466.56 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 01, SALES JRNL	/09/13 - SUP SUNN # 0315 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	58
SALES UNIL 1	# 0313 LOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	/04/13 000008 /04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MEGALOUDIS, CAR MEGALOUDIS, CAR	3.00 5.00		43.74 I 72.90 I	
223200 1,	, 01, 15	VIGITING NONED BENVIOL	CUSTOMER	8.00	0.00	116.64	
			CATEGORY	8.00	0.00	116.64	

RUN DATE 01/09/13 - SALES JRNL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	L59
		S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223287 12/28/12	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	6.00		87.48 I	
223288 1/04/13	000008	VISITING NURSE SERVICE	,	3.00		43.74 I	
223289 1/04/13	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	6.00		87.48 I	
			CUSTOMER	15.00	0.00	218.70	
			CATEGORY	15.00	0.00	218.70	

RUN DATE 01/09/13 - SALES JRNL # 0315	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		PAGE 1 - 160 ADU ADULT
		SALES REGISTER		BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
223290 11/02/12	000008 VISITING NURSE SERVICE	MEJIA, CLAUDIO	7.00	102.06 I
		CATEGORY	7.00 0.00	102.06

	01/09/13 JL # 0315	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 16	51
DALLES OR	иш # ОЭТЭ	100 001		SALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223291	1/04/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	13.75		200.48	I	
223292	1/04/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	7.00		102.06	I	
223293	1/04/13	800000	VISITING NURSE SERVICE	MEJIA, DINORAH	19.25		280.67	I	
223294	12/28/12	800000	VISITING NURSE SERVICE	MEJIA, MARINA	8.00		116.64	I	
223295	1/04/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	8.00		116.64	I	
223296	1/04/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	16.00		233.28	I	
				CUSTOMER	72.00	0.00	1,049.77		
				CATEGORY	72.00	0.00	1,049.77		

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 162
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		Ş	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223297 12/21/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	8.00		116.64 I
223298 1/04/13	800000	VISITING NURSE SERVICE	MEJIA, ROSA	7.00		102.06 I
223299 1/04/13	800000	VISITING NURSE SERVICE	MEJIA, ROSA	30.25		441.05 I
			CUSTOMER	45.25	0.00	659.75
			CATEGORY	45.25	0.00	659.75

RUN DATE 01 SALES JRNL		SUP SUNNY LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	163 IG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	, - , -	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	17.25 24.00		251.51 1 349.92 1	
				CUSTOMER	41.25	0.00	601.43	
				CATEGORY	41.25	0.00	601.43	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	4
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W	/O WALLS LT
				SALES REGISTER	2		BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223302	1/04/13	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	1.00		14.58 I	
223303	1/04/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	10.00		145.80 I	
				CUSTOMER	11.00	0.00	160.38	
				000101111	11.00	0.00	200.50	
				CATEGORY	11.00	0.00	160.38	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	15.00 12.00		218.70 174.96	I I	
				CUSTOMER	27.00	0.00	393.66		
				CATEGORY	27.00	0.00	393.66		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 16 ADU ADULT	6
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223306	1/04/13	800000	VISITING NURSE SERVICE	MENYHERT, YAE	3.00		43.74 I	
				CATEGORY				
1				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 16	57
SALES UKN	ш # ОЭТЭ	HOC 001		ALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223307	1/04/13	800000	VISITING NURSE SERVICE	MIRANDA, LUIS	6.00		87.48	I	
223308	1/04/13	800000	VISITING NURSE SERVICE	MIRANDA, LUIS	24.00		349.92	I	
223309	1/04/13	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	9.00		131.22	I	
223310	1/04/13	800000	VISITING NURSE SERVICE	MONTOYA, ROSALB	4.00		58.32	I	
223311	1/04/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	15.00		218.70	I	
223312	1/04/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	15.00		218.70	I	
				CUSTOMER	73.00	0.00	1,064.34		
				CATEGORY	73.00	0.00	1,064.34		

RUN DATE 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	168
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223313 12/07/12	000008	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		87.48 I	
			·				
223314 12/21/12	000008	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		87.48 I	
223315 1/04/13	000008	VISITING NURSE SERVICE	MORALES, ANGELI	18.00		262.44 I	
223316 1/04/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	18.00		262.44 I	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	
			CALEGORY	48.00	0.00	699.84	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 169
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WALLS LT
			:	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223317	1/04/13	000008	VISITING NURSE SERVICE	MORALES, CARMEN	5.00		72.90 I
223318	1/04/13	000008	VISITING NURSE SERVICE	•	20.00		291.60 I
				CUSTOMER	25.00	0.00	364.50
				CATEGORY	25.00	0.00	364.50

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 170	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 1/	11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
223319	1/04/13	800000	VISITING NURSE SERVICE	MULLER, ROBERT	15.00		218.70 I	
223320	1/04/13	800000	VISITING NURSE SERVICE	NAGY, GEORGE	18.00		262.44 I	
223321	1/04/13	800000	VISITING NURSE SERVICE	NAGY, GEORGE	27.00		393.66 I	
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

			YSIDE CITYWIDE				PAGE 1	- 17	71
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
			·	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223322	1/04/13	000008	VISITING NURSE SERVICE	NAVARRO, MARIA	4.00		58.32	I	
223323	1/04/13	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	12.00		174.96	I	
				CUSTOMER	16.00	0.00	233.28		
					16.00	0.00	222 20		
				CATEGORY	16.00	0.00	233.28		

RUN DATE 01/09/13 SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REG NY NY SALES REG	SISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFEREN	ICE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223324 1/04/13 223325 1/04/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	•		20.75 27.50		302.54 400.96	I	
			CU	JSTOMER	48.25	0.00	703.50		
			CA	 ATEGORY	48.25	0.00	703.50		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223326 223327	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		27.00 35.00		393.66 510.30	I I
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

RUN DATE 01 SALES JRNL	L/09/13 - SUI		DE CITYWIDE JNNYSIDE CITYW	VIDE REG 1	IY NY				PAGE 1 VCP CHOICE L	- 17	4
DALLS UNIL	# 0313 100	C 001 50	JUNIOIDE CITIW	SALES		ISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE CUS	ST NO CUS	STOMER NAME		REFERENC	CE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
			SITING NURSE S		NIEVES, N		30.00		437.40 58.32	I T	
			SITING NURSE S		NINO, CAR		15.50		225.99	Ī	
					CUS	STOMER	49.50	0.00	721.71		
					CAT	TEGORY	49.50	0.00	721.71		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	5
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223331	1/04/13	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	15.00		218.70 I	
223332	1/04/13	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	6.00		87.48 I	
223333	1/04/13	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	21.75		317.12 I	
					40. 55			
				CUSTOMER	42.75	0.00	623.30	
				CATEGORY	42.75	0.00	623.30	

DIM DATE	01/00/12	CIID CIININ	YSIDE CITYWIDE				PAGE 1	- 17	16
	NL # 0315			DEC MY MY			-		0
SALES UK	иг # 0312	LOC OUT	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		
			S	ALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223334	1/04/13	800000	VISITING NURSE SERVICE	NOGUE, FIDELINA	12.00		174.96	I	
223335	1/04/13	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	16.00		233.28	I	
223336	1/04/13	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	23.00		335.34	T	
223337	12/21/12	000008	VISITING NURSE SERVICE	OCHOA, LUIS	7.00		102.06	T	
223337	12/28/12	000008	VISITING NORSE SERVICE	OCHOA, LUIS	28.00		408.24	<u>+</u>	
	, -,			,					
223339	1/04/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	15.00		218.70	I	
223340	1/04/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	13.75		200.48	I	
				CUSTOMER	114.75	0.00	1,673.06		
				CATEGORY	114.75	0.00	1,673.06		
1				CATEGORI	111.75	0.00	1,0/3.00		

			YSIDE CITYWIDE				PAGE 1 - :	= : :
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			LTC NURSING HOME	· ·
								, , -
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223341	1/04/13	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	14.00		204.12 I	
				CATEGORY	14.00	0.00	204.12	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	178		
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA			
				SALES REGISTER			BILL WEEK ENDIN	G 1/11/13		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS		
223342	1/04/13	000008	VISITING NURSE SERVICE	ORNANO, BOLIVAR	4.00		58.32 I			
223343	1/04/13	800000	VISITING NURSE SERVICE	ORNANO, BOLIVAR	12.00		174.96 I			
223344	1/04/13	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	6.00		87.48 I			
223345	1/04/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	7.75		113.00 I			
223346	1/04/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	29.00		422.82 I			
				CUSTOMER	58.75	0.00	856.58			
				CATEGORY	58.75	0.00	856.58			

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.79
511225 0141	2 0313	200 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223347 223348	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PAOLONI, MARY PAOLONI, MARY	3.00 6.00		43.74 I 87.48 I	
				CUSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE	REGNY NY ALES REGISTER			PAGE 1	- 18	80
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	ALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
000040	1 (04 (12	000000		D. D. G. T	10.00		145 00	-	
223349	1/04/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	10.00		145.80	Τ_	
223350	1/04/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	40.00		583.20	Τ_	
223351	1/04/13	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48	Τ_	
223352	1/04/13	000008	VISITING NURSE SERVICE	PARETTI, MARIE	16.00		233.28	Ţ	
223353	1/04/13	000008	VISITING NURSE SERVICE	PARETITI, MARIE	31.75		462.92	Ţ	
223354	1/04/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA	6.00		87.48	Ţ	
223355	1/04/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA	12.00		174.96	I	
223356	1/04/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	5.00		72.90	Ţ	
223357	1/04/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	5.00		72.90	Ţ	
223358	12/21/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06	Ţ	
223359	12/28/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06	I	
223360	1/04/13	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	21.00		306.18	I	
223361	1/04/13	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	28.00		408.24	I	
223362	1/04/13	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	6.00		87.48	I	
223363	1/04/13	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	24.00		349.92	I	
223364	1/04/13	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	6.00		87.48	I	
223365	1/04/13	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	18.00		262.44	I	
223366	1/04/13	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	21.50		313.47	I	
223367	1/04/13	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	32.00		466.56	I	
223368	1/04/13	800000	VISITING NURSE SERVICE	PIZARRO, BARBAR	4.00		58.32	I	
223369	1/04/13	800000	VISITING NURSE SERVICE	PLACIDO, GENARO	9.25		134.87	I	
223370	1/04/13	800000	VISITING NURSE SERVICE	PLACIDO, GENARO	8.00		116.64	I	
223371	1/04/13	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	11.50		167.68	I	
223372	1/04/13	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	13.00		189.54	I	
223373	1/04/13	800000	VISITING NURSE SERVICE	POGGI, EMERITA	12.00		174.96	I	
223374	1/04/13	800000	VISITING NURSE SERVICE	POGGI, EMERITA	17.75		258.80	I	
				PAPAZIAN, MANNI PAPAZIAN, MANNI PAPOUTSIS, MARY PARETTI, MARIE PARETTI, MARIE PENA, VICTORIA PENA, VICTORIA PENAGOS, MARIA PENAGOS, MARIA PEREZ MONSER, C PEREZ MONSER, C PEREZ MONSER, C PEREZ MONSER, C PEREZ, GLADYS PEREZ, GLADYS PEREZ, JOAQUIN PEREZ, JOAQUIN PHILIPPS, MARY PHILIPPS, MARY PHILIPPS, MARY PIZARRO, BARBAR PLACIDO, GENARO PLACIDO, GENARO PLACIDO, MERCED POGGI, EMERITA POGGI, EMERITA CUSTOMER CATEGORY	377.75	0.00	5,507.62		
				CATEGORY	377.75	0.00	5,507.62		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : ADU ADULT	181
			\$	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223375	1/04/13	800000	VISITING NURSE SERVICE	POLANCO, JUAN	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 18	32	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE L	HCSA		
			S	BALES	REGISTER	1		BILL WEEK EN	DING	1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
									_		
223376	1/04/13	000008	VISITING NURSE SERVICE	POL	ITIS, HELEN	8.00		116.64	Ι		
					CATEGORY	8.00	0.00	116.64			

RUN DATE 01/09 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 - 183 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 1/11/13
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223377 1/04 223378 1/04		VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 24.00		116.64 I 349.92 I
			CUSTOMER	32.00	0.00	466.56
			CATEGORY	32.00	0.00	466.56

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 184	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 1/11/	13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
223379	1/04/13	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

	01/09/13 - NL # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 185 ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 1/11/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	S
223380	1/04/13	800000	VISITING NURSE SERVICE	QUILES, CRISPIN	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	_

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 18	б
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTEI	?		BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223381	1/04/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	6.00		87.48 I	
223382	1/04/13	800000	VISITING NURSE SERVICE	QUINTERO, INES	18.00		262.44 I	
				CUSTOMER	24.00	0.00	349.92	
				CATEGORY	24.00	0.00	349.92	

RUN DATE 01/09/13 SALES JRNL # 0315	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	2		PAGE 1 - 187 LTC NURSING HOMEW/C BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223383 1/04/13 223384 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - ,	20.25 21.00		295.25 I 306.18 I	
			CUSTOMER	41.25	0.00	601.43	
			CATEGORY	41.25	0.00	601.43	

			YSIDE CITYWIDE				PAGE 1 - 188	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 1,	/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	JRPLUS
223385	1/04/13	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	18.00		262.44 I	
223386	1/04/13	000008	VISITING NURSE SERVICE	RAJA, HANIFA	12.00		174.96 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	89
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDE	-
			2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223387	1/04/13	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	8.00		116.64 I	
223388	1/04/13	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	32.00		466.56 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223389 223390	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 28.00		218.70 408.24	I I	
				CUSTOMER	43.00	0.00	626.94		
				CATEGORY	43.00	0.00	626.94		

RUN DATE (SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 191 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223391 223392	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 18.00		218.70 I 262.44 I
				CUSTOMER	33.00	0.00	481.14
				CATEGORY	33.00	0.00	481.14

			YSIDE CITYWIDE						- 19	_
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REGNY N SALES RE	IY : G T S T E F	?		CCL CONGREGA' BILL WEEK EN		RE PROGRAM 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223393	1/04/13	000008	VISITING NURSE SERVICE	RAMOS,	ISMAEL	1.00		14.58	I	
					CATEGORY	1.00	0.00	14.58		

RUN DATE SALES JRN	- , , -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 19 VCP CHOICE LHCSA BILL WEEK ENDING	93 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223394 223395 223396 223397	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMPHAL, INDRIA RAMPHAL, INDRIA REINA, JOSE REINA, JOSE	4.00 12.00 4.00 15.75		58.32 I 174.96 I 58.32 I 229.64 I	
				CUSTOMER	35.75	0.00	521.24	
				CATEGORY	35.75	0.00	521.24	

ı	RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 194	Ł
ı	SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
ı				S	SALES REGISTER			BILL WEEK ENDING	1/11/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	223398	1/04/13	800000	VISITING NURSE SERVICE	RENDON, EDUARDO	8.00		116.64 I	
					CATEGORY	8.00	0.00	116.64	

RUN DATE 01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	5
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			SALES REGISTE	R		BILL WEEK END	ING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223399 1/04/13	800000	VISITING NURSE SERVICE	RICCA, MARIE	4.00		58.32	I	
223400 1/04/13	000008	VISITING NURSE SERVICE	RICCA, MARIE	12.00		174.96	I	
223401 12/21/12	800000	VISITING NURSE SERVICE	RICE, SYDNEY	4.00		58.32	I	
223402 1/04/13	800000	VISITING NURSE SERVICE	RICE, SYDNEY	4.00		58.32	I	
223403 1/04/13	800000	VISITING NURSE SERVICE	RICE, SYDNEY	4.00		58.32	I	
			CUSTOMER	28.00	0.00	408.24		
			– CATEGORY	28.00	0.00	408.24		

RUN DATE 01/09/1	.3 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 196
SALES JRNL # 031	.5 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM
		5	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223404 12/28/1	2 000008	VISITING NURSE SERVICE	RISCO, GUILLERM	7.00		102.06 I
223405 1/04/1	.3 000008	VISITING NURSE SERVICE	RISCO, GUILLERM	21.00		306.18 I
223406 1/04/1	.3 000008	VISITING NURSE SERVICE	RISCO, GUILLERM	28.00		408.24 I
			CUSTOMER	56.00	0.00	816.48
			CATEGORY	56.00	0.00	816.48

RUN DATE 01/09/13 - SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 19 VCP CHOICE LHCSA	
		2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223407 12/28/12 223408 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RIVADENEIRA, OL RIVADENEIRA, OL	4.00		58.32 I 58.32 I	
223409 1/04/13	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	4.00		58.32 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 198
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDI	ING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
223410	1/04/13	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	24.00		349.92	I
223411	1/04/13	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	32.00		466.56	I
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

	01/09/13 · NL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 19	9
Bridde ord	WE 0313	100 001		SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223412	1/04/13	000008	VISITING NURSE SERVICE	RIVERA, CARMEN	6.00		87.48	I	
223413	1/04/13	800000	VISITING NURSE SERVICE	RIVERA, CARMEN	24.00		349.92	I	
223414	12/28/12	800000	VISITING NURSE SERVICE	RIVERA, CAROL	4.00		58.32	I	
223415	1/04/13	000008	VISITING NURSE SERVICE	RIVERA, CAROL	4.00		58.32	I	
223416	1/04/13	800000	VISITING NURSE SERVICE	RIVERA, CAROL	16.00		233.28	I	
				CUSTOMER	54.00	0.00	787.32		
				CATEGORY	54.00	0.00	787.32		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	200
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223417 223418	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	4.00 12.00		58.32 I 174.96 I	
				CUSTOMER	16.00	0.00	233.28	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	201
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDIN	rG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223419	1/04/13	000008	VISITING NURSE SERVICE	RIVERA, GRACIEL	4.00		58.32 I	
223420	1/04/13	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	12.00		174.96 I	
223421	1/04/13	000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	16.00		233.28 I	
223422	1/04/13	000008	VISITING NURSE SERVICE	ROCCISANO, LOUI	32.00		466.56 I	
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

RUN DATE 01/09 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	202
SALES ORNE # C	100 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223423 1/04 223424 1/04		VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 6.00		174.96 I 87.48 I	
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

_	01/09/13 NL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	203
SALES ON	ND # 0313	100 001		ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
223425	12/14/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	1.75		25.52 I	
223426	12/28/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	4.00		58.32 I	
223427	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	2.00		29.16 I	
223428	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	6.00		87.48 I	
223429	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	18.00		262.44 I	
223430	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	24.00		349.92 I	
				CUSTOMER	55.75	0.00	812.84	
				CATEGORY	55.75	0.00	812.84	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20)4
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA	TE CAF	RE PROGRAM
			:	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223431	1/04/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, MARC	36.00		524.88	I	
223432	1/04/13	800000	VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	48.00		699.84	I	
				CUSTOMER	84.00	0.00	1,224.72		
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	05
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223433	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARI	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

			YSIDE CITYWIDE				11102	- 20	
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		•
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
223434	1/04/13	000008	VISITING NURSE SERVICE	•	5.00		72.90	I	
223435	1/04/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	15.00		218.70	I	
				CUSTOMER	20.00	0.00	291.60		
				COBTORER	20.00	0.00	271.00		
				CATEGORY	20.00	0.00	291.60		

			YSIDE CITYWIDE				PAGE 1 -	207
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDII	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223436	1/04/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	21.00		306.18	Ι
223437	1/04/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	28.00		408.24	Ι
				CUSTOMER	49.00	0.00	714.42	
				CATEGORY	49.00	0.00	714.42	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			11102 1	- 208 IOMEW/O WALLS (LT
	_			SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
223438	1/04/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	16.00		233.28	I
223439	1/04/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	24.00		349.92	I
223440	1/04/13	000008	VISITING NURSE SERVICE	ROLON, JUANITA	7.75		113.00	I
223441	1/04/13	800000	VISITING NURSE SERVICE	ROLON, JUANITA	32.00		466.56	I
				CUSTOMER	79.75	0.00	1,162.76	
				CATEGORY	 79.75	0.00	1,162.76	

RUN DATE 01/09 SALES JRNL # 0		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	09 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223442 1/04 223443 1/04		VISITING NURSE SERVICE VISITING NURSE SERVICE	ROMERO, SANTHY ROMERO, SANTHY	8.00 32.00		116.64 I 466.56 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	 583.20	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 210
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
			5	SALES REGISTE	R		BILL WEEK ENI	DING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
223444	1/04/13	000008	VISITING NURSE SERVICE	ROMO, FLOR	23.00		335.34	I
223445	1/04/13	800000	VISITING NURSE SERVICE	ROMO, FLOR	32.00		466.56	I
223446	1/04/13	000008	VISITING NURSE SERVICE	ROSA, ANA	8.00		116.64	I
223447	1/04/13	800000	VISITING NURSE SERVICE	ROSA, ANA	24.00		349.92	I
				CUSTOMER	87.00	0.00	1,268.46	
				CATEGORY	87.00	0.00	1,268.46	

RUN DATE 01/09/13	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 21	L1
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		S	ALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223448 12/28/12	000008	VISITING NURSE SERVICE	DOCA IIIZ E	8.00		116 61	т	
			ROSA, LUZ E			116.64		
223449 1/04/13	800000	VISITING NURSE SERVICE	ROSA, LUZ E	24.00		349.92	I	
223450 1/04/13	000008	VISITING NURSE SERVICE	ROSA, LUZ E	32.00		466.56	I	
223451 1/04/13	000008	VISITING NURSE SERVICE	ROSA, MANOLO	4.00		58.32	I	
223452 1/04/13	000008	VISITING NURSE SERVICE	ROSA, MANOLO	12.00		174.96	I	
223453 1/04/13	000008	VISITING NURSE SERVICE	ROSARIO, ELSA	1.00		14.58	I	
223454 1/04/13	000008	VISITING NURSE SERVICE	ROSARIO, ELSA	7.00		102.06	I	
223455 12/21/12	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	6.00		87.48	I	
223456 1/04/13	000008	VISITING NURSE SERVICE	ROSARIO, MARIA	10.00		145.80	I	
223457 1/04/13	000008	VISITING NURSE SERVICE	ROSARIOBREU, EM	5.00		72.90	I	
223458 1/04/13	800000	VISITING NURSE SERVICE	ROSARIOBREU, EM	20.00		291.60	I	
			OLIGEOMED	120 00	0.00	1 000 00		
			CUSTOMER	129.00	0.00	1,880.82		
			CATEGORY	129.00	0.00	1,880.82		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 212 ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 1	/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
223459	1/04/13	000008	VISITING NURSE SERVICE	ROSE, EVA	4.00		58.32 I	
				CATEGORY	4.00	0.00	 58.32	

RUN DATE 0			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 213 VCP CHOICE LHCSA	3
SALES ORNE	1 # 0313	HOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RUEDA, INES RUEDA, INES	17.75 14.00		258.80 I 204.12 I	
				CUSTOMER	31.75	0.00	462.92	
				CATEGORY	31.75	0.00	462.92	

RUN DATE (SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - 214 LTC NURSING HOMEW/O BILL WEEK ENDING	WALLS (LT 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223462 223463	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, .=	5.50 18.00		80.19 I 262.44 I	
				CUSTOMER	23.50	0.00	342.63	
				CATEGORY	23.50	0.00	342.63	

RUN DATE 0 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	215
SALES UKNI	1 # 0313	TOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		30.00 40.00		437.40 I 583.20 I	
				CUSTOMER	70.00	0.00	1,020.60	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 216	
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			S	SALES REGISTER			BILL WEEK END	ING 1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
223466	1/04/13	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	5.00		72.90	I	
223467	1/04/13	800000	VISITING NURSE SERVICE	SAK, FIRDEVS	10.00		145.80	I	
223468	12/28/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	11.00		160.38	I	
223469	1/04/13	800000	VISITING NURSE SERVICE	SALADIN, MARIA	33.00		481.14	I	
223470	1/04/13	800000	VISITING NURSE SERVICE	SALADIN, MARIA	33.00		481.14	I	
				CUSTOMER	92.00	0.00	1,341.36		
				CATEGORY	92.00	0.00	1,341.36		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 21	.7
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	BALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223471	1/04/13	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	12.00		174.96	I	
223472	1/04/13	800000	VISITING NURSE SERVICE	•	24.00		349.92	I	
				CUSTOMER	36.00	0.00	524.88		
				CATEGORY	36.00	0.00	524.88		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	218
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	ING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223473	1/04/13	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	33.00		481.14	I
223474	1/04/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	42.75		623.30	I
				CUSTOMER	75.75	0.00	1,104.44	
				CATEGORY	75.75	0.00	1,104.44	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	219
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			;	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223475	1/04/13	000008	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	5.00		72.90 I	
223476	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	15.00		218.70 I	
223477	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	14.00		204.12 I	
223478	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	21.00		306.18 I	
				CUSTOMER	55.00	0.00	801.90	
				CATEGORY	55.00	0.00	801.90	

RUN DATE 0	1/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 220	
SALES JRNL	# 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223479	1/04/13	000008	VISITING NURSE SERVICE	SANCHEZ, LIDIA	20.00		291.60 I	
223480	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	27.00		393.66 I	
				CUSTOMER	47.00	0.00	685.26	
				00D10H2H		0.00		
				GAERGODY	47.00			
1				CATEGORY	47.00	0.00	685.26	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	221
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE	
				SALES REGISTER			BILL WEEK ENDIN	IG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223481	1/04/13	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	7.00		102.06	- -
223482	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	28.00		408.24	• •
				CUSTOMER	35.00	0.00	510.30	
				COSTONEIC	33.00	0.00	310.30	
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 - 222
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
			5	SALES REGISTER			BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223483	1/04/13	000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	23.75		346.28 I
223484	1/04/13	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	24.00		349.92 I
				CUSTOMER	47.75	0.00	696.20
				CATEGORY	47.75	0.00	696.20

			YSIDE CITYWIDE				PAGE 1 - 2	23
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223485	1/04/13	000008	VISITING NURSE SERVICE	SANDOVAL, FANNY	16.00		233.28 I	
223486	1/04/13	800000	VISITING NURSE SERVICE	SANDOVAL, FANNY	24.00		349.92 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE 01/09/13 -			DEC NV NV			PAGE 1 - 224	
SALES JRNL # 0315	LOC UUI	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGATE CARE BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223487 12/21/12 223488 12/28/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	11.50 6.00		167.67 I 87.48 I	
			CUSTOMER	17.50	0.00	255.15	
			CATEGORY	17.50	0.00	255.15	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 225 ADU ADULT	/11 /12
			S	SALES REGISTER			BILL WEEK ENDING 1,	/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	JRPLUS
223489 223490	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SANTIAGO, EDILT SANTIAGO, EDILT	1.00		14.58 I 116.64 I	
				CUSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 22	26
SALES JRN	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
222401	1 /04 /13	000008	VICIALNO MIDOS GEDVICE	CANTROC LERV T	6 00		07.40	-	
223491	1/04/13		VISITING NURSE SERVICE	SANTOS, LETY I	6.00		87.48	Τ_	
223492	1/04/13	800000	VISITING NURSE SERVICE	SANTOS, LETY I	24.00		349.92	I	
223493	1/04/13	800000	VISITING NURSE SERVICE	SCOTT, CATHERIN	24.00		349.92	I	
223494	1/04/13	800000	VISITING NURSE SERVICE	SCOTT, CATHERIN	32.00		466.56	I	
223495	1/04/13	800000	VISITING NURSE SERVICE	SCRO, WILLIAM	12.00		174.96	I	
223496	1/04/13	000008	VISITING NURSE SERVICE	SCRO, WILLIAM	16.00		233.28	I	
223497	1/04/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	18.00		262.44	I	
223498	1/04/13	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	18.00		262.44	I	
223499	12/28/12	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	20.00		291.60	I	
223500	1/04/13	800000	VISITING NURSE SERVICE	SERAFIN, WALTER	30.00		437.40	I	
223501	1/04/13	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	38.00		554.04	I	
				CUSTOMER	238.00	0.00	3,470.04		
				CATEGORY	238.00	0.00	3,470.04		

	09/13 - SUP SUNN		DDG 1997			PAGE 1 -	227
SALES JRNL #	0315 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE:	R		ADU ADULT BILL WEEK ENDIN	NG 1/11/13
		·				2122 W22W 21W21	.0 1,11,13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223502 1/0	04/13 000008	VISITING NURSE SERVICE	SERRA, JOSE	7.00		102.06	r
	04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	28.00		408.24	[
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	228
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			S	SALES REGISTER			BILL WEEK ENDIN	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
223504	1/04/13	000008	VISITING NURSE SERVICE	SERRANO, AGUEDA	24.00		349.92	Ι
223505	1/04/13	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	31.75		462.92	Γ
223506	1/04/13	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	21.00		306.18	I
223507	1/04/13	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	21.00		306.18	Ι
				CUSTOMER	97.75	0.00	1,425.20	
				CATEGORY	97.75	0.00	1,425.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 229 ADU ADULT	
SALES UKN	т # ОЭТЭ	LOC 001		SALES REGISTER				1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223508	1/04/13	800000	VISITING NURSE SERVICE	SHANNON, MADELI	3.00		43.74 I	
					2 00		 42 74	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE				PAGE 1 - 23	0
SALES JRN	IT # 03T2	LOC 001		REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223509 223510	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	4.00		58.32 I 116.64 I	
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 23	31
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				LTC NURSING		•
				SALES REG	ISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEREN	CE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223511	1/04/13	000008	VISITING NURSE SERVICE	SILLS, J.	AMES	17.75		258.80	I	
223512	1/04/13	800000	VISITING NURSE SERVICE	SILLS, J.	AMES	24.00		349.92	I	
				CU	STOMER	41.75	0.00	608.72		
				CA	TEGORY	41.75	0.00	608.72		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 232 ADU ADULT	2
511225 014	.2 0010	200 001		ALES REGISTER				1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223513 223514	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, BADREE	6.00 24.00		87.48 I 349.92 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 01/09/ SALES JRNL # 03		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 23 HCSA	33
		\$	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223515 12/21/	12 000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	3.00		43.74	I	
223516 1/04/	13 000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	5.00		72.90	I	
223517 1/04/	13 000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	20.00		291.60	I	
			CUSTOMER	28.00	0.00	408.24		
			CATEGORY	28.00	0.00	408.24		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	34
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICEM	DATE	CODI NO	CODIONER NAME	KEI EKENCE	110010	IAM ANI	AMOUNT III	DOKT HOD
223518	1/04/13	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	35
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223519	1/04/13	000008	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	4.00		58.32	I	
223520	1/04/13	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	4.00		58.32	I	
				CUSTOMER	8.00	0.00	116.64		
				COSTOMER	8.00	0.00	110.04		
				CATEGORY	8.00	0.00	116.64		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	36
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223521	1/04/13	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	6.00		87.48	I	
223522	1/04/13	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	12.00		174.96	I	
				CUSTOMER	18.00	0.00	262.44		
				CATEGORY	18.00	0.00	262.44		

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	237	
SALES JRN	L # 0315	LOC 001		REG NY NY			LTC NURSING HOMEW		
			:	SALES REGISTER			BILL WEEK ENDING	1/11/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
INVOICE#	DAIE	COSI NO	COSTOMER NAME	REFERENCE	поока	IAA AMI	AMOUNI IIP	SURPLUS	
223523	1/04/13	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	16.00		233.28 I		
				CATEGORY	16.00	0.00	233.28		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	8
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
			i	SALES REGISTER			BILL WEEK ENI	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223524	1/04/13	000008	VISITING NURSE SERVICE	STAFILIAS, EVAN	16.00		233.28	I	
223525	1/04/13	800000	VISITING NURSE SERVICE	STAFILIAS, EVAN	32.00		466.56	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE 01/0 SALES JRNL #	09/13 - SUP SUNN 0315 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	239
SALES ORNE #	0313 100 001		SALES REGISTER			BILL WEEK ENDI	NG 1/11/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	04/13 000008 04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, .=	30.00 39.25		437.40 572.27	I
			CUSTOMER	69.25	0.00	1,009.67	
			CATEGORY	69.25	0.00	1,009.67	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	10
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223528	1/04/13	000008	VISITING NURSE SERVICE	STAMBOULIDIS, V	24.00		349.92	I	
223529	1/04/13	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	32.00		466.56	I	
				CUSTOMER	56.00	0.00	816.48		
				CATEGORY	56.00	0.00	816.48		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 2 HOA HOSPICE ADULT BILL WEEK ENDING	Г
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223530 223531	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STEIN, STEPHANI STEIN, STEPHANI	9.00 12.00		131.22 I 174.96 I	
				CUSTOMER	21.00	0.00	306.18	
				CATEGORY	21.00	0.00	306.18	

	01/09/13 - NL # 0315	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 24	12
SALES UK	NL # 0315	TOC 001		REGNY NY ALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223532	1/04/13	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	4.00		58.32	Т	
223533	1/04/13	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	8.00		116.64	Ī	
223534	1/04/13	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	4.00		58.32	Ī	
223535	1/04/13	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	12.00		174.96	I	
223536	1/04/13	000008	VISITING NURSE SERVICE	STICKELL, BLANC	4.50		65.61	I	
223537	1/04/13	000008	VISITING NURSE SERVICE	STROBL, ALFRED	12.00		174.96	I	
223538	1/04/13	800000	VISITING NURSE SERVICE	STROBL, ALFRED	24.00		349.92	I	
223539	12/28/12	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	4.00		58.32	I	
223540	1/04/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	6.00		87.48	I	
223541	1/04/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	22.00		320.76	I	
				CUSTOMER	100.50	0.00	1,465.29		
				CATEGORY	100.50	0.00	1,465.29		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	13
SALES JRN	rL # 0315	LOC 001		REG NY NY			LTC NURSING		,
			S	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223542	1/04/13	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	18.00		262.44	I	
223543	1/04/13	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	18.00		262.44	I	
				CUSTOMER	36.00	0.00	524.88		
				COSTOMER	30.00	0.00	324.00		
				CATEGORY	36.00	0.00	524.88		

RUN DATE SALES JRN			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223544 223545 223546 223547	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008 000008	VISITING NURSE SERVIC VISITING NURSE SERVIC VISITING NURSE SERVIC VISITING NURSE SERVIC	TABOADA, DIMAS TABOADA, ELIZAB	3.00 10.50 24.00 22.00		349.92	I I I
				CUSTOMER	59.50	0.00	867.51	
				CATEGORY	59.50	0.00	867.51	

			YSIDE CITYWIDE				11102	- 245
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
			· ·	SALES REGISTER			BILL WEEK EN	DING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
223548	1/04/13	000008	VISITING NURSE SERVICE	TADDEO, LENA	23.75		346.28	т
223549	1/04/13	000008	VISITING NURSE SERVICE	TADDEO, LENA	32.00		466.56	<u>+</u> T
223550	1/04/13	000008	VISITING NURSE SERVICE	TAVERAS ARIAS,	5.75		83.84	I
223551	1/04/13	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	17.50		255.15	I
							1 151 02	
				CUSTOMER	79.00	0.00	1,151.83	
				CATEGORY	79.00	0.00	1,151.83	

-			YSIDE CITYWIDE				-	246
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			5	ALES REGISTER			BILL WEEK ENDIN	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
222552	1 /04 /12	000000	WIGHTING WIDGE GERWING	EALEDA C. DEDNA D.	4 00		E0 20 T	
223552	1/04/13	000008	VISITING NURSE SERVICE	TAVERAS, BERNAR	4.00		58.32 I	
223553	1/04/13	800000	VISITING NURSE SERVICE	TAVERAS, BERNAR	12.00		174.96 I	
223554	1/04/13	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	4.00		58.32 I	
223555	1/04/13	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	24.00		349.92 I	
				CUSTOMER	44.00	0.00	641.52	
				CATEGORY	44.00	0.00	641.52	

RUN DATE 01/09/ SALES JRNL # 03			REG NY NY			PAGE 1 - ADU ADULT	- 247	
BALLS CITYL # 03	15 Loc 001		SALES REGISTER			BILL WEEK END	ING 1/11/1	.3
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLU	S
223556 1/04/ 223557 1/04/		VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	4.00		58.32 43.74	I I	
223558 1/04/	13 000008	VISITING NURSE SERVICE	TEODORU, MIRELL	9.00		131.22	I	_
			CUSTOMER	16.00	0.00	233.28		
								-
			CATEGORY	16.00	0.00	233.28		

RUN DATE	01/09/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	248
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	Ā
			S I	ALES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
223559	1/04/13	000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	18.00		262.44 I	
223560	1/04/13	800000	VISITING NURSE SERVICE	TERZIAN, ASDGHI	24.00		349.92 I	
223561	1/04/13	800000	VISITING NURSE SERVICE	TINOCO, INES	7.00		102.06 I	
223562	1/04/13	800000	VISITING NURSE SERVICE	TINOCO, INES	18.00		262.44 I	
				CUSTOMER	67.00	0.00	976.86	
				CATEGORY	67.00	0.00	976.86	

			YSIDE CITYWIDE	DDG NV NV			-	249
SALES JRN	IL # U315	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223563 223564	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	5.00 23.25		72.90 I 338.99 I	
				CUSTOMER	28.25	0.00	411.89	
				CATEGORY	28.25	0.00	411.89	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 250 VCP CHOICE LHCSA	
SALES OWN	.H # 0313	100 001		SALES REGISTER				/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
223565 223566	1/04/13 1/04/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORO VEGA, LUZV TORO VEGA, LUZV	8.00 16.00		116.64 I 233.28 I	
				CUSTOMER	24.00	0.00	349.92	
				CATEGORY	24.00	0.00	349.92	

			YSIDE CITYWIDE	D				PAGE 1	- 25	51
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE		NY EGISTE	! R		ADU ADULT BILL WEEK EN	DING	1/11/13
						10		DILL WELK EN	DIIVO	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223567	1/04/13	000008	VISITING NURSE SERVICE	TORO,	DIIDA	35.75		521.24	_	
223568	1/04/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORO,		48.00		699.84	I	
					-					
					CUSTOMER	83.75	0.00	1,221.08		
					_					
					CATEGORY	83.75	0.00	1,221.08		

RUN DATE (- , , -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	2		PAGE 1 - 25 VCP CHOICE LHCSA BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223569 223570 223571 223572	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TORRES, EMELINA TORRES, LUZ M	8.00 31.50 36.00 43.50		116.64 I 459.27 I 524.88 I 634.23 I	
				CUSTOMER	119.00	0.00	1,735.02	
				CATEGORY	119.00	0.00	1,735.02	

RUN DATE 01/09/13 SALES JRNL # 0315		REG NY NY SALES REGISTE	R		PAGE 1 LTC NURSING H BILL WEEK END	IOMEW/C	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223573 1/04/13 223574 1/04/13	000008 VISITING NURSE SERVICE VISITING NURSE SERVICE		20.75 18.00		302.54 262.44	I I	
		CUSTOMER	38.75	0.00	564.98		
		CATEGORY	38.75	0.00	564.98		

RUN DATE 01/09/13 -	SUP SUNNYSIDE CITYWIDE			PAGE 1 - 254
SALES JRNL # 0315	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT
	5	SALES REGISTER		BILL WEEK ENDING 1/11/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP SURPLUS
223575 1/04/13	000008 VISITING NURSE SERVICE	TOUMA, MATTA	7.00	102.06 I
223576 1/04/13	000008 VISITING NURSE SERVICE	TOUMA, MATTA	28.50	415.53 I
		CUSTOMER	35.50	517.59
		CATEGORY	35.50	 0.00 517.59

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	, , -
223578 223579	1/04/13 1/04/13 1/04/13 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TOVARDE BOCAN, TOVARDE BOCAN, TSOLISOS, FOTIN TSOLISOS, FOTIN	12.00 24.00 23.75 24.00		174.96 I 349.92 I 346.28 I 349.92 I	
				CUSTOMER	83.75	0.00	1,221.08	
				CATEGORY	83.75	0.00	1,221.08	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 256 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
223581 223582	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		4.00 14.25		58.32 I 207.77 I
				CUSTOMER	18.25	0.00	266.09
				CATEGORY	18.25	0.00	 266.09

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	257
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			i	SALES REGISTER			BILL WEEK ENDIN	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223583	1/04/13	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	27.00		393.66 I	
223584	1/04/13	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	36.00		524.88 I	
				CUSTOMER	63.00	0.00	918.54	
				CATEGORY	63.00	0.00	918.54	

RUN DATE 01 SALES JRNL		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
		800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	15.00 14.50		218.70 211.41	I I
				CUSTOMER	29.50	0.00	430.11	
				CATEGORY	 29.50	0.00	430.11	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 259	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING 1/11/13	3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
223587	1/04/13	000008	VISITING NURSE SERVICE	URENA, ARGELIA	4.00		58.32 I	
223588	1/04/13	800000	VISITING NURSE SERVICE	URENA, ARGELIA	8.00		116.64 I	
223589	1/04/13	800000	VISITING NURSE SERVICE	URUCHIMA, VICTO	3.00		43.74 I	
223590	1/04/13	800000	VISITING NURSE SERVICE	URUCHIMA, VICTO	9.00		131.22 I	
				CUSTOMER	24.00	0.00	349.92	-
				CATEGORY	24.00	0.00	349.92	-

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 26 CCL CONGREGATE CAR	
SALES OW	ш # ОЭТЭ	100 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223591 223592	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.00 15.00		72.90 I 218.70 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	 291.60	

RUN DATE 01/09/13 - SUP SALES JRNL # 0315 LOC		REG NY NY			PAGE 1 - VCP CHOICE LHCS	
		SALES REGISTER			BILL WEEK ENDIN	G 1/11/13
INVOICE# DATE CUST	I NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223593 12/28/12 0000 223594 1/04/13 0000		VALENCIA, ESTHE VALENCIA, ESTHE	6.00 24.00		87.48 I 349.92 I	
		CUSTOMER	30.00	0.00	437.40	
		CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	52
SALES JRN	IL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	TE CAR	RE PROGRAM
			5	SALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223595	1/04/13	000008	VISITING NURSE SERVICE	VALENTI, HELEN	23.00		335.34	I	
223596	1/04/13	000008	VISITING NURSE SERVICE	VALENTI, HELEN	15.75		229.64	I	
				CUSTOMER	38.75	0.00	564.98		
				CODIONER	50.75	0.00	301.30		
				CATEGORY	38.75	0.00	564.98		

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	53
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW,	O WALLS (LT
			S	BALES REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223597	1/04/13	800000	VISITING NURSE SERVICE	VAROL, ELMAS	4.00		58.32	I	
223598	1/04/13	800000	VISITING NURSE SERVICE	VAROL, ELMAS	7.75		113.00	I	
223599	12/14/12	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	4.00		58.32	I	
223600	1/04/13	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	13.00		189.54	I	
223601	1/04/13	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	20.00		291.60	I	
223602	1/04/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	9.00		131.22	I	
223603	1/04/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	9.00		131.22	I	
223604	1/04/13	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	16.00		233.28	I	
223605	1/04/13	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	24.00		349.92	I	
				CUSTOMER	106.75	0.00	1,556.42		
				CATEGORY	106.75	0.00	1,556.42		

RUN DATE 01/0 SALES JRNL #	09/13 - SUP SUNN 0315 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 26 ADU ADULT	4
SALES UNIL #	0313 LOC 001		SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	04/13 000008 04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ ~ ,	5.00 15.00		72.90 I 218.70 I	
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 265	
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING 1	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
223608	1/04/13	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	7.75		113.00 I	
223609	1/04/13	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	9.00		131.22 I	
				CUSTOMER	16.75	0.00	244.22	
				CATEGORY	16.75	0.00	244.22	

RUN DATE 0: SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADULT	- 26	56
SALES URNL	# 0315	LOC UUI		SALES REGISTER			BILL WEEK END	ING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
		000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		2.00		29.16 29.16	I	
223011	1/04/13	000000	VISITING NORSE SERVICE	VELECELA, MAKIA					
				CUSTOMER	4.00	0.00	58.32		
				CATEGORY	4.00	0.00	58.32		

RUN DATE 01/ SALES JRNL #	/09/13 - SUP SUNN # 0315 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 267 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 1/11/13
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	/04/13 000008 /04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		14.00 28.00		204.12 I 408.24 I
			CUSTOMER	42.00	0.00	612.36
			CATEGORY	42.00	0.00	612.36

	09/13 - SUP SUNN		D=0.111				PAGE 1	- 26	68
SALES JRNL #	0315 LOC 001	SUNNYSIDE CITYWIDE	-	NY EGIST:	E R		ADU ADULT BILL WEEK EN	DING	1/11/13
							D111 (1111 111	221.0	1,11,13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223614 1/0	04/13 000008	VISITING NURSE SERVICE	מ מידות	ROSARIO	4.00		58.32	т	
	04/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	ROSARIO	8.00		116.64	I	
			,						
				CUSTOMER	12.00	0.00	174.96		
				CATEGORY	12.00	0.00	174.96		

RUN DATE 01 SALES JRNL	1/09/13 - SUP SUN # 0315 LOC 001		DEG NY NY				69
SALES URNL	# 0312 FOC 001		REGNY NY ALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	1/11/13
		5.	ALES KEGISIEK			BILL WEEK ENDING	1/11/13
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223616 12	2/14/12 000008	VISITING NURSE SERVICE	VERA, VICTOR	4.00		58.32 I	
223617 12	2/28/12 000008	VISITING NURSE SERVICE	VERA, VICTOR	11.25		164.03 I	
223618 1	1/04/13 000008	VISITING NURSE SERVICE	VERA, VICTOR	1.25		18.23 I	
223619 1	1/04/13 000008	VISITING NURSE SERVICE	VERA, VICTOR	3.00		43.74 I	
223620 1	1/04/13 000008	VISITING NURSE SERVICE	VERAS, JUANA	24.00		349.92 I	
223621 1	1/04/13 000008	VISITING NURSE SERVICE	VERAS, JUANA	24.00		349.92 I	
			CUSTOMER	67.50	0.00	984.16	
			CATEGORY	67.50	0.00	984.16	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 270 HOA HOSPICE ADULT)
SALES OWN	ш # ОЭТЭ	100 001		SALES REGISTER				1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223622	1/04/13	000008	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 01/09/13 - SALES JRNL # 0315		SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		2	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
223623 12/21/12 223624 1/04/13 223625 1/04/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VILLAPOL, ANNA VILLAPOL, ANNA VILLAPOL, ANNA	6.00 12.00 24.00		87.48 I 174.96 I 349.92 I	
1,01,13		VIBITING NORDE BERVIEL	CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	272
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223626	1/04/13	800000	VISITING NURSE SERVICE	VISCONTI, JASON	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

RUN DATE SALES JRN		SUP SUNN LOC 001			NY E G I S T E	R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223627 223628	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		CARMEN CARMEN	6.00 18.00		87.48 262.44	I I	
					CUSTOMER	24.00	0.00	349.92		
					- CATEGORY	24.00	0.00	349.92		

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 27	74
SALES JRN	rL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223629	1/04/13	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	20.00		291.60 I	
223630	1/04/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	40.00		583.20 I	
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

			YSIDE CITYWIDE				PAGE 1 -	275
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDIN	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223631	1/04/13	000008	VISITING NURSE SERVICE	VLAHOS, MARIE	4.00		58.32 I	
223632	1/04/13	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	16.00		233.28 I	
223633	1/04/13	800000	VISITING NURSE SERVICE	WALLACE, LYDIA	3.00		43.74 I	
				CUSTOMER	23.00	0.00	335.34	
				CATEGORY	23.00	0.00	335.34	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 276 VCP CHOICE LHCSA	б
				SALES REGISTER			BILL WEEK ENDING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223634 223635	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE	,	10.00		145.80 I 291.60 I	
223035	1/04/13	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	20.00		291.60 1	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 27	77
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			CCL CONGREGA'	FE CAF	RE PROGRAM
			S	SALES F	REGISTER			BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223636	1/04/13	800000	VISITING NURSE SERVICE	WHIT	TEHEAD, NANC	8.75		127.58	I	
					 CATEGORY	8.75	0.00	127.58		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			•	SALES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223637	1/04/13	000008	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGA	- 27	
SALES ORN	ш # ОЭТЭ	HOC 001		SALES REGISTER			BILL WEEK EN		1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223638 223639	1/04/13 1/04/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	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 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 280 SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 1/11/13 NAME

REFERENCE

ACENNO, CLAIRE
ALI, AMRUNISSA
ALI, AMRUNISSA
ALI, AMRUNISSA
ALI, AMRUNISSA
ALI, AMRUNISSA
ALI, AMRUNISSA
ALIX, PEDRO
7.00
1.375.92
ALSTON, ZULINE
55.50
839.16
ASH, MARIE
12.00
181.44
BEGUM, JAMILA
BEGUM, JAMILA
BERRASHEVIC, LI
12.00
181.44
BERRASHEVIC, LI
12.00
181.44
BERRASHEVIC, LI
12.00
181.44
BERREN, LEONOR
40.00
BUCARO, CONCETT
9.75
132.30
BUCARO, CONCETT
9.70
BUCARO, CONCETT
25.00
370.44
CALDERON, JUSTI
CALLERON, JUSTI
CALLERON, JUSTI
CALLERON, JUSTI
CALLERON, CARREN
CARUNIS, LILLIA
CARTAGENA, LUZ
CARTAGENA, LUZ
CARTAGENA, LUZ
COLENTI, TOAN
COHEN, ETHEL
46.25
699.30
COLENTI, JEAN
COLEMAR, REGINA
COLEMAR, REGINA
COMET, JULIA
COLON, MARIA
COLEMAR, REGINA
COMET, JULIA
COLON, JUSTI
COLON, JUSTI
COLON, JULIA
COLON, JULIA
COLON, JULIA
COLON, MARIA
COLEMAR, REGINA
COLEMAR, REGINA
COLEMAR, SECONO
DANIELS, MAGGIE
DANIELS, MAGGIE
COLEMAR
DELECON, JUANA
DELECON, JUAN INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 223640 291.06 I 1/04/13 000010 GUILDNET 60.48 I 223641 1/04/13 000010 GUILDNET 223642 1/04/13 000010 GUILDNET I 223643 1/04/13 000010 GUILDNET 223644 GUILDNET 1/04/13 000010 223645 1/04/13 000010 GUILDNET 223646 1/04/13 000010 GUILDNET 223647 1/04/13 000010 GUILDNET 223648 1/04/13 000010 GUILDNET 223649 1/04/13 000010 GUILDNET 223650 1/04/13 000010 GUILDNET 223651 1/04/13 000010 GUILDNET 223652 1/04/13 000010 GUILDNET 223653 1/04/13 000010 GUILDNET 223654 1/04/13 000010 GUILDNET 223655 1/04/13 000010 GUILDNET 223656 1/04/13 000010 GUILDNET 223657 1/04/13 000010 GUILDNET 223658 1/04/13 000010 GUILDNET 223659 1/04/13 000010 GUILDNET 223660 1/04/13 GUILDNET 000010 1/04/13 223661 GUILDNET 000010 223662 12/21/12 000010 GUILDNET 223663 1/04/13 000010 GUILDNET 223664 1/04/13 000010 GUILDNET 223665 1/04/13 000010 GUILDNET 223666 1/04/13 000010 GUILDNET 223667 1/04/13 000010 GUILDNET 223668 1/04/13 000010 GUILDNET 223669 1/04/13 000010 GUILDNET 223670 1/04/13 000010 GUILDNET 223671 1/04/13 000010 GUILDNET 223672 1/04/13 000010 GUILDNET 223673 1/04/13 000010 GUILDNET 223674 1/04/13 000010 GUILDNET 223675 1/04/13 000010 GUILDNET 223676 1/04/13 000010 GUILDNET 223677 1/04/13 000010 GUILDNET 223678 1/04/13 GUILDNET 000010 223679 1/04/13 GUILDNET 000010 223680 1/04/13 000010 GUILDNET 223681 12/07/12 000010 GUILDNET 223682 12/28/12 000010 GUILDNET 223683 1/04/13 000010 GUILDNET 223684 1/04/13 000010 GUILDNET Ι 223685 1/04/13 000010 GUILDNET 223686 1/04/13 000010 GUILDNET 223687 1/04/13 000010 GUILDNET 1/04/13

223688

000010 GUILDNET

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 281 SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET WIDE REGNY NY
SALES REGISTER BILL WEEK ENDING 1/11/13 CUST NO CUSTOMER NAME

REFERENCE

REFERENCE

REFERENCA

REFERENCA REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 223689 483.84 I 1/04/13 223690 1/04/13 241.92 I 223691 1/04/13 I 223692 1/04/13 223693 12/21/12 223694 1/04/13 223695 1/04/13 223696 12/28/12 223697 1/04/13 223698 1/04/13 223699 1/04/13 223700 1/04/13 223701 1/04/13 223702 1/04/13 223703 1/04/13 223704 1/04/13 223705 1/04/13 223706 12/28/12 223707 12/28/12 223708 1/04/13 223709 1/04/13 223710 12/21/12 223711 1/04/13 223712 1/04/13 223713 1/04/13 223714 1/04/13 223715 1/04/13 223716 1/04/13 223717 1/04/13 223718 1/04/13 223719 1/04/13 223720 1/04/13 223721 1/04/13 223722 1/04/13 223723 12/28/12 223724 1/04/13 223725 1/04/13 223726 1/04/13 223727 1/04/13 223728 1/04/13 223729 1/04/13 223730 1/04/13 223731 1/04/13 223732 1/04/13 223733 1/04/13 223734 1/04/13 223735 1/04/13 223736 1/04/13 223737 1/04/13 000010 GUILDNET

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 282 SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 1/11/13 MIMMS, GRACE T 11.00
MIMMS, GRACE T 24.00
MONTALO, VERON 20.00
MONTALVO, VERON 20.00
MONTES, ADOLFO 48.00
MORA, PAULA 4.00
MORALES, ISIDRO 36.00
MORALES, MARGAR 19.75
MOSCICKA, JADWI 24.00
MOYA, MARINA 39.75
MUSCAT, CARMEN 25.00
NETTLES, DONNA 11.50
NEWBOLD, RAMONA 20.00
NISHIMURA, ALBE 42.00
NISHIMURA, ALBE 42.00
NISHIMURA, ALBE 36.00
NUNEZ, RAYNA 20.00
OCASIO, FELIX 40.00
OCASIO, FELIX 40.00
OJEDA, MANUEL 40.00
OJEDA, MANUEL 40.00
OJEDA, SARA 42.00
OLMO, GLORIA 23.75
ORLANDO, ANNE 20.00
ORTIZ, LAURA 27.00
ORTIZ, LAURA 27.00
ORTIZ, LAURA 36.00
ORTIZ, LAURA 36.00
ORTIZ, LAURA 37.5
PAGAN, ADRIEL 59.75
PAGAN, SHYR 28.00
PATTERSON, SHYR 29.00
PATTERSON, SHYR 28.00
PATTERSON, SHYR 28.00
PATTERSON, SHYR 29.00
PATTERSON SHYR 20 INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 223738 166.32 I 1/04/13 000010 GUILDNET 223739 1/04/13 362.88 I 000010 GUILDNET 223740 635.04 1/04/13 000010 GUILDNET 223741 12/28/12 000010 GUILDNET 302.40 223742 12/28/12 GUILDNET 725.76 000010 223743 GUILDNET 1/04/13 000010 60.48 223744 GUILDNET 544.32 1/04/13 000010 223745 1/04/13 000010 GUILDNET 298.62 223746 1/04/13 000010 GUILDNET 362.88 223747 1/04/13 000010 GUILDNET 120.96 223748 1/04/13 000010 GUILDNET 601.02 223749 1/04/13 000010 GUILDNET 378.00 223750 1/04/13 000010 GUILDNET 173.88 223751 1/04/13 000010 GUILDNET 302.40 223752 12/28/12 000010 GUILDNET 635.04 223753 1/04/13 000010 GUILDNET 544.32 223754 1/04/13 000010 GUILDNET 302.40 223755 1/04/13 000010 GUILDNET 302.40 223756 1/04/13 000010 GUILDNET 604.80 223757 12/28/12 000010 GUILDNET 604.80 223758 1/04/13 GUILDNET 677.04 000010 223759 GUILDNET 1/04/13 000010 359.10 223760 GUILDNET 302.40 1/04/13 000010 223761 12/28/12 000010 GUILDNET 740.88 223762 1/04/13 000010 GUILDNET 408.24 223763 1/04/13 000010 GUILDNET 544.32 223764 1/04/13 000010 GUILDNET 56.70 223765 1/04/13 903.42 000010 GUILDNET 223766 12/28/12 604.80 000010 GUILDNET 223767 1/04/13 000010 GUILDNET 241.92 223768 1/04/13 000010 GUILDNET 317.52 223769 1/04/13 000010 GUILDNET 423.36 223770 1/04/13 GUILDNET 831.60 000010 223771 1/04/13 241.92 000010 GUILDNET 223772 1/04/13 362.88 000010 GUILDNET 223773 12/07/12 000010 GUILDNET 725.76 223774 544.32 11/09/12 000010 GUILDNET 223775 1/04/13 000010 GUILDNET 544.32 223776 12/28/12 000010 GUILDNET 60.48 1/04/13 120.96 223777 000010 GUILDNET 223778 1/04/13 000010 GUILDNET 408.24 223779 000010 GUILDNET 982.80 1/04/13 223780 000010 GUILDNET 181.44 1/04/13 223781 1/04/13 000010 GUILDNET 241.80 223782 1/04/13 000010 GUILDNET 145.08 Ι 223783 1/04/13 161.20 000010 GUILDNET 223784 12/28/12 000010 GUILDNET 544.32 223785 997.92 1/04/13 000010 GUILDNET 1/04/13 223786 000010 GUILDNET 272.16

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 4 - 283 SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 1/11/13 CUST NO CUSTOMER NAME

REFERENCE

RESTLLA, VINCEN

20.00

GUILLONET

REYES, DORILA

56.00

846.72

000010

GUILLONET

REYES, DORILA

56.00

846.72

000010

GUILLONET

REYES, MILAGROS

41.00

660.92

000010

GUILLONET

RIVAS, SARA

5.00

75.60

000010

GUILLONET

RIVAS, GREGRUDI

000010

GUILLONET

RIVERA, BLANCA

7.00

1.375.92

000010

GUILLONET

RIVERA, BLANCA

7.00

1.375.92

000010

GUILLONET

RIVERA, BLANCA

7.00

1.375.92

000010

GUILLONET

RODRIGUEZ, FABI

000010

GUILLONET

RODRIGUEZ, HOLG

63.00

952.56

000010

GUILLONET

RODRIGUEZ, LIDIX

000010

GUILLONET

RODRIGUEZ, FABI

000010

GUILLONET

RODR REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 223787 302.40 I 1/04/13 223788 1/04/13 846.72 I 223789 660.92 I 1/04/13 223790 1/04/13 223791 1/04/13 223792 1/04/13 223793 1/04/13 223794 12/14/12 223795 1/04/13 223796 1/04/13 223797 1/04/13 223798 1/04/13 223799 12/21/12 223800 1/04/13 223801 1/04/13 223802 1/04/13 223803 1/04/13 223804 1/04/13 223805 1/04/13 223806 1/04/13 223807 1/04/13 223808 12/14/12 223809 1/04/13 223810 1/04/13 223811 12/28/12 223812 1/04/13 223813 1/04/13 223814 1/04/13 223815 1/04/13 223816 1/04/13 223817 1/04/13 223818 1/04/13 223819 1/04/13 223820 1/04/13 223821 1/04/13 223822 1/04/13 223823 1/04/13 223824 1/04/13 223825 1/04/13 1/04/13 223826 223827 11/16/12 223828 1/04/13 223829 1/04/13 223830 12/21/12 223831 1/04/13 223832 1/04/13 223833 1/04/13 223834 1/04/13 223835 1/04/13 000010 GUILDNET

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 5	- 28	34
SALES JRI	SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY							GUI GUILDNET		
				SALE	S REGISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223836	1/04/13	000010	GUILDNET		VICTORIO, ROQUE	65.00		982.80	I	
223837	12/28/12	000010	GUILDNET		VLAHOS, MARIE	56.00		846.72	I	
223838	1/04/13	000010	GUILDNET		WARD, ALTHEA	6.00		90.72	I	
223839	1/04/13	000010	GUILDNET		WEISZ, KLARA	4.00		60.48	I	
223840	1/04/13	000010	GUILDNET		WEISZ, KLARA	4.00		60.48	I	
223841	12/28/12	000010	GUILDNET		WEST, BALDWIN	20.00		302.40	I	
223842	1/04/13	000010	GUILDNET		WHITLEY, MYRNA	4.00		60.48	Т	
223843	1/04/13	000010	GUILDNET		WHITLEY, MYRNA	12.00		181.44	T	
223844	1/04/13	000010	GUILDNET		YI, CARLOS	4.00		60.48	T	
223845	1/04/13	000010	GUILDNET		YI, CARLOS	8.00		120.96	T	
223846	12/28/12	000010	GUILDNET		ZARAGOZA, ISABE	48.00		725.76	T	
223847	1/04/13	000010	GUILDNET		•	32.00		483.84		
					ZARAGOZA, ISABE				± +	
223848	1/04/13	000010	GUILDNET		ZARE, GLORIA			1,254.96		
223849	1/04/13	000010	GUILDNET		ZUMAETA, FANNY	61.75		933.66	Τ	
					CUSTOMER	5,893.65	0.00	97,424.24		
					_					
					CATEGORY	5,893.65	0.00	97,424.24		

RUN DATE	01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	28	5
SALES JE	TE 01/09/13 - SUP SUNNYSIDE CITYWIDE JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE		REG NY NY			HFS HEALTH FIR	.ST		
				SALES REGISTER	}		BILL WEEK ENDI	NG	1/11/13
INVOICE‡	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP	SURPLUS
223850	1/04/13	000122	HEALTH FIRST	BEGUM, MANWARA	33.00		557.04	I	
223851	1/04/13	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
223852	1/04/13	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
223853	1/04/13	000122	HEALTH FIRST	BOWERS *, DIANE	50.00		844.00	I	
223854	1/04/13	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
223855	1/04/13	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
223856	1/04/13	000122	HEALTH FIRST	CEBALLOS, ANA	32.00		540.16	I	
223857	1/04/13	000122	HEALTH FIRST	CHARITAR, RAMKA	10.00		168.80	I	
223858	1/04/13	000122	HEALTH FIRST	CORTES DE GALIN	24.00		405.12	I	
223859	1/04/13	000122	HEALTH FIRST	DELACRUZ, ANA	70.00		1,181.60	I	
223860	1/04/13	000122	HEALTH FIRST	ESPAILLAT, AMPA	38.00		641.44	I	
223861	1/04/13	000122	HEALTH FIRST	ESTEVES, JOSE	36.00		607.68	I	
223862	12/14/12	000122	HEALTH FIRST	FERRERA, FRANCI	20.00		337.60	I	
223863	1/04/13	000122	HEALTH FIRST	FONTANES, PEDRO	49.00		827.12	I	
223864	1/04/13	000122	HEALTH FIRST	FRANCISCO, RICH	55.00		928.40	I	
223865	1/04/13	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
223866	12/21/12	000122	HEALTH FIRST	HENRY, BRENDA	35.00		590.80	I	
223867	1/04/13	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	I	
223868	12/21/12	000122	HEALTH FIRST	LARA, TOMASA	56.00		945.28	I	
223869	1/04/13	000122	HEALTH FIRST	LAZALA, GLADYS	42.00		708.96	I	
223870	1/04/13	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	64.00		1,080.32	I	
223871	12/21/12	000122	HEALTH FIRST	MACARENA, SAHAR	108.00		1,823.04	I	
223872	12/28/12	000122	HEALTH FIRST	PALAZZOLO, FLOR	96.00		1,620.48	I	
223873	1/04/13	000122	HEALTH FIRST	REINOSO, EMELIA	30.00		506.40	I	
223874	1/04/13	000122	HEALTH FIRST	RIVERA, CHRISTO	21.00		354.48	I	
223875	1/04/13	000122	HEALTH FIRST	RIVERA, EDDIE	12.00		202.56	I	
223876	1/04/13	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
223877	1/04/13	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
223878	1/04/13	000122	HEALTH FIRST	SALHUANA, YOLAN	40.00		675.20	I	
223879	1/04/13	000122	HEALTH FIRST	SPIVEY, PATRICI	20.00		337.60	I	
223880	1/04/13	000122	HEALTH FIRST	ST ROMAINE, CLA	68.00		1,147.84	I	
223881	1/04/13	000122	HEALTH FIRST	SURIEL, GERTRUD	84.00		1,417.92	I	
223882	1/04/13	000122	HEALTH FIRST	VASQUEZ, OLGA	20.00		337.60	I	
223883	1/04/13	000122	HEALTH FIRST	VEGA, GLORIA	40.00		675.20	I	
				CUSTOMER	1,476.00	0.00	24,914.88		
				REG NY NY S A L E S R E G I S T E F REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN BOWERS *, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DELACRUZ, ANA ESPAILLAT, AMPA ESTEVES, JOSE FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR PALAZZOLO, FLOR REINOSO, EMELIA RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VASQUEZ, OLGA VEGA, GLORIA	1,476.00	0.00	24,914.88		

RUN DATE 01/09/13						PAGE 1 -	286
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE R	EG NY NY			NHP NEIGHBORHOO	D HEALTH
		S A L	ES REGISTER			BILL WEEK ENDING	G 1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
223884 12/07/12	000120	METGUDODUOOD HEATEH DOMIDE	OC ALIMED TIMADA	64.00		1 000 22 +	
		NEIGHBORHOOD HEALTH PROVIDE	KS AHMED, UMAKA	04.00		1,080.32 1	
223885 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE NEIGHBORHOOD HEALTH PROVIDE NEIGHBORHOOD HEALTH PROVIDE NEIGHBORHOOD HEALTH PROVIDE	RS AKHTER, SELINA	36.00		607.68 I	
223886 12/21/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS CHUKWUJIORAH, T	57.00		962.16 I	
223887 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS DIAZ 1, CARMEN	28.00		472.64 I	
223888 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS FERNANDEZ, MARI	12.00		202.56 I	
223889 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE					
223890 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS HAMPTON, PRISCI	38.00		641.44 I	
223891 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS JONES, CYNTHIA	16.00		270.08 I	
223892 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KHAN, FARUQUE	82.00		1,384.16 I	
223893 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS KROLL, KATHERIN	28.00		472.64 I	
223894 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS MORALES HERNAD	42.00		708.96 I	
223895 12/28/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS FLORES, MARITZA RS HAMPTON, PRISCI RS JONES, CYNTHIA RS KHAN, FARUQUE RS KROLL, KATHERIN RS MORALES HERNAD RS OCASIO, VIRGINI RS RODRIGUEZ, JESS RS RODRIGUEZ, MARI RS SHEPPARD, ERMA	36.00		607.68 I	
223896 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS OCASIO, VIRGINI	30.00		506.40 I	
223897 12/28/12	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ, JESS	40.00		675.20 I	
223898 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS RODRIGUEZ MART	30.00		506.40 T	
223899 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS SHEPPARD, ERMA RS WELLS, WYNORIA RS WILSON, SHERYL	68 75		1.160.50 I	
223900 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS WELLS WYNORIA	16 00		270 08 T	
223901 1/04/13	000120	NEIGHBORHOOD HEALTH PROVIDE	RS WILLS, WINOKIA	32 00		540.16 I	
223701 1/01/13	000120	NEIGHBORHOOD HEAETH TROVIDE.	WILDON, BILEKIL	32.00		310:10	
			CUSTOMER	725.75	0.00	12,250.66	
						•	
			CATEGORY		0.00	12,250.66	
			CATEGORI	, 25. 15	0.00	12,230.00	

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 287 SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY FID NY CATHOLIC/FIDELIS											
SALES JRI	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				- /			
				SALES REGISTER			BILL WEEK ENI	JING	1/11/13		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
223902	1/04/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I			
223903	1/04/13	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	14.00		236.18	I			
223904	1/04/13	000126	NYS CATHOLIC/FIDELIS	ISKANDER, JACOU	56.00		944.72	I			
223905	1/04/13	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	24.00		404.88	I			
223906	12/21/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	108.00		1,821.96	I			
223907	1/04/13	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	13.00		219.31	I			
223908	1/04/13	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	42.00		708.54	I			
223909	1/04/13	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	54.00		910.98	I			
				CUSTOMER	360.00	0.00	6,073.20				
				CATEGORY	360.00	0.00	6,073.20				

RUN DATE 01/09/13 - SALES JRNL # 0315		CITYWIDE NYSIDE CITYWIDE	REG NY NY S A L E S R E G I S	T E R		PAGE 1 - UHC UNITED HEA BILL WEEK ENDI	LTH
INVOICE# DATE	CUST NO CUSTO	OMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223910 1/04/13 223911 11/23/12 223912 1/04/13 223913 12/21/12	000128 UNIT	ED HEALTH CARE ED HEALTH CARE ED HEALTH CARE ED HEALTH CARE	CALDERON, MIG KHAN, FAZAL MILLAN, ARMIC SAFOS, PATRA	274.00		1,201.20 4,701.84 755.04 1,784.64	I I I
			CUSTOME	R 492.00	0.00	8,442.72	
			CATEGOR	Y 492.00	0.00	8,442.72	

RUN DATE 01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 28	9
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM HE	CALTH	
			SALES REGISTER			BILL WEEK END	OING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223914 11/30/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	21.00		294.00	I	
223915 1/04/13	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
223916 12/14/12	000114	EMBLEM HEALTH	COPELAND, ELISE	62.00		883.50	I	
223917 1/04/13	000114	EMBLEM HEALTH	DE JESUS, TIBUR	72.00		1,026.00	I	
223918 1/04/13	000114	EMBLEM HEALTH	GAFFNEY, FREDER	8.00		112.00	I	
223919 1/04/13	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	51.50		721.00	I	
223920 1/04/13	000114	EMBLEM HEALTH	JACKSON, FRANCE	42.00		588.00	Ī	
223921 1/04/13	000114	EMBLEM HEALTH	KEATON, CATHERI	68.00		952.00	Ī	
223922 1/04/13	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		168.00	I	
223923 1/04/13	000114	EMBLEM HEALTH	WEATHERS, VERDE	81.00		1,134.00	I	
223924 1/04/13	000114	EMBLEM HEALTH	WESTFIELD, BREN	24.00		336.00	Ī	
223925 1/04/13	000114	EMBLEM HEALTH	WESTFIELD, BREN	32.00		448.00	T	
223723 27 27 23	000111							
			CUSTOMER	557.50	0.00	7,838.50		
			CODICIENT	2230	0.00	.,550.50		
			CATEGORY	557.50	0.00	7,838.50		
			CAIDOORI	557.50	0.00	,,000.00		

RUN DATE 01/09/13 SALES JRNL # 0315		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S A L E		2		PAGE 1 - HIP HEALTH INST BILL WEEK ENDII	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
223926 1/04/13 223927 1/04/13 223928 11/23/12 223929 1/04/13 223930 1/04/13	000136 000136 000136 000136	HEALTH INSURANCE PLAN OF NY	AHMAD, AMATUL CIPRIAN, JACQUE LOYOLA, MARIA ORR, LOUISE WILLIAMS, DIANE	20.00 20.00 80.00 15.00 20.00		337.60 337.60 1,350.40 253.20 337.60	C C C C I
			CUSTOMER	155.00	0.00	2,616.40	
			CATEGORY	155.00	0.00	2,616.40	

RUN DATE	01/09/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	291
SALES JRN	NL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLUS	HEALTH
				SALES REGISTER			BILL WEEK ENDI	NG 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
223931	1/04/13	000130	METROPLUS HEALTH	ANDERSON, BETH	30.00		514.50	I
223932	1/04/13	000130	METROPLUS HEALTH	ARIAS, NORA	56.00		960.40	I
223933	1/04/13	000130	METROPLUS HEALTH	CORDERO, ROSEND	58.00		994.70	I
223934	1/04/13	000130	METROPLUS HEALTH	DOBBINS, SANDRA	144.00		2,469.60	I
223935	1/04/13	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	20.00		343.00	I
223936	1/04/13	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I
223937	12/28/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	47.75		818.91	I
223938	1/04/13	000130	METROPLUS HEALTH	OSORIO, ELVIA	40.00		686.00	I
223939	1/04/13	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I
223940	12/21/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI			463.05	I
223941	1/04/13	000130	METROPLUS HEALTH	RYALS, CHARLES	24.00		411.60	I
223942	12/28/12	000130	METROPLUS HEALTH	SANTORO, MATTHE	45.00		771.75	I
	, -,							
				CUSTOMER	597.75	0.00	10,251.41	
							, -	
				CATEGORY	597.75	0.00	10,251.41	
							. ,	

RUN DATI	E 01/09/13	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE					PAGE 1	- 29	2
SALES J	RNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			WEL WELCARE	OF NY	
				SALE	S REGISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
000040	10/14/10	000104	MELGARE OF MEN WORK	TNG	71 0100 7117	120 00		0 006 00	-	
223943	12/14/12	000124	WELCARE OF NEW YORK,	INC.	ALONSO, ANA	130.00		2,236.00	Τ Τ	
223944	1/04/13	000124	WELCARE OF NEW YORK,	INC.	BATILO, MARTA	49.00		842.80	Τ Τ	
223945	1/04/13	000124	WELCARE OF NEW YORK,	INC.	BISRAM, ROUPKAL	20.00		344.00	Τ Τ	
223946	12/21/12	000124	WELCARE OF NEW YORK,	INC.	CABRERA, VINICI	15.00		258.00	Τ Τ	
223947 223948	1/04/13	000124	WELCARE OF NEW YORK,	INC.	CORNIEL, NICIA	12.00		206.40	Τ Τ	
223948	1/04/13	000124	WELCARE OF NEW YORK,	INC.	CRUZ, LUIS	16.00		2/5.20	Τ Τ	
223949	12/21/12	000124	WELCARE OF NEW YORK,	INC.	GODINOT, CARMEN	84.00		1,444.80	<u>+</u>	
223950	1/04/13	000124 000124	WELCARE OF NEW YORK,	INC.	GUEDDEDO * MID	40.00		137.00		
223951	1/04/13 1/04/13	000124	WELCARE OF NEW YORK,	INC.	GUERRERO ", MIR	49.00 E4.00		044.00		
223953	1/04/13	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, FIRPO	54.00		102 20		
223953	1/04/13	000124	WELCARE OF NEW YORK,	INC.	GUERRERU, ISABE	0.00		103.20 E16.00		
223954	1/04/13	000124	WELCARE OF NEW YORK,	INC.	HAINES, LAMONI	30.00		210.00		
223955	1/04/13	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, ISABEL	25.00 72.00		1 220 40		
223957	12/14/12	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, MANUEL	72.00		1,230.40		
223958	1/04/13	000124	WELCARE OF NEW TORK,	INC.	MADTINET MADIA	42.00		722 40		
223959	1/04/13	000124	WELCARE OF NEW YORK,	INC.	MEDINA MADELA	15 00		722.40		
223960	1/04/13	000124	WELCARE OF NEW YORK,	INC.	MEDINA, MAKITA	56 00		250.00		
223961	1/04/13	000124	WELCARE OF NEW TORK,	INC.	MODATES EDANCE	36.00		602.20		
223962	12/21/12	000124	WELCARE OF NEW TORK,	INC.	MODENO DDINTID	15 00		250 00		
223963	1/04/13	000124	WELCARE OF NEW TORK,	INC.	MIIDDUV DIIDV	12.00		206.00		
223964	12/14/12	000124	WELCARE OF NEW TORK,	INC.	MANADDO ANTONI	5.00		200.40		
223965	1/04/13	000124	WELCARE OF NEW YORK,	INC.	NAVARRO, ANTONI	35.00		60.00	T	
223966	1/04/13	000124	WELCARE OF NEW YORK,	INC.	DATRICK IMACEN	16 00		275 20	T	
223967	1/04/13	000124	WELCARE OF NEW YORK,	INC.	DATRICK, IMAGEN	32 00		550 40	T	
223968	1/04/13	000124	WELCARE OF NEW YORK,	INC.	DEDALTA PODDICO	4 00		68 80	T	
223969	1/04/13	000124	WELCARE OF NEW YORK,	INC.	DEBALTA THEZ	4.00		68 80	T	
223970	1/04/13	000121	WELCARE OF NEW YORK	INC.	PEREZ JULIO	15 00		258 00	T	
223971	12/14/12	000121	WELCARE OF NEW YORK	INC.	PAMIREZ ALIDA	63.00		1 083 60	T	
223972	1/04/13	000121	WELCARE OF NEW YORK	INC.	RAMOS STLVIA	20.00		344 00	Ť	
223973	1/04/13	000121	WELCARE OF NEW YORK	INC.	REGLA MARTA F	40.00		688 00	Ť	
223974	12/28/12	000121	WELCARE OF NEW YORK	INC.	RIVERA ALIDA	12.00		206.40	Ť	
223975	1/04/13	000121	WELCARE OF NEW YORK	INC.	RODRIGHEZ FRAN	36.00		619 20	Ť	
223976	12/14/12	000121	WELCARE OF NEW YORK	INC.	SANCHEZ BETANT	83.00		1 427 60	Ť	
223977	12/14/12	000121	WELCARE OF NEW YORK	INC.	SANTOS MAROIJEZ	44 00		756 80	Ť	
223978	1/04/13	000124	WELCARE OF NEW YORK	INC.	SERRANO, CARMEN	35.00		602.00	Ī	
223979	1/04/13	000121	WELCARE OF NEW YORK	INC.	SOTO, RAFAEL B	45.00		774.00	Ī	
223980	1/04/13	000121	WELCARE OF NEW YORK	INC.	VAZOUEZ, ROSA	40.00		688.00	Ī	
223981	1/04/13	000121	WELCARE OF NEW YORK	INC.	VENTURA, CLARA	16.00		275.20	Ī	
1 -2 - 3 - 3	1,01,13	300121								
			WELCARE OF NEW YORK,		CUSTOMER	1,386.00	0.00	23,839.20		
					CATEGORY	1,386.00	0.00	23,839.20		
1										

_	01/09/13 NL # 0315	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMG AMERIGRO	- 29)3
SALES ON	NL # 0313	100 001	SOUNTSIDE CITIWIDE	SALES REGISTED	R		BILL WEEK EN	_	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223982	12/14/12	000132	AMERIGROUP	ESPINAL, MARIA	113.00		1,907.44	I	
223983	1/04/13	000132	AMERIGROUP	FERNANDEZ, NORK	33.00		557.04	I	
223984	12/28/12	000132	AMERIGROUP	GUERRA, LORRAIN	72.00		1,215.36	I	
223985	1/04/13	000132	AMERIGROUP	HARDING, EDNA	12.00		202.56	I	
223986	12/14/12	000132	AMERIGROUP	RIVERA, CARMEN	85.00		1,434.80	I	
223987	1/04/13	000132	AMERIGROUP	WALTERS, BYRON	15.00		253.20	I	
223988	1/04/13	000132	AMERIGROUP	YOUNG, KALEILE	10.00		168.80	I	
				CUSTOMER	340.00	0.00	5,739.20		
				CATEGORY	340.00	0.00	5,739.20		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 HCP HEALTHCARE PA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
223989 223990 223991	1/04/13 1/04/13 1/04/13	000148 000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA TOWLES, ADA ZAMBRANO, ZOILA	45.00 16.00 8.00		759.60 I 270.08 I 135.04 I	
				CUSTOMER	69.00	0.00	1,164.72	
				CATEGORY	69.00	0.00	1,164.72	

RUN DATE SALES JRN	- , , -	- SUP SUNN LOC 001		REG NY NY LES REGISTER			-		DS CARE SYSTEMS 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223992 223993 223994 223995 223996	1/04/13 1/04/13 1/04/13 1/04/13 1/04/13	000172 000172 000172 000172 000172	INDEPENDENCE CARE SYSTEMS	AGOSTINI, MONSE AGOSTINI, MONSE JONES, VALERIE JONES, VALERIE MUSHAYEV, BORIS	5.75 24.00 4.00 16.00 20.00		91.43 381.60 63.60 254.40 318.00	I I I I	
				CUSTOMER	69.75	0.00	1,109.03		
				CATEGORY	69.75	0.00	1,109.03		

RUN DATE 01/09/13 SALES JRNL # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S				PAGE 1 - VCS VNSNY CHO BILL WEEK END	ICE SELECTHEALTH
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
223997 1/04/13 223998 1/04/13	000170 000170	VNSNY CHOICE SELECT VNSNY CHOICE SELECT		KARASSAVIDES, A KARASSAVIDES, A	7.00 28.00		120.12 480.48	I I
				CUSTOMER	35.00	0.00	600.60	
				 CATEGORY	35.00	0.00	600.60	

	E 01/09/13 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			-	- 29	97
SALES UP	KNT # 0312	TOC 001	SUNNYSIDE CITYWIDE REG S A L E				PAR PRIVATE BILL WEEK ENI	DING	1/11/13
									_,,
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
223999	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	ANGEL, LUCY	7 75		112.38	I	
224000	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	ESCOBAR, MARIA				Ī	
224001	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	HERNANDEZ, REGI			58.00	Ī	
224002	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	KOUTSOFTAS, NIC	4.00			I	
224003	11/30/12	000002	SUNNYSIDE COMMUNITY SERVICES	RAYZMAN, SOLOMO			58.00	I	
224004	12/07/12	000002	SUNNYSIDE COMMUNITY SERVICES	RAYZMAN, SOLOMO	4.00		58.00	I	
224005	12/28/12	000002	SUNNYSIDE COMMUNITY SERVICES	RAYZMAN, SOLOMO	4.00		58.00	I	
224006	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	VALDERRATEN, MA			72.50	I	
224007	1/04/13	000002	SUNNYSIDE COMMUNITY SERVICES	VARELAS, ANNA	4.00		58.00	I	
				CUSTOMER	40.50	0.00	587.26		
224008	1/04/13	000040	DUISIN, CHRISTINE	DUISIN, XENIA	8.00		130.00	I	
224009	1/04/13	000040	DUISIN, CHRISTINE	DUISIN, XENIA	16.00		248.00	I	
				CUSTOMER	24.00	0.00	378.00		
224010	1/04/13	000049	DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE	6 00		87.00	I	
224010	1/04/13	000049	DOMINICAN SISTERS FAM HITH	DIOP, SERIGNE			348.00	I	
224012	1/04/13	000049	DOMINICAN SISTERS FAM HLTH	MORSHELINA, NAS	5.75		83.38	I	
				CUSTOMER	35.75	0.00	518.38		
224013	1/04/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	I	
				CATEGORY	104.25	0.00	1,545.64		

RUN DATE 01/09/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	8
SALES JRNL # 0315	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CAS CHILDREN'	'S AID	SOCIETY
		S A	LES REGISTER			BILL WEEK END	DING	1/11/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
224014 12/28/12	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	10.00		155.00	I	
224015 1/04/13	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	5.00		77.50	I	
224016 1/04/13	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	15.00		232.50	I	
224017 1/04/13	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	11.75		182.13	I	
224018 1/04/13	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	16.00		248.00	I	
224019 1/04/13	000088	CHILDREN'S AID SOCIETY	VARGAS, BRANDON	3.50		54.25	I	
224020 1/04/13	000088	CHILDREN'S AID SOCIETY	VARGAS, BRANDON	7.50		116.25	I	
224021 1/04/13	000088	CHILDREN'S AID SOCIETY	VARGAS, JOHN	5.50		85.25	I	
224022 1/04/13	880000	CHILDREN'S AID SOCIETY	VARGAS, JOHN	7.50		116.25	I	
			CUSTOMER	81.75	0.00	1,267.13		
			CATEGORY	81.75	0.00	1,267.13		

	01/09/13 - L # 0315		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		I	PAGE 1 - PAR PRIVATE BILL WEEK ENDING	299 G 1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	, , -
224023	1/04/13	000098	MILDRED PANSE	PANSE, MILDRED	8.00		124.00 I	
				CATEGORY	8.00	0.00	124.00	

RUN DATE SALES JRN	- , , -	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 30 ELD ELDERSERVEHEA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
224024 224025 224026 224027	1/04/13 1/04/13 1/04/13 1/04/13	000101 000101 000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BEAN, ELMIRA BLACK, DOROTHY BLACK, DOROTHY	5.00 20.00 4.00 12.00		71.25 I 285.00 I 57.00 I 171.00 I	
				CUSTOMER	41.00	0.00	584.25	
				CATEGORY	41.00	0.00	584.25	

RUN DATE 01/09/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 301								
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			YSIDE CITYWIDE						- 30)2
SALES JRN	L # 0315	LOC 001	SUNNYSIDE CITYWIDE		NY			PAR PRIVATE		
				SALES R	EGISTE	R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	CRENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
224042	1/04/13	000155	ROSEMARY JIBAJA	,TTBA,T	A, ROSEMAR	72.00		1,188.00	т	
224043	1/04/13	000155	ROSEMARY JIBAJA		A, ROSEMAR	95.50		1,480.25	Ī	
	_, -, -,									
					CUSTOMER	167.50	0.00	2,668.25		
224044	1/04/13	000179	DOROTHY TABICKMAN	TABIC	KMAN, DORT	2.00		31.00	I	
224045	1/04/13	000179	DOROTHY TABICKMAN	TABIC	CKMAN, DORT	8.00		124.00	I	
					CUSTOMER	10.00	0.00	155.00		
004046	1 /04/10	000100			~	00.00		450 50	_	
224046	1/04/13	000183	STEPHEN EDEL		CANDACE	29.00		473.50	Ţ	
224047	1/04/13	000183	STEPHEN EDEL	EDEL,	CANDACE	51.75		802.13	I	
					CIICEOMED	00 75	0.00	1 275 62		
					CUSTOMER	80.75	0.00	1,275.63		
					CATEGORY	258.25	0.00	4,098.88		
					CAIEGURI	230.23	0.00	7,090.00		

RUN DATE 01/ SALES JRNL ‡	/09/13 - SUP SUNN # 0315 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGIST	E R		PAGE 1 HHH HHH HOME BILL WEEK END	
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
,	/04/13 000192 /04/13 000192	HHH LONG TERM HOME HLTH	- · · ·	8.00 16.00		120.00 240.00	I
			CUSTOMER	24.00	0.00	360.00	
			CATEGORY	24.00	0.00	360.00	

	01/09/13 - NL # 0315		TYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - PAR PRIVATE BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
224050 224051	1/04/13 1/04/13	000197 000197	KLEA THEOHARIS KLEA THEOHARIS		6.00 12.00		93.00 186.00	I I
						0.00	279.00	
224052 224053	1/04/13 1/04/13	000201 000201	DIANE CERVONE DIANE CERVONE	ESPINOZA, LUPE ESPINOZA, LUPE	4.00 15.75			I I
					19.75	0.00	306.13	
224054 224055	1/04/13 1/04/13	002215 002215	KEITH SALMON KEITH SALMON	LAWRANCE, LILLA LAWRANCE, LILLA	8.00 8.00		136.00 124.00	I I
				CUSTOMER	16.00	0.00	260.00	
224056 224057	1/04/13 1/04/13	003108 003108	NIGRO, CATHERINE NIGRO, CATHERINE	NIGRO, CATHERIN NIGRO, CATHERIN	4.00 16.00		62.00 248.00	I I
						0.00	310.00	
224058 224059	1/04/13 1/04/13	004784 004784	CAMILLERI, JOSEPH CAMILLERI, JOSEPH		5.00 15.00			I I
				CUSTOMER			270.00	
224060 224061	1/04/13 1/04/13	009498 009498	LOUIS LE NOACH LOUIS LE NOACH	LENOACH, LOUIS	6.00 3.00		102.00 46.50	I I
				CUSTOMER		0.00	148.50	
224062	1/04/13	009605	OLGA OBYMAKO	OBYMAKO, OLGA	3.00		46.50	I
224063	1/04/13	009752	PETER CAPORASO	CAPORASO, VINCE	12.00		204.00	I
224064 224065 224066 224067	12/21/12 12/28/12 1/04/13 1/04/13	009854 009854 009854 009854	HELEN TAYLOR HELEN TAYLOR HELEN TAYLOR HELEN TAYLOR	HERNANDEZ, FRAN HERNANDEZ, FRAN HERNANDEZ, FRAN HERNANDEZ, FRAN	2.00 2.00 2.00 2.00		31.00 31.00	I I I
				CUSTOMER	8.00	0.00	124.00	
224068	1/04/13	010269	ANGELINA MARASA	MARASA, ANGELIN	6.00		93.00	I
224069	1/04/13	010529	STEPHEN WEISS	WEISS, STELLA			102.00	I
224070 224071	1/04/13 1/04/13	010530 010530	DANA SITILDES DANA SITILDES	ANSELMI, PETER ANSELMI, PETER	7.75 12.00			I I
				CUSTOMER	19.75	0.00	311.75	

RUN DATE SALES JRN	. , ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 2 PAR PRIVATE	- 3	05
SALES UKI	и # 0313	LOC 001	SOUNTSIDE CITIWIDE	SALES REGISTI	E R		BILL WEEK EN	DING	1/11/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
224072 224073	1/04/13 1/04/13	011016 011016	MICHAEL SIANO MICHAEL SIANO	SIANO, ANDREW SIANO, ANDREW	6.00 24.00		81.00 324.00	I	
				CUSTOMER	30.00	0.00	405.00		
224074 224075	1/04/13 1/04/13	011060 011060	ROBIN WARREN CHARLES ROBIN WARREN CHARLES	WARREN, CYNTHIA WARREN, CYNTHIA	57.00 76.00		940.50 1,178.00	I	
				CUSTOMER	133.00	0.00	2,118.50		
224076 224077 224078	12/28/12 1/04/13 1/04/13	011394 011394 011394	HELGA JENSEN HELGA JENSEN HELGA JENSEN	JENSEN, HELGA JENSEN, HELGA JENSEN, HELGA	70.00 30.00 40.00		1,115.00 495.00 620.00	I I I	
				CUSTOMER	140.00	0.00	2,230.00		
224079	1/04/13	011630	JAMES BENZ	CAGAN, RUMANDO	8.00		124.00	I	
224080	1/04/13	012165	UNA MCCULLAGH	MCCULLAGH, UNA	3.00		46.50	I	
				CATEGORY	471.50	0.00	7,378.88		
				LOCATION	27,609.90	0.00	436,024.05		
				COMPANY	27,609.90	0.00	436,024.05		

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SALES JRNL # 0315 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 1/11/13

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

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