RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE

RUN DAIL	03/06/13 -	SUP SUMM	YSIDE CITYWIDE				PAGE 1	. –	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			SHP SENIOR H	EALTH	PARTNERS
			S	REG NY NY A L E S R E G I S T E R			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231163	3/01/13	000082	CENTOD DENITU DADTMEDC	ATTABET ANCETA	4 00		56 06	I	
		000002	SENIOR HEALIN PARTNERS	ALVAREZ, ANGELA	4.00		50.90	± +	
231164	3/01/13	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		56.96	I	
231165	2/22/13	000082	SENIOR HEALTH PARTNERS	APOSTOLOVA, LJU	48.00		683.52	I	
231166	3/01/13	000082	SENIOR HEALTH PARTNERS	BROOKS, NATALIE	18.00		256.32	I	
231167	3/01/13	000082	SENIOR HEALTH PARTNERS	BROOKS, NATALIE	4.00		56.96	I	
231168	3/01/13	000082	SENIOR HEALTH PARTNERS	CARRILLO, MARIA	20.00		285.00	I	
231169	3/01/13	000082	SENIOR HEALTH PARTNERS	CARRILLO, MARIA	5.00		71.25	I	
231170	3/01/13	000082	SENIOR HEALTH PARTNERS	COLON, RAYMUNDA	30.00		427.20	I	
231171	3/01/13	000082	SENTOR HEALTH PARTNERS	CHEVA RAFAELA	72.00		1.025.28	I	
231172	3/01/13	000082	CENTOD DENITU DADTNEDC	CHEVA DAFAFIA	12 00		170 88	Ī	
231172	3/01/13	000082	CENTOR HEALTH DARWERS	DETECTIO VONDET	0.00		120 16	Ī	
		000002	SENIOR REALIR PARTNERS	DEJECTIC ACADEL	2.00		120.10	± +	
231174	3/01/13	000082	SENIOR HEALIH PARINERS	DEJESUS, ISABEL	3.00		42.72	I	
231175	3/01/13	000082	SENIOR HEALTH PARTNERS	ESCANIO, ANTONI	8.00		113.92	I	
231176	3/01/13	000082	SENIOR HEALTH PARTNERS	ESCANIO, ANTONI	2.00		28.48	I	
231177	3/01/13	000082	SENIOR HEALTH PARTNERS	ESTRADA, MIRIAM	36.00		512.64	I	
231178	3/01/13	000082	SENIOR HEALTH PARTNERS	ESTRADA, MIRIAM	8.00		113.92	I	
231179	3/01/13	000082	SENIOR HEALTH PARTNERS	FULLER, WILLIAM	60.00		854.40	I	
231180	3/01/13	000082	SENIOR HEALTH PARTNERS	FULLER, WILLIAM	10.00		142.40	I	
231181	3/01/13	000082	SENIOR HEALTH PARTNERS	GARCIA, VICTORI	15.00		213.60	I	
231182	3/01/13	000082	SENTOR HEALTH PARTNERS	GARCIA, VICTORI	5.00		71.20	I	
231183	3/01/13	000082	SENTOR HEALTH PARTNERS	GHILIOTTY FLOR	27 00		384 48	Ī	
231184	3/01/13	000082	SENTOR HEALTH DARTNERS	CHILIOTTY FLOR	5 00		71 20	Ī	
231185	2/08/13	000082	CENTOR HEALTH PARTNERS	COODWIN CLYDE	70 00		996 80	Ī	
231186	3/01/13	000082	CENTOR HEALTH PARTNERS	COODWIN, CLIDE	10.00		142.40	I	
231187	3/01/13	000082	CENTOR HEALTH PARTNERS	CDARCTEIN III	4 00		900 00	Ī	
		000002	SENIOR REALIN PARTNERS	GRAFSIEIN, LILL	4.00		200.00	± +	
231188	3/01/13	000082	SENIOR HEALIH PARINERS	HARIDIN, KHAMAI	28.00		398.72	I	
231189	3/01/13	000082	SENIOR HEALTH PARTNERS	HARIDIN, KHAMAT	5.00		/1.20	I	
231190	3/01/13	000082	SENTOR HEALTH PARTNERS	HARIDIN, RAMDIA	104.00		1,480.96	I	
231191	3/01/13	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	19.00		270.56	I	
231192	3/01/13	000082	SENIOR HEALTH PARTNERS	HARLEY, ETHEL	4.00		56.96	I	
231193	3/01/13	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	32.00		455.68	I	
231194	3/01/13	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	9.00		128.16	I	
231195	3/01/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, MARI	6.00		1,200.00	I	
231196	3/01/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, MARI	1.00		200.00	I	
231197	3/01/13	000082	SENIOR HEALTH PARTNERS	MALDONADO, VICE	4.00		800.00	I	
231198	3/01/13	000082	SENIOR HEALTH PARTNERS	MARTINEZ, EMMA	4.00		56.96	I	
231199	3/01/13	000082	SENTOR HEALTH PARTNERS	MARTINEZ, ROSAR	8.00		113.92	Ī	
231200	3/01/13	000082	SENTOR HEALTH DARTNERS	MATOS AIREA	40 00		569 60	Ī	
231200	3/01/13	000082	CENTOR HEALTH TARTNERS	MATOR, AUREA	7 00		00.60	Ī	
231201	3/01/13	000082	CENTOR HEALTH PARTNERS	MAYNADD IIIIIA	12 00		170 00	I	
		000002	SENIOR REALIN PARTNERS	MAYNARD, LILLIA	12.00		170.00		
231203	3/01/13	000082	SENIOR HEALTH PARTNERS	MAINAKU, LILLIA	0.00		05.44	I	
231204	3/01/13	000082	SENIUR HEALTH PARTNERS	MERCADO, ELVA	34.00		484.16	I	
231205	3/01/13	000082	SENIOR HEALTH PARTNERS	MERCADO, ELVA	6.00		85.44	I	
231206	3/01/13	000082	SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	66.00		939.84	I	
231207	3/01/13	000082	SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	10.00		142.40	I	
231208	3/01/13	000082	SENIOR HEALTH PARTNERS	ORTIZ, SANTIAGO	40.00		569.60	I	
231209	3/01/13	000082	SENIOR HEALTH PARTNERS	ORTIZ, SANTIAGO	10.00		142.40	I	
231210	3/01/13	000082	SENIOR HEALTH PARTNERS	OSBORNE, DOROTH	16.00		227.84	I	
231211	3/01/13	000082	SENIOR HEALTH PARTNERS	REFERENCE ALVAREZ, ANGELA ALVAREZ, ANGELA ALVAREZ, ANGELA APOSTOLOVA, LJU BROOKS, NATALIE BROOKS, NATALIE CARRILLO, MARIA CARRILLO, MARIA COLON, RAYMUNDA CUEVA, RAFAELA CUEVA, RAFAELA DEJESUS, YSABEL DEJESUS, YSABEL ESCANIO, ANTONI ESCANIO, ANTONI ESTRADA, MIRIAM ESTRADA, MIRIAM FULLER, WILLIAM FULLER, WILLIAM GARCIA, VICTORI GHILIOTTY, FLOR GODWIN, CLYDE GOODWIN, CLYDE GOODWIN, CLYDE GOODWIN, CHYDE GRAFSTEIN, LILL HARIDIN, KHAMAT HARIDIN, RAMDIA HARIDIN, R	32.00		455.68	I	
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RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY A L E S R E G I S T E I			PAGE 2	_	2
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			SHP SENIOR H	EALTH	PARTNERS
			S	ALES REGISTED	R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231212	3/01/13	000082	SENIOR HEALTH PARTNERS	PERALTA, ANTONI	8.00		113.92	I	
231213	1/18/13	000082	SENIOR HEALTH PARTNERS	PIZARRO, RAMONA	1.00		200.00	I	
231214	3/01/13	000082	SENIOR HEALTH PARTNERS	PIZARRO, RAMONA	4.00		800.00	I	
231215	3/01/13	000082	SENIOR HEALTH PARTNERS	POLANCO, ANTONI	24.00		341.76	I	
231216	3/01/13	000082	SENIOR HEALTH PARTNERS	POLANCO, ANTONI	4.00		56.96	I	
231217	3/01/13	000082	SENIOR HEALTH PARTNERS	POLANCO, RAMON	12.00		170.88	I	
231218	3/01/13	000082	SENIOR HEALTH PARTNERS	POLANCO, RAMON	2.00		28.48	I	
231219	2/22/13	000082	SENIOR HEALTH PARTNERS	RAMOS, ISABEL	32.00		455.68	I	
231220	3/01/13	000082	SENIOR HEALTH PARTNERS	RAMOS, ISABEL	7.00		99.68	I	
231221	3/01/13	000082	SENIOR HEALTH PARTNERS	RIVERA, BRIGIDA	20.00		284.80	I	
231222	3/01/13	000082	SENTOR HEALTH PARTNERS	RIVERA BRIGIDA	5 00		71 20	T	
231223	3/01/13	000082	SENTOR HEALTH PARTNERS	RODRIGUEZ -1 M	12 00		170 88	Ť	
231224	3/01/13	000082	SENTOR HEALTH DARTNERS	RODRIGUEZ 1, M	4 00		56 96	T	
231225	3/01/13	000082	CENTOR HEALTH PARTNERS	PODPICIEZ DAIII.	6.00		1 200 00	т	
231225	3/01/13	000082	CENTOR HEALTH PARTNERS	DODDICHEZ, FAUL	1 00		200.00		
231227	3/01/13	000082	CENTOR HEALTH PARTNERS	RODRIGUEZ, PAUL	20.00		200.00		
231227	3/01/13	000082	SENIOR REALIN PARINERS	ROSA, CARMEN	20.00		204.0U 71.00	± +	
231228	3/01/13	000082	SENIOR HEALIH PARINERS	ROSA, CARMEN	3.00		71.20		
231229		000082	SENIOR HEALIH PARINERS	ROSADO, CARMEN	48.00		170 00		
	3/01/13	000082	SENIOR HEALTH PARTNERS	ROSADO, CARMEN	12.00		170.88	Τ	
231231	3/01/13	000082	SENIOR HEALTH PARTNERS	RUIZ, MIRTA	27.00		384.48	Ι	
231232	3/01/13	000082	SENIOR HEALTH PARTNERS	SALICRUP, CARME	8.00		114.00	Τ_	
231233	3/01/13	000082	SENIOR HEALTH PARTNERS	SALICRUP, CARME	4.00		56.96	I	
231234	3/01/13	000082	SENIOR HEALTH PARTNERS	SIERRA, DOMINGA	32.00		455.68	I	
231235	3/01/13	000082	SENIOR HEALTH PARTNERS	SIERRA, DOMINGA	8.00		113.92	I	
231236	2/15/13	000082	SENIOR HEALTH PARTNERS	SIERRA, MIRIAM	48.00		684.00	I	
231237	3/01/13	000082	SENIOR HEALTH PARTNERS	SIERRA, MIRIAM	8.00		114.00	I	
231238	3/01/13	000082	SENIOR HEALTH PARTNERS	SIMON, LUPE	8.00		113.92	I	
231239	3/01/13	000082	SENIOR HEALTH PARTNERS	SOTO, AGRIPINA	16.00		227.84	I	
231240	3/01/13	000082	SENIOR HEALTH PARTNERS	SOTO, AGRIPINA	4.00		56.96	I	
231241	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, ANTONIA	6.00		1,200.00	I	
231242	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, ANTONIA	1.00		200.00	I	
231243	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, JOSE	16.00		227.84	I	
231244	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, JOSE	4.00		56.96	I	
231245	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, MONSERR	12.00		170.88	I	
231246	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRES, MONSERR	4.00		56.96	I	
231247	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRESCAMPOS, J	32.00		456.00	Ī	
231248	3/01/13	000082	SENIOR HEALTH PARTNERS	TORRESCAMPOS. J	8.00		113.92	T	
231249	3/01/13	000082	SENTOR HEALTH PARTNERS	WOO LUZ	4 00		56 96	T	
231250	3/01/13	000082	SENTOR HEALTH DARTNERS	ZADATA SIMON	8 00		113 92	T	
231250	3/01/13	000082	CENTOR HEALTH PARTNERS	ZALATA, SIMON	4 00		56 96	т	
231231	3/01/13	000002	SENTON HEADTH FANTINERS	ZAFATA, SIMON					
				CUSTOMER	1,481.00	0.00	27,406.49		
				PERALTA, ANTONI PIZARRO, RAMONA PIZARRO, RAMONA PIZARRO, RAMONA POLANCO, ANTONI POLANCO, RAMON POLANCO, RAMON POLANCO, RAMON POLANCO, RAMON POLANCO, RAMON RAMOS, ISABEL RAMOS, ISABEL RIVERA, BRIGIDA RIVERA, BRIGIDA RIVERA, BRIGIDA RODRIGUEZ -1, M RODRIGUEZ -1, M RODRIGUEZ, PAUL RODRIGUEZ, PAUL ROSA, CARMEN ROSA, CARMEN ROSADO, CARMEN ROSADO, CARMEN RUIZ, MIRTA SALICRUP, CARME SALICRUP, CARME SIERRA, DOMINGA SIERRA, MIRIAM SIMON, LUPE SOTO, AGRIPINA TORRES, ANTONIA TORRES, ANTONIA TORRES, JOSE TORRES, MONSERR TORRES, MONSERR TORRESCAMPOS, J WOO, LUZ ZAPATA, SIMON ZAPATA, SIMON CUSTOMER	1,481.00	0.00	27,406.49		
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RUN DATE	03/06/13	- SUP SUNN	IYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 -	3
SALES OR	10 # 0323	HOC 001	SONNISIDE CITIWIDE	ALES REGISTER			BILL WEEK ENDIN	IG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231252	3/01/13	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	48.00		699.84	<u>.</u>
231253	3/01/13	800000	VISITING NURSE SERVICE	ABINANTI, IRENE	8.00		128.48	- -
231254	3/01/13	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	30.00		437.40	•
231255	3/01/13	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	5.00		80.30	• •
231256	3/01/13	800000	VISITING NURSE SERVICE	ADAMES, OLGA	20.00		291.60	<u>.</u>
231257	3/01/13	800000	VISITING NURSE SERVICE	ADAMES, OLGA	5.00		80.30	<u>.</u>
231258	3/01/13	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	30.00		437.40	• •
231259	3/01/13	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	5.00		80.30	
231260	3/01/13	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	59.75		871.16	• •
231261	3/01/13	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	10.00		160.60	• •
231262	3/01/13	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	6.00		1,049.76	• •
231263	3/01/13	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	1.00		192.72	• •
231264	3/01/13	800000	VISITING NURSE SERVICE	AFZAL, AMIR	4.00		58.32	• •
231265	2/22/13	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	7.00		102.06	• •
231266	3/01/13	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	38.25		557.69	• •
231267	3/01/13	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	8.00		128.48	• •
231268	2/08/13	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	7.00		102.06	• •
231269	2/22/13	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	7.00		102.06	-
231270	3/01/13	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	42.00		612.36	-
231271	3/01/13	800000	VISITING NURSE SERVICE	ABINANTI, IRENE ABINANTI, IRENE ACOSTA, ALBERTO ACOSTA, ALBERTO ACOSTA, ALBERTO ADAMES, OLGA ADAMES, OLGA ADAMES, RICARDO ADAMES, RICARDO ADAMES, RICARDO ADAMS, MYRIAM ADUN, JEANETTE ADUN, JEANETTE AFZAL, AMIR AGUILAR, ZORAID AGUILAR, ZORAID AGUILAR, ZORAID AGUILAR-PROCE, AGUILAR-PROCE, AGUILAR-PROCE, AGUILAR-PROCE,	7.00		112.42	• •
				CUSTOMER	348.00	0.00	6,285.31	
						0.00	6,285.31	

			YSIDE CITYWIDE	DDG 377			PAGE 1 -	4
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
231272	3/01/13	000008	VISITING NURSE SERVICE	AHMED, BALAL	24.00		349.92	Ε
231273 231274	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE	AHMED, BALAL	6.25 4.00		100.38 58.32	[-
2312/4	3/01/13	000008	VISITING NURSE SERVICE	ALBER, ARLENE	4.00		58.34	
				CUSTOMER	34.25	0.00	508.62	
				CATEGORY	34.25	0.00	508.62	

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 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE#	DATE 3/01/13	CUST NO	CUSTOMER NAME VISITING NURSE SERVICE	REFERENCE ALEKSANDORVA, S	HOURS	TAX AMT		TYP SURPLUS
231273	37 017 13	00000	VIBILING NORDE SERVICE	CATEGORY	20.00	0.00	291.60	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	-	6
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO		
				SALES REGISTER			BILL WEEK ENDI	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP	SURPLUS
231276	2/15/13	000008	VISITING NURSE SERVICE	E ALFEREZ, GLORIA	12.00		174.96	I	
231277	3/01/13	800000	VISITING NURSE SERVICE	E ALFEREZ, GLORIA	18.00		262.44	I	
231278	3/01/13	800000	VISITING NURSE SERVICE	E ALFEREZ, GLORIA	7.00		112.42	I	
231279	3/01/13	800000	VISITING NURSE SERVICE	E ALMANZAR, REMIG	1.00		14.58	I	
				CUSTOMER	38.00	0.00	564.40		
				 CATEGORY	38.00	0.00	564.40		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADU	7
SALES OWN	11 # 0323	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231280 231281	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ALVAREZ, NAZARE ALVAREZ, NAZARE	48.00 8.00		699.84 I 128.48 I	
				CUSTOMER	56.00	0.00	828.32	
				CATEGORY	56.00	0.00	828.32	

	- SUP SUNNYSIDE CITYWIDE	WIDE DEC NE	ATT Z		PAGE 1 -	8
SALES JRNL # 0323	LOC 001 SUNNYSIDE CITY		NY EGISTER		ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFE	RENCE F	HOURS TAX AMT	AMOUNT TYP	SURPLUS
231282 3/01/13 231283 3/01/13	000008 VISITING NURSE 000008 VISITING NURSE		JAMES 1	12.00 3.00	174.96 I 48.18 I	
			CUSTOMER 1	15.00 0.00	223.14	
			CATEGORY 1	15.00 0.00	223.14	

			YSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	-	9
SALES JRN	ш # 0323	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231284	3/01/13	000008	VISITING NURSE SERVICE	ANANIA, GLYGERI	25.75		375.44	I	
231285	3/01/13	800000	VISITING NURSE SERVICE	ANANIA, GLYGERI	8.00		128.48	I	
231286	3/01/13	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	16.00		233.28	I	
231287	3/01/13	800000	VISITING NURSE SERVICE	ANDINO, ESTEBAN	3.75		60.23	I	
231288	3/01/13	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	48.00		699.84	I	
231289	3/01/13	800000	VISITING NURSE SERVICE	ANDRADE, LOLA	8.00		128.48	I	
231290	3/01/13	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	54.00		787.32	I	
231291	3/01/13	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	9.00		144.54	I	
231292	3/01/13	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	48.00		699.84	I	
231293	3/01/13	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	8.00		128.48	I	
				CUSTOMER	228.50	0.00	3,385.93		
				CATEGORY	228.50	0.00	3,385.93		

			YSIDE CITYWIDE				PAGE 1 -	- 10
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
			S	SALES REGISTE	R		BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
231294	3/01/13	000008	VISITING NURSE SERVICE	ANGULO, ELCY	28.00		408.24	I
231295	3/01/13	800000	VISITING NURSE SERVICE	ANGULO, ELCY	6.75		108.41	I
231296	1/25/13	000008	VISITING NURSE SERVICE	ANUT, ALICE	8.00		116.64	I
231297	3/01/13	800000	VISITING NURSE SERVICE	ANUT, ALICE	51.75		754.52	I
231298	3/01/13	800000	VISITING NURSE SERVICE	ANUT, ALICE	9.00		144.54	I
				CUSTOMER	103.50	0.00	1,532.35	
				CATEGORY	103.50	0.00	1,532.35	

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RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.2
SALES OWN	ш # 0525	HOC 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231301 231302	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	297.52	

RUN DATE 03/06/ SALES JRNL # 03			REG NY NY			PAGE 1 - 1 VCP CHOICE LHCSA	.3
	200 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231303 3/01/		VISITING NURSE SERVICE	ARGENTINA, CESS	8.00		116.64 I	
231304 3/01/ 231305 3/01/		VISITING NURSE SERVICE VISITING NURSE SERVICE	ARIAS, MAGDALEN ARIAS, MAGDALEN	47.25 8.00		688.91 I 128.48 I	
			CUSTOMER	63.25	0.00	934.03	
			CATEGORY	63.25	0.00	934.03	

RUN DATE 03 SALES JRNL :	/06/13 - SUP SUNN # 0323 LOC 001	SUNNYSIDE CITYWIDE	-	NY E G I S T E	R		PAGE 1 LTC NURSING I BILL WEEK ENI		
INVOICE#	DATE CUST NO	CUSTOMER NAME		RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	/01/13 000008 /01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE			16.75 4.00		244.22 64.24	I I	
				CUSTOMER	20.75	0.00	308.46		
				 CATEGORY	 20.75	0.00	308.46		

			YSIDE CITYWIDE					15
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231308 231309	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	-,	8.00 4.00		116.64 I 64.24 I	
				CUSTOMER	12.00	0.00	180.88	
				CATEGORY	12.00	0.00	180.88	

RUN DATE 03/06/13 SALES JRNL # 0323		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 16 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231310 3/01/13 231311 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	25.00 4.75		364.50 I 76.29 I
			CUSTOMER	29.75	0.00	440.79
			CATEGORY	29.75	0.00	440.79

RUN DATE	, , -		YSIDE CITYWIDE	DDG NV NV			PAGE 1 -	± /
SALES JRN	L # U3∠3	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER)		VCP CHOICE LHO	
			5	ALES KEGISIEK			DILL MEEK ENDI	ING 3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
231312	3/01/13	800000	VISITING NURSE SERVICE	BANEGAS, SANTOS	15.00		218.70	I
231313	3/01/13	000008	VISITING NURSE SERVICE	BANEGAS, SANTOS	5.00		80.30	I
231314	3/01/13	000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	47.50		692.55	I
231315	3/01/13	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	8.00		128.48	I
231316	3/01/13	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	48.00		699.84	I
231317	3/01/13	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	12.00		192.72	I
				 CUSTOMER	135.50	0.00	2,012.59	
				COSTOMER	133.30	0.00	2,012.59	
				CATEGORY	135.50	0.00	2,012.59	

			YSIDE CITYWIDE				PAGE 1 -	18	
SALES JRN	L # 0323	LOC 001		REG NY NY			LTC NURSING HOMEW		
			•	SALES REGISTER			BILL WEEK ENDING	3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
231318	2/01/13	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		102.06 I		
				CATEGORY	7.00	0.00	102.06		

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 ADU ADULT BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231319 231320 231321 231322	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BATTLE, JEANETT BATTLE, JEANETT BAZAN, VICTORIA BAZAN, VICTORIA	41.75 7.00 35.00 7.00		608.72 112.42 510.30 112.42	I I I	
				CUSTOMER	90.75	0.00	1,343.86		
				CATEGORY	90.75	0.00	1,343.86		

			YSIDE CITYWIDE				PAGE 1 -	20
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231323	3/01/13	000008	VISITING NURSE SERVICE	BERENBLIT, SARA	3.00		43.74 I	
231324	3/01/13	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	3.00		48.18 I	
				CUSTOMER	6.00	0.00	91.92	
				COSTOMER	6.00	0.00	91.92	
				CATEGORY	6.00	0.00	91.92	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 21 LTC NURSING HOMEW/O W BILL WEEK ENDING 3/	NALLS (LT '08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
231325 231326	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	26.00 7.00		379.08 I 112.42 I	
				CUSTOMER	33.00	0.00	491.50	
				CATEGORY	33.00	0.00	491.50	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	22
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231327	3/01/13	000008	VISITING NURSE SERVICE	BHATT, JYOTI	36.00		524.88 I	
231328	3/01/13	800000	VISITING NURSE SERVICE	BHATT, JYOTI	6.00		96.36 I	
				CUSTOMER	42.00	0.00	621.24	
				CATEGORY	42.00	0.00	621.24	

RUN DATE 03/06 SALES JRNL # 0			REG NY NY	D.		PAGE 1 - LTC NURSING HON	
			SALES REGISTE	R		BILL WEEK ENDIN	NG 3/08/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
231329 3/01 231330 3/01		VISITING NURSE SERVICE VISITING NURSE SERVICE	, , , , , , , , , , , , , , , , , , , ,	18.00 6.00		262.44 96.36	[[
			CUSTOMER	24.00	0.00	358.80	
			 CATEGORY	24.00	0.00	358.80	

			YSIDE CITYWIDE				PAGE 1 - 24	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
231331 231332	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BHULLA, JIWAN BHULLA, JIWAN	40.00 10.00		583.20 I 160.60 I	
				CUSTOMER	50.00	0.00	743.80	
				CATEGORY	50.00	0.00	743.80	

RUN	DATE (03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	25
SALE	ES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
				5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVC	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	P SURPLUS
2313	333	3/01/13	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	24.00		349.92 I	
					CATEGORY	24.00	0.00	349.92	

RUN DATE	IN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 26										
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA			
			S	SALES REGISTER			BILL WEEK ENDIN	IG 3/08/13			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS			
231334	3/01/13	000008	VISITING NURSE SERVICE	BOJORQUEZDECHA,	35.00		510.30 I	- -			
231335	3/01/13	800000	VISITING NURSE SERVICE	BOJORQUEZDECHA,	6.00		96.36 I	<u>-</u>			
231336	3/01/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	16.00		233.28 I	<u>-</u>			
231337	3/01/13	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	4.00		64.24 I	<u>.</u> -			
				CUSTOMER	61.00	0.00	904.18				
				CATEGORY	61.00	0.00	904.18				

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	27
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
231338	3/01/13	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	19.75		287.96 I	
231339	3/01/13	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	5.00		80.30 I	
				CUSTOMER	24.75	0.00	368.26	
				CATEGORY	 24.75	0.00	368.26	

		03/06/13 - L # 0323		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	28
J.F	MAU CALLA	ц # 0323	HOC 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
IN	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
23	31340	3/01/13	800000	VISITING NURSE SERVICE	BOOTLE, RONALD	1.00		16.06 I	
					CATEGORY	1.00	0.00	16.06	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 -	20
SALES JRN	L # U3Z3	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			VCP CHOICE LHO BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
231341 231342	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BORYSEWICZ, MAR BORYSEWICZ, MAR	8.00 4.00		116.64 64.24	I I
				CUSTOMER	12.00	0.00	180.88	
				CATEGORY	12.00	0.00	180.88	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	MEW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231343	3/01/13	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	11.00		160.38	I
				CATEGORY	11.00	0.00	160.38	

RUN DATE SALES JRN	03/06/13 -	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI		31
SALES UKN	ш # 0323	TOC 001		LES REGISTER	1		BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231344	3/01/13	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	18.00		262.44	I	
231345	3/01/13	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	5.75		92.35	± +	
				•					
231346	3/01/13	000008	VISITING NURSE SERVICE	BOYLAN, FRANK			729.00	Τ	
231347	3/01/13	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	8.00		128.48	I	
231348	3/01/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	71.25		1,038.83	I	
231349	3/01/13	800000	VISITING NURSE SERVICE	BRACERO, HELEN	12.00		192.72	I	
231350	3/01/13	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	6.00		87.48	I	
231351	3/01/13	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	3.00		48.18	I	
231352	3/01/13	000008	VISITING NURSE SERVICE	BURITICA, INES	20.00		291.60	I	
231353	3/01/13	000008	VISITING NURSE SERVICE	BURITICA, INES	5.00		80.30	T	
231354	3/01/13	000008	VISITING NURSE SERVICE	BURNS, MARGARET	8.00		116.64	T	
231334	3/01/13	000000	VISITING NORSE SERVICE	BORNS, MARGAREI	0.00		110.04		
				CUSTOMER	207.00	0.00	3,068.02		
				 CATEGORY	207.00	0.00	3,068.02		

RUN DATE 03 SALES JRNL		UNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 32
SALES VICIL	# 0323 HOC 0		SALES REGISTER			BILL WEEK ENDI	ING 3/08/13
INVOICE#	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	3/01/13 00000 3/01/13 00000		BURNS, MARGARET BURNS, MARGARET	39.75 8.00		579.56 128.48	I I
			CUSTOMER	47.75	0.00	708.04	
			CATEGORY	47.75	0.00	708.04	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3 LAD NURSING HOME W BILL WEEK ENDING	33 W/O WALLS LT 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231357 231358	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	48.00 8.00		699.84 I 128.48 I	
				CUSTOMER	56.00	0.00	828.32	
				CATEGORY	56.00	0.00	828.32	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	J 1
SALES UKN	ш # 0323	TOC 001		ALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
231359	3/01/13	000008	VISITING NURSE SERVICE	CABA, PURA	8.00		116.64	I
231360	3/01/13	000008	VISITING NURSE SERVICE	CABA, PURA	2.00		32.12	I
231361	3/01/13	800000	VISITING NURSE SERVICE	CABRERA, HERMIN	16.00		233.28	I
231362	3/01/13	800000	VISITING NURSE SERVICE	CABRERA, HERMIN	4.00		64.24	I
231363	3/01/13	800000	VISITING NURSE SERVICE	CAIPO, MATILDE	28.00		408.24	I
231364	3/01/13	800000	VISITING NURSE SERVICE	CAIPO, MATILDE	7.00		112.42	I
				CUSTOMER	65.00	0.00	966.94	
				CATEGORY	65.00	0.00	966.94	

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 - ADU ADULT BILL WEEK ENDING	35 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231365	3/01/13	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	50.00		729.00 I	
				CATEGORY	50.00	0.00	729.00	

-	03/06/13 -		YSIDE CITYWIDE	DEG NY NY			11101		36
SALES JRN	IL # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		3/08/13
				ALLO RECIDIER			DIDD WDBK BM	71110	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
221266	2 /01 /12	000000	TIT CITETING NUDGE CERVITOR	CALADDO TOGEDU	10.00		145 00	-	
231366	3/01/13	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	10.00		145.80	Τ	
231367	3/01/13	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	10.00		160.60	I	
231368	3/01/13	800000	VISITING NURSE SERVICE	CALDERON, FRANC	47.75		696.20	I	
231369	3/01/13	800000	VISITING NURSE SERVICE	CALDERON, FRANC	7.75		124.47	I	
231370	3/01/13	000008	VISITING NURSE SERVICE	CAMBARA, JOSEFA	48.00		699.84	I	
231371	3/01/13	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	8.00		128.48	I	
				CUSTOMER	131.50	0.00	1,955.39		
				CATEGORY	131.50	0.00	1,955.39		
							,		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	NY E G I S T E	7 P		PAGE 1 LTC NURSING BILL WEEK EN	HOMEW,	37 /O WALLS (LT 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231372 231373	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ADELINA ADELINA	36.00 6.00		524.88 96.36	I I	
				CUSTOMER	42.00	0.00	621.24		
				- CATEGORY	42.00	0.00	621.24		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 38	
SALES UKN	ш # 0323	TOC 001		SALES REGISTER			BILL WEEK END	ING 3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
231374 231375	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CAPEHART, KIM CAPEHART, KIM	2.50 3.00		36.45 48.18	I I	
				CUSTOMER	5.50	0.00	84.63		
				CATEGORY	 5.50	0.00	84.63		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		39
511225 0141	_	200 001		SALES REGISTER			BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231376	3/01/13	000008	VISITING NURSE SERVICE		71.75		1,046.12		
231377 231378	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 23.00		192.72 335.34	I T	
	3,01,13	00000	VIBILIAN NONDE DENVIOL						
				CUSTOMER	106.75	0.00	1,574.18		
				CATEGORY	106.75	0.00	1,574.18		

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 - 40)
SALES JRN	L # U323	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	3/08/13
			_					-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231379	3/01/13	000008	VISITING NURSE SERVICE	CADDATAL MEDGE	6 00		87.48 I	
231379	3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARBAJAL, MERCE CARBAJAL, MERCE	6.00 6.00		96.36 I	
231381	3/01/13	000008	VISITING NURSE SERVICE	CARDONA, MARIA	20.00		291.60 I	
				CUSTOMER	32.00	0.00	475.44	
				CATEGORY	32.00	0.00	475.44	

	03/06/13 - IL # 0323		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		41
SALES UKN	ш # 0323	LOC 001		ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231382	2/22/13	000008	VISITING NURSE SERVICE	CARDOSO, ORLAND	12.00		174.96	I	
231383	3/01/13	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	71.25		1,038.83	I	
231384	3/01/13	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	12.00		192.72	I	
231385	2/15/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
231386	2/22/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
231387	3/01/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	20.00		291.60	I	
231388	3/01/13	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		80.30	I	
231389	3/01/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	16.00		233.28	I	
231390	3/01/13	800000	VISITING NURSE SERVICE	CARLOS, JULIA	4.00		64.24	I	
				CUSTOMER	150.25	0.00	2,221.73		
				CATEGORY	150.25	0.00	2,221.73		

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 42
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HO	ME W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDI	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231391	3/01/13	000008	VISITING NURSE SERVICE	CARTAGENA, FRAN	48.00		699.84	I
231392	3/01/13	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	8.00		128.48	I
				CUSTOMER	56.00	0.00	828.32	
				CATEGORY	56.00	0.00	828.32	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	43
BALLED OIGN	ш _т 0323	100 001		A L E S R E G I S T E R			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231393	2/01/13	800000	VISITING NURSE SERVICE	CASTANEDA, JOSE	5.00		72.90 I	
231394	2/22/13	000008	VISITING NURSE SERVICE	CASTANEDA, JOSE	5.00		72.90 I	
231395	3/01/13	800000	VISITING NURSE SERVICE	CASTANEDA, JOSE	25.00		364.50 I	
231396	3/01/13	800000	VISITING NURSE SERVICE	CASTANEDA, JOSE	6.00		96.36 I	
231397	3/01/13	800000	VISITING NURSE SERVICE	CAVATAIO, MILDR	8.00		116.64 I	
231398	3/01/13	800000	VISITING NURSE SERVICE	CAVATAIO, MILDR	4.00		64.24 I	
				CUSTOMER	53.00	0.00	787.54	
				CATEGORY	53.00	0.00	787.54	

			TYSIDE CITYWIDE	DEG NEV NEV			PAGE 1		14
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		3/08/13
			5				DIED WEEK BIVI	71110	3700713
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231399	3/01/13	000008	VICITING MIDCE CEDVICE	CEDALLOS CLEME	16.00		233.28	Т	
	-, -, -		VISITING NURSE SERVICE	CEBALLOS, CLEME				Τ_	
231400	3/01/13	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	4.00		64.24	Τ	
231401	3/01/13	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	21.00		306.18	I	
231402	3/01/13	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	7.00		112.42	I	
231403	3/01/13	800000	VISITING NURSE SERVICE	CERRA, ADA	8.00		116.64	I	
231404	3/01/13	000008	VISITING NURSE SERVICE	CERRA, ADA	4.00		64.24	Ī	
231405	3/01/13	000008	VISITING NURSE SERVICE	CESPEDES, CRIST	20.00		291.60	I	
				CLICEOMED	00.00	0.00	1 100 60		
				CUSTOMER	80.00	0.00	1,188.60		
				CATEGORY	80.00	0.00	1,188.60		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	45
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING H	HOME 1	W/O WALLS LT
			5	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231406	3/01/13	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	17.00		247.87	I	
231407	3/01/13	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	4.00		64.24	I	
							210 11		
				CUSTOMER	21.00	0.00	312.11		
				CATEGORY	21.00	0.00	312.11		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 46
BALLS OIL	ш т 0323	100 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231408 231409 231410	3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CHARLES PIERRE, CHARLES PIERRE, CHAUCA, PEDRO	24.00 6.00 10.00		349.92 96.36 160.60	I I I
				CUSTOMER	40.00	0.00	606.88	
				CATEGORY	40.00	0.00	606.88	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231411	3/01/13	000008	VISITING NURSE SERVICE	CHIANETTA, JOSE	28.00		408.24 I	
231412	3/01/13	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	7.00		112.42 I	
				CUSTOMER	35.00	0.00	520.66	
				CATEGORY	35.00	0.00	520.66	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		18
SALES UKN	ш # 0323	LOC UUI		ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231413	3/01/13	000008	VISITING NURSE SERVICE	CHINGA, ALBA	24.00		349.92	I	
231414	3/01/13	800000	VISITING NURSE SERVICE	CHINGA, ALBA	6.00		96.36	I	
231415	3/01/13	800000	VISITING NURSE SERVICE	CHUCK, ENA	21.00		306.18	I	
231416	3/01/13	800000	VISITING NURSE SERVICE	CHUCK, ENA	4.00		64.24	I	
231417	3/01/13	800000	VISITING NURSE SERVICE	CIMI, SAVA	24.00		349.92	I	
231418	3/01/13	800000	VISITING NURSE SERVICE	CIMI, SAVA	6.00		96.36	I	
				CUSTOMER	85.00	0.00	1,262.98		
				CATEGORY	85.00	0.00	1,262.98		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP	SURPLUS
231419 231420	3/01/13 3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	COLEMAN, JAMES COLEMAN, JAMES	4.00		58.32 32.12	I	
				CUSTOMER	6.00	0.00	90.44		
				CATEGORY	6.00	0.00	90.44		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING		50 /O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231421	3/01/13	000008	VISITING NURSE SERVICE	COLLER, FELISA	16.00		233.28	I	
231422	3/01/13	800000	VISITING NURSE SERVICE	COLLER, FELISA	4.00		64.24	I	
231423	3/01/13	000008	VISITING NURSE SERVICE	COLLER, JOSE	16.00		233.28	I	
231424	3/01/13	000008	VISITING NURSE SERVICE	COLLER, JOSE	4.00		64.24	I	
231425	3/01/13	000008	VISITING NURSE SERVICE	COLON, ANTONIA	36.00		524.88	I	
231426	3/01/13	800000	VISITING NURSE SERVICE	COLON, ANTONIA	6.00		96.36	I	
				CUSTOMER	82.00	0.00	1,216.28		
				CATEGORY	82.00	0.00	1,216.28		

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 CCL CONGREGAT BILL WEEK ENI	E CAF	51 RE PROGRAM 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231427 231428 231429 231430	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	COPELAND, BARBA COPELAND, BARBA CORDERO, NELLY CORDERO, NELLY	3.00 3.00 144.00 24.00		43.74 48.18 2,099.52 385.44	I I I	
				CUSTOMER	174.00	0.00	2,576.88		
				 CATEGORY	174.00	0.00	2,576.88		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 5	52
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	SIDE CITYWIDE REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231431	3/01/13	000008	VISITING NURSE SERVICE	CORREA, MARGARI	24.00		349.92 I	
231432	3/01/13	800000	VISITING NURSE SERVICE	CORREA, MARGARI	6.00		96.36 I	
				CUSTOMER	30.00	0.00	446.28	
				CATEGORY	30.00	0.00	446.28	

			YSIDE CITYWIDE				PAGE 1 -	53
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	IG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
021422	2 /01 /12	000000			16.00		022 00 -	
231433	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		16.00 4.00		233.28 I 64.24 I	•
231131	3/01/13	000000	VIBITING NORBE BERVICE	CODIA, ANIOINEI				
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	297.52	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	P SURPLUS
231435	2/22/13	000008	VISITING NURSE SERVICE	COSTA, ARSENE	7.00		102.06 I	
231436	3/01/13	800000	VISITING NURSE SERVICE	COSTA, ARSENE	46.00		670.68 I	
231437	3/01/13	800000	VISITING NURSE SERVICE	COSTA, ARSENE	8.00		128.48 I	
				CUSTOMER	61.00	0.00	901.22	
				CATEGORY	61.00	0.00	901.22	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	55 G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
231438	3/01/13	800000	VISITING NURSE SERVICE	COVALIU, SIMION	5.00		72.90 I	
				CATEGORY	5.00	0.00	72.90	

			YSIDE CITYWIDE				PAGE 1	- 56
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231439	3/01/13	000008	VISITING NURSE SERVICE	COVALIU, SIMION	12.00		174.96	I
231440	3/01/13	800000	VISITING NURSE SERVICE	COVALIU, SIMION	4.00		64.24	I
				CUSTOMER	16.00	0.00	239.20	
				CATEGORY	16.00	0.00	239.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 HOA HOSPICE	- 5 ADULT	57
			2	SALES R	EGIST	E R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231441 231442	3/01/13	800000	VISITING NURSE SERVICE	,	PETRA	16.00		233.28 60.23	I	
231442	3/01/13	000008	VISITING NURSE SERVICE	COX,	PETRA	3.75 		00.23		
					CUSTOMER	19.75	0.00	293.51		
					-					
					CATEGORY	19.75	0.00	293.51		

			YSIDE CITYWIDE				PAGE 1 -	58
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231443	3/01/13	000008	VISITING NURSE SERVICE	CRAWFORD, CARME	58.75		856.59 I	
231444	3/01/13	800000	VISITING NURSE SERVICE	CRAWFORD, CARME	8.00		128.48 I	
				CUSTOMER	66.75	0.00	985.07	
				CATEGORY	66.75	0.00	985.07	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 LAD NURSING 1		59 W/O WALLS LT
DALLO OIGV	ш т 0323	100 001	SOUNTSIDE CITIVIDE		EGIST	E R		BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231445 231446	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE	,	HECTOR HECTOR	33.50 5.00		488.43 80.30	I	
231440	3/01/13	000006	VISITING NURSE SERVICE	CRUZ,	HECTOR					
					CUSTOMER	38.50	0.00	568.73		
					CATEGORY	38.50	0.00	568.73		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		
SALES UKN	ш # 0323	LOC UUI		SALES REGIST	E R		BILL WEEK END		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
231447	3/01/13	000008	VISITING NURSE SERVICE	CRUZ, JUANA	15.75		229.64	I	
231448	3/01/13	800000	VISITING NURSE SERVICE	CRUZ, JUANA	3.50		56.21	I	
231449	3/01/13	800000	VISITING NURSE SERVICE	CRUZ, LIDIA	25.00		364.50	I	
231450	3/01/13	000008	VISITING NURSE SERVICE	CRUZ, LIDIA	7.00		112.42	I	
				CUSTOMER	51.25	0.00	762.77		
				CATEGORY	51.25	0.00	762.77		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 61
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDI	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231451	3/01/13	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	15.00		218.70	I
231452	3/01/13	800000	VISITING NURSE SERVICE	DAMICO, ANGELA	5.00		80.30	I
231453	3/01/13	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	47.75		696.20	I
231454	3/01/13	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	8.00		128.48	I
				CUSTOMER	75.75	0.00	1,123.68	
				CATEGORY	75.75	0.00	1,123.68	

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	0.2
DALLO OIGNI	ы _т 0323	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231455 231456	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	29.75 6.00		433.76 96.36	I I
				CUSTOMER	35.75	0.00	530.12	
				CATEGORY	35.75	0.00	530.12	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 6	3
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	E CAR	E PROGRAM
			i	SALES REGISTER			BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231457	3/01/13	000008	VISITING NURSE SERVICE	DE LA HOZ, RUTH	16.00		233.28	I	
231458	3/01/13	000008	VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	3.00		48.18	I	
				CUSTOMER	19.00	0.00	281.46		
				CATEGORY	19.00	0.00	281.46		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDING	64 G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231459	3/01/13	800000	VISITING NURSE SERVICE	E DEBARRENECHE, E	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE 03/06/1	3 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	65
SALES JRNL # 032	3 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231460 3/01/1	3 000008	VISITING NURSE SERVICE	DEBARRENECHE, E	7.00		112.42 I	
231461 3/01/1	3 000008	VISITING NURSE SERVICE	DEBAZALAR, ANTO	18.00		262.44 I	
231462 3/01/1	3 000008	VISITING NURSE SERVICE	DEJESUS, FELIX	19.50		284.31 I	
231463 3/01/1	3 000008	VISITING NURSE SERVICE	DEJESUS, FELIX	6.00		96.36 I	
			CUSTOMER	50.50	0.00	755.53	
			CATEGORY	50.50	0.00	755.53	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN	HOMEW,	66 /O WALLS (LT 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231464 231465	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		32.00 6.00		466.56 96.36	I	
				CUSTOMER	38.00	0.00	562.92		
				CATEGORY	38.00	0.00	562.92		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 67 ADU ADULT	
SALES UKI	ш # 0323	TOC 001		SALES REGISTER				08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
231466 231467	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		28.00 8.00		408.24 I 128.48 I	
				CUSTOMER	36.00	0.00	536.72	
				CATEGORY	36.00	0.00	536.72	

			YSIDE CITYWIDE						68
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		2 / 0 0 / 1 2
			S A	LES REGISTER	-		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231468	2/15/13	000008	VISITING NURSE SERVICE	DELPOZO, MIGUEL	8.00		116.64	I	
231469	3/01/13	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	16.00		233.28	I	
231470	3/01/13	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	4.00		64.24	I	
231471	3/01/13	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	24.00		349.92	I	
231472	3/01/13	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	4.00		64.24	I	
231473	3/01/13	800000	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I	
231474	3/01/13	800000	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		48.18	I	
231475	3/01/13	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	47.75		696.20	I	
231476	3/01/13	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	9.00		144.54	I	
				CUSTOMER	118.75	0.00	1,760.98		
				CATEGORY	118.75	0.00	1,760.98		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 6	59
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LAD NURSING	HOME V	W/O WALLS LT
				SALES R	EGISTE	R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231477	3/01/13	800000	VISITING NURSE SERVICE	DIAZ,	HILDA	35.00		510.30	I	
231478	3/01/13	800000	VISITING NURSE SERVICE	DIAZ,	HILDA	7.00		112.42	I	
					CUSTOMER	42.00	0.00	622.72		
					- CATEGORY	42.00	0.00	622.72		

RUN DATE 0		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY 1	1Y			PAGE 1 ADU ADULT	- '	70
SALES URNE	1 # 0323	LOC 001		-	EGISTE	R		BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,		28.00 7.00		408.24 112.42	I T	
231100	3,01,13	00000	VIBILING NORDE BERVICE	21112,	CUSTOMER	 35.00	0.00	520.66		
					_					
					CATEGORY	35.00	0.00	520.66		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		71
SALES UKN	ш # 0323	LOC UUI		REGNY NY ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231481	3/01/13	000008	VISITING NURSE SERVICE	DIAZ, OLGA	44.00		641.52	I	
231482	3/01/13	800000	VISITING NURSE SERVICE	DIAZ, OLGA	8.00		128.48	I	
231483	3/01/13	800000	VISITING NURSE SERVICE	DIAZ, ROSA	34.00		495.72	I	
231484	3/01/13	800000	VISITING NURSE SERVICE	DIAZ, ROSA	8.00		128.48	I	
231485	3/01/13	800000	VISITING NURSE SERVICE	DIAZ, WILLIAM	42.00		612.36	I	
231486	3/01/13	800000	VISITING NURSE SERVICE	DIAZ, WILLIAM	7.00		112.42	I	
231487	3/01/13	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	63.50		925.83	I	
231488	3/01/13	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	10.00		160.60	I	
231489	2/15/13	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	6.00		87.48	I	
231490	3/01/13	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	35.75		521.24	I	
231491	3/01/13	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	6.00		96.36	I	
231492	3/01/13	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	12.00		174.96	I	
231493	3/01/13	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	4.00		64.24	I	
				CUSTOMER	280.25	0.00	4,149.69		
				CATEGORY	280.25	0.00	4,149.69		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	72
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			:	SALES REGISTEI	?		BILL WEEK ENDIN	IG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231494	3/01/13	000008	VISITING NURSE SERVICE	DUTAN, SELINDA	33.00		481.14 I	
231495	3/01/13	800000	VISITING NURSE SERVICE	DUTAN, SELINDA	5.00		80.30 I	
					20.00	0.00		
				CUSTOMER	38.00	0.00	561.44	
				CATEGORY	38.00	0.00	561.44	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
				SALES REGISTER			BILL WEEK ENDIN	G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231496	3/01/13	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	35.00		510.30 I	
231497	3/01/13	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	7.00		112.42 I	
				CUSTOMER	42.00	0.00	622.72	
				CATEGORY	42.00	0.00	622.72	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	74
SALES UKN	ш # 0323	TOC 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231498 231499	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	EDELMAN, MILDRE EDELMAN, MILDRE	9.00 3.00		131.22 I 48.18 I	
				CUSTOMER	12.00	0.00	179.40	
				CATEGORY	12.00	0.00	179.40	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	75
SALES JRI	NL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231500	3/01/13	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			:	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
231501	3/01/13	000008	VISITING NURSE SERVICE	EPSTEIN, GEORGE	16.00		233.28 I	
231502	3/01/13	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	4.00		64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	297.52	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 7' VCP CHOICE LHCSA	7
SALES UKN	ш # 0323	TOC 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231503 231504	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ESPEJO, FLORENC ESPEJO, FLORENC	24.00 6.00		349.92 I 96.36 I	
				CUSTOMER	30.00	0.00	446.28	
				CATEGORY	30.00	0.00	446.28	

			YSIDE CITYWIDE				PAGE 1	- 7	78
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TNO	2 / 0 0 / 1 2
			5	ALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231505	3/01/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	48.00		699.84	I	
231506	3/01/13	800000	VISITING NURSE SERVICE	ESPIN, CESAR	8.00		128.48	I	
231507	2/15/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	5.00		72.90	I	
231508	3/01/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	20.00		291.60	I	
231509	3/01/13	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	5.00		80.30	I	
							1 072 10		
				CUSTOMER	86.00	0.00	1,273.12		
				CATEGORY	86.00	0.00	1,273.12		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	, ,	
DALLS OW	ш # 0525	100 001		SALES REGISTER			BILL WEEK END		13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPL	JUS
231510 231511	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	14.00 7.00		204.12 112.42	I I	
				CUSTOMER	21.00	0.00	316.54		
				CATEGORY	21.00	0.00	316.54		

RUN DATE 03/06/13 - SALES JRNL # 0323	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231512 3/01/13 231513 3/01/13 231514 3/01/13 231515 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	FADEN, ROBIN FADEN, ROBIN FALCO, MARGARET FALCO, MARGARET	60.00 10.00 6.00 6.00		874.80 160.60 87.48 96.36	I I I
			CUSTOMER	82.00	0.00	1,219.24	
			CATEGORY	82.00	0.00	1,219.24	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	81
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	SALES REGISTER			BILL WEEK ENDIN	G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231516	2/22/13	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE 03/06 SALES JRNL # 0		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - HOA HOSPICE ADULT BILL WEEK ENDING	3/08/13
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231517 1/18 231518 3/01 231519 3/01	/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	FARO, JOSEPH FARO, JOSEPH FARO, JOSEPH	6.00 18.00 3.00		87.48 I 262.44 I 48.18 I	
			CUSTOMER	27.00	0.00	398.10	
			CATEGORY	27.00	0.00	398.10	

			YSIDE CITYWIDE				PAGE 1 -	- 83
SALES JRN	L # 0323	LOC 001		REG NY NY			ADU ADULT	2 /00 /12
			S	ALES REGISTER			BILL WEEK ENDI	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
231520	3/01/13	000008	VISITING NURSE SERVICE	FAROUGIAS, ANGE	6.00		87.48	I
231521	3/01/13	800000	VISITING NURSE SERVICE	FAROUGIAS, ANGE	3.00		48.18	I
231522	3/01/13	800000	VISITING NURSE SERVICE	FEENEY, JOHN	6.00		87.48	I
231523	3/01/13	800000	VISITING NURSE SERVICE	FEENEY, JOHN	3.00		48.18	I
				CUSTOMER	18.00	0.00	271.32	
				 CATEGORY	18.00	0.00	271.32	

		NYSIDE CITYWIDE				PAGE 1 -	84
SALES JRNL # 03	123 LOC 001		REG NY NY			VCP CHOICE LHCS.	
			SALES REGISTER			BILL WEEK ENDIN	G 3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231524 3/01/	13 000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI	48.00		699.84 I	
231525 3/01/	13 000008	VISITING NURSE SERVICE	FERMIN, ORQUIDI	8.00		128.48 I	
			CUSTOMER	56.00	0.00	828.32	
			CATEGORY	56.00	0.00	828.32	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	35
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
				SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231526	3/01/13	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70	I	
231527	3/01/13	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	4.00		64.24	I	
				CUSTOMER	19.00	0.00	282.94		
				CATEGORY	19.00	0.00	282.94		

			YSIDE CITYWIDE	DEC NU NU			PAGE 1 -	0.0
SALES JRN	L # ∪3∠3	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHC	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231528	3/01/13	000008	VISITING NURSE SERVICE	FERNANDEZ, ROSA	3.00		43.74	Ī
231529 231530	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FERNANDEZ, ROSA FERREIRO, JOSEP	3.00 23.25		48.18 338.99	I
231531	3/01/13	000008	VISITING NURSE SERVICE	FERREIRO, JOSEP	4.00		64.24	I
				CUSTOMER	33.25	0.00	495.15	
				CATEGORY	33.25	0.00	495.15	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	7
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231532	3/01/13	000008	VISITING NURSE SERVICE	FERRER, MARIE	15.00		218.70	I	
231533	3/01/13	800000	VISITING NURSE SERVICE	FERRER, MARIE	3.00		48.18	I	
				CUSTOMER	18.00	0.00	266.88		
				CATEGORY	18.00	0.00	266.88		

			YSIDE CITYWIDE	777 NV			11102	- 8	88
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTI	סי		ADU ADULT BILL WEEK EN	DING	3/08/13
			•	JALES KEGISII	5 IC		DIDD WEEK EN	DING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231534	2/08/13	800000	VISITING NURSE SERVICE	FIGUEROA, EDNA	6.00		87.48	I	
231535	3/01/13	000008	VISITING NURSE SERVICE	FIGUEROA, EDNA	12.00		174.96	I	
231536	3/01/13	800000	VISITING NURSE SERVICE	FIGUEROA, EDNA	6.00		96.36	I	
				-					
				CUSTOMER	24.00	0.00	358.80		
1				CATEGORY	24.00	0.00	358.80		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	39
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231537	3/01/13	000008	VISITING NURSE SERVICE	FIUMARA, ROSE	45.25		659.75	I	
231538	3/01/13	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	8.50		136.51	I	
				CUSTOMER	53.75	0.00	796.26		
				CATEGORY	53.75	0.00	796.26		

			YSIDE CITYWIDE				11102 1		90
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			CCL CONGREGATE BILL WEEK EN		RE PROGRAM 3/08/13
				SALES KEGISTEK			DILL WEEK EN	DING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
021520	2 /01 /12	000000	THE CHEENIC NUMBER OF THE		0 00		121 22	-	
231539 231540	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	9.00 3.00		131.22 48.18	T T	
231310	3701713	000000	VIBILING NORDE BERVICE						
				CUSTOMER	12.00	0.00	179.40		
				CATEGORY	12.00	0.00	179.40		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		91
SALES OWN	H # 0323	ПОС 001		A L E S R E G I S T E R			BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231541	3/01/13	000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	28.00		408.24	I	
231542	3/01/13	800000	VISITING NURSE SERVICE	FOLLETTO, ROSIN	7.00		112.42	I	
231543	3/01/13	800000	VISITING NURSE SERVICE	FONG, ALEFINA	10.00		145.80	I	
231544	3/01/13	800000	VISITING NURSE SERVICE	FONG, ALEFINA	5.00		80.30	I	
231545	3/01/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	29.50		430.11	I	
231546	3/01/13	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	5.00		80.30	I	
				CUSTOMER	84.50	0.00	1,257.17		
				CATEGORY	84.50	0.00	1,257.17		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 92
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
231547	3/01/13	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	37.75		550.40	I
231548	3/01/13	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	8.00		128.48	I
231549	3/01/13	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	23.75		346.28	I
231550	3/01/13	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	5.00		80.30	I
				CUSTOMER	74.50	0.00	1,105.46	
				CATEGORY	74.50	0.00	1,105.46	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	93
SALES OWN	ш # 0525	ПОС 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231551 231552	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALLINA, VIRGIN GALLINA, VIRGIN	6.00 3.00		87.48 I 48.18 I	
				CUSTOMER	9.00	0.00	135.66	
				CATEGORY	9.00	0.00	135.66	

RUN DATE 03/06/13 SALES JRNL # 0323	- SUP SUNNYSIDE CITY LOC 001 SUNNYSID	WIDE DE CITYWIDE REG N S A L E S		<u> </u>		PAGE 1 LTC NURSING I BILL WEEK ENI		
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231553 3/01/13 231554 3/01/13			GARAY, ANGELES GARAY, ANGELES	16.00 4.00		233.28 64.24	I I	
			CUSTOMER	20.00	0.00	297.52		
			 CATEGORY	20.00	0.00	297.52		

	03/06/13 - NL # 0323		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	95
			\$	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231555	3/01/13	000008	VISITING NURSE SERVICE	GARCIA, CARMEN	4.50		65.61 I	
				CATEGORY	4.50	0.00	65.61	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			:	SALES REGISTE	R		BILL WEEK ENDIN	G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231556	3/01/13	000008	VISITING NURSE SERVICE	GARCIA, OLGA	24.00		349.92 I	
231557	3/01/13	800000	VISITING NURSE SERVICE	GARCIA, OLGA	6.00		96.36 I	
				CUSTOMER	30.00	0.00	446.28	
				CATEGORY	30.00	0.00	446.28	

-	, , -		YSIDE CITYWIDE				PAGE 1 - 9	7
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231558	3/01/13	000008	VISITING NURSE SERVICE	GARCIA, URANIA	16.00		233.28 I	
231559	3/01/13	800000	VISITING NURSE SERVICE	GARCIA, URANIA	4.00		64.24 I	
231560	3/01/13	800000	VISITING NURSE SERVICE	GARY, MIKE	24.00		349.92 I	
231561	3/01/13	800000	VISITING NURSE SERVICE	GARY, MIKE	6.00		96.36 I	
				CUSTOMER	50.00	0.00	743.80	
				CATEGORY	50.00	0.00	743.80	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	98
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231562	3/01/13	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	13.00		189.54 I	
				CATEGORY	13.00	0.00	189.54	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	99
511225 51413	- 11 0020	200 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231563 231564	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GEBHARDT, DOROT GEORGE, MERCEDE	8.00 41.75		128.48 I 608.72 I	
231565	3/01/13	000008	VISITING NURSE SERVICE	GEORGE, MERCEDE CUSTOMER	7.00 56.75	0.00	112.42 I 	
				CATEGORY	56.75	0.00	849.62	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 CCL CONGREGA BILL WEEK EN	TE CAF	00 RE PROGRAM 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231566 231567 231568	2/15/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GOLIGHTLY, OZEL GOLIGHTLY, OZEL GOLIGHTLY, OZEL	8.00 48.00 8.00		116.64 699.84 128.48	I I I	
				CUSTOMER	64.00	0.00	944.96		
				CATEGORY	64.00	0.00	944.96		

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - 10 VCP CHOICE LHCSA BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231569 231570	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 4.75		291.60 I 76.29 I	
				CUSTOMER	24.75	0.00	367.89	
				CATEGORY	24.75	0.00	367.89	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	2
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231571	3/01/13	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	25.00		364.50	I	
231572	3/01/13	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	7.00		112.42	I	
231573	3/01/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	28.00		408.24	I	
231574	3/01/13	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	5.00		80.30	I	
				CUSTOMER	65.00	0.00	965.46		
				CATEGORY	65.00	0.00	965.46		

RUN DATE SALES JRN		- SUP SUNN LOC 001	IYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 10	3
SALES UKN	ш # 0323	TOC 001	SUNNYSIDE CITYWIDE S.	REGNY NY ALES REGISTER	1		BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231575	3/01/13	000008	VISITING NURSE SERVICE	GONGORA, MARUJA	8.00		116.64	I	
231576	1/25/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	10.00		145.80	I	
231577	2/01/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	24.75		360.86	I	
231578	2/01/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	5.00		72.90	I	
231579	2/08/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	29.25		426.47	I	
231580	2/22/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	29.50		430.11	I	
231581	3/01/13	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	25.00		364.50	I	
231582	3/01/13	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	28.00		408.24	I	
231583	3/01/13	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	7.00		112.42	I	
				CUSTOMER	166.50	0.00	2,437.94		
				CATEGORY	166.50	0.00	2,437.94		

RUN DATE 03/0 SALES JRNL #	06/13 - SUP SUNN 0323 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 10 ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	01/13 000008 01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	20.00 5.00		291.60 I 80.30 I	
			CUSTOMER	25.00	0.00	371.90	
			CATEGORY	25.00	0.00	371.90	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 105 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231586 231587	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		18.00 3.00		262.44 I 48.18 I
				CUSTOMER	21.00	0.00	310.62
				CATEGORY	21.00	0.00	310.62

			NYSIDE CITYWIDE				11102 1	- 10)6
SALES JRN	L # ∪3∠3	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		3/08/13
			5	ALLO KECIDIEK			DIDD WDDK DNI	JING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
021500	0/15/12	000000		G0117G 71 73	0.00		116.64	_	
231588	2/15/13	800000	VISITING NURSE SERVICE	GOYES, ELBA	8.00		116.64	1	
231589	3/01/13	000008	VISITING NURSE SERVICE	GOYES, ELBA	16.00		233.28	I	
231590	3/01/13	800000	VISITING NURSE SERVICE	GOYES, ELBA	4.00		64.24	I	
231591	3/01/13	800000	VISITING NURSE SERVICE	GRAVER, EDNA	32.00		466.56	I	
231592	3/01/13	800000	VISITING NURSE SERVICE	GRAVER, EDNA	8.00		128.48	I	
				CUSTOMER	68.00	0.00	1,009.20		
				CATEGORY	68.00	0.00	1,009.20		
				CATEGORY	68.00	0.00	1,009.20		

RUN DATE 03/06/13 SALES JRNL # 0323		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 107 LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231593 2/15/13 231594 2/22/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	14.00 7.00		204.12 I 102.06 I
			CUSTOMER	21.00	0.00	306.18
			CATEGORY	21.00	0.00	306.18

			YSIDE CITYWIDE				PAGE 1		3
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		2 / 2 2 / 1 2
			2	SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231595	3/01/13	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	41.50		605.07	I	
231596	3/01/13	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	71.75		1,046.12	I	
231597	3/01/13	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	12.00		192.72	I	
231598	3/01/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	70.50		1,027.90	I	
231599	3/01/13	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	12.00		192.72	I	
				CUSTOMER	207.75	0.00	3,064.53		
				CATEGORY	207.75	0.00	3,064.53		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 109	
SALES JRN	rL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
				SALES REGISTER			BILL WEEK ENDING 3	/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
231600	3/01/13	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	47.25		688.91 I	
231601	3/01/13	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	8.00		128.48 I	
				CUSTOMER	55.25	0.00	817.39	
				33231.21	33.23	0.00	01.03	
				CATEGORY	55.25	0.00	817.39	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE L BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
231602 231603 231604 231605	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HARRISON, GLORI HENAO, VICTORIA	47.50 8.00 20.00 4.00		692.56 128.48 291.60 64.24	I I I	
				CUSTOMER	79.50	0.00	1,176.88		
				CATEGORY	79.50	0.00	1,176.88		

RUN DATE (SALES JRN)			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 11 ADU ADULT	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING AMOUNT TYP	3/08/13 SURPLUS
231606	3/01/13	000008	VISITING NURSE SERVICE		2.00	IAA AMI	32.12 I	SURPLUS
	2, 22, 23							
				CATEGORY	2.00	0.00	32.12	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - : VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231607 231608	3/01/13 3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HENDY, BERNICE HENDY, BERNICE	21.75 7.00		317.12 I 112.42 I	
				CUSTOMER	28.75	0.00	429.54	
				CATEGORY	28.75	0.00	429.54	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 11 ADU ADULT	3
BALLO ORIV	Д # 0525	100 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231609 231610	2/01/13 3/01/13	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	8.00 48.00		116.64 I 699.84 I	
231611	3/01/13	000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI CUSTOMER	8.00 64.00	0.00	128.48 I 944.96	
				CATEGORY	64.00	0.00	944.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231612 231613	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	HERNANDEZ, JUAN HERNANDEZ, JUAN	24.00 6.00		349.92 I 96.36 I	
				CUSTOMER	30.00	0.00	446.28	
				CATEGORY	30.00	0.00	446.28	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 115 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231614 231615	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	24.00 6.00		349.92 I 96.36 I
				CUSTOMER	30.00	0.00	446.28
				CATEGORY	30.00	0.00	446.28

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 116 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
231616 231617	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				 CATEGORY	20.00	0.00	 297.52	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231618 231619 231620	3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HUNGRIA, SABINA	33.00 7.00 16.00		481.14 I 112.42 I 233.28 I	
				CUSTOMER	56.00	0.00	826.84	
				CATEGORY	56.00	0.00	826.84	

RUN DATE 03/06/1 SALES JRNL # 032		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 118 LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231621 3/01/1 231622 3/01/1		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	37.75 7.00		550.40 I 112.42 I
			CUSTOMER	44.75	0.00	662.82
			CATEGORY	44.75	0.00	662.82

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	119 NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231623	2/15/13	800000	VISITING NURSE SERVICE	INSERRA, CATHER	10.00		145.80	I
				CATEGORY	10.00	0.00	145.80	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE C BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231624 231625	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 3.00		131.22 I 48.18 I	
				CUSTOMER	12.00	0.00	179.40	
				CATEGORY	12.00	0.00	179.40	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 121	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALL	LS (LT
				SALES REGISTER			BILL WEEK ENDING 3/08	/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
231626	1/11/13	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	8.00		116.64 I	
231627	3/01/13	800000	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	14.00		204.12 I	
				CUSTOMER	22.00	0.00	320.76	
				CATEGORY	22.00	0.00	320.76	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 122 VCP CHOICE LHCSA BILL WEEK ENDING 3/08/2	L3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
231628 231629 231630 231631	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JAKLITSCH, ELIZ JAMES, DAVINA	24.00 8.00 29.50 4.75		349.92 I 128.48 I 430.12 I 76.29 I	
				CUSTOMER	66.25	0.00	984.81	
				CATEGORY	66.25	0.00	984.81	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231632	3/01/13	800000	VISITING NURSE SERVICE	JAMISON, BESSIE	12.00		174.96 I	
				CATEGORY	12.00	0.00		

RUN DATE SALES JRN	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 12	24
SALES URN	L # U3Z3	LOC 001		ALES REGISTER			BILL WEEK ENI		3/08/13
									-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231633	3/01/13	000008	VISITING NURSE SERVICE	JARA DEURUCHIM,	3.00		43.74	Т	
231634	3/01/13	000008	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	Ī	
231635	3/01/13	000008	VISITING NURSE SERVICE	JEWAT, LUCILLE	64.25		936.77	I	
231636	3/01/13	800000	VISITING NURSE SERVICE	JEWAT, LUCILLE	11.00		176.66	I	
231637	3/01/13	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	20.00		291.60	I	
231638	3/01/13	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	4.00		64.24	I	
				CUSTOMER	114.25	0.00	1,687.97		
				CATEGORY	114.25	0.00	1,687.97		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AI BILL WEEK END	-	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP	SURPLUS
231639 231640	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	JIANNARAS, ANNA JIANNARAS, ANNA	60.00 10.00		874.80 160.60	I I	
				CUSTOMER	70.00	0.00	1,035.40		
				CATEGORY	70.00	0.00	1,035.40		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 126 LTC NURSING HOMEW/O WALLS (LT
BALLS OIL	W π 0323	100 001		SALES REGISTER			BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231641 231642	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	18.00 6.00		262.44 I 96.36 I
				CUSTOMER	24.00	0.00	358.80
				CATEGORY	24.00	0.00	358.80

RUN DATE 03/06/ SALES JRNL # 03			REG NY NY			PAGE 1 - 1: ADU ADULT	27
			SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231643 3/01/ 231644 3/01/		VISITING NURSE SERVICE VISITING NURSE SERVICE	JORRIN, HORTENS JORRIN, HORTENS	35.00 4.50		510.30 I 72.27 I	
231645 3/01/		VISITING NURSE SERVICE	KAZOS, KAHTY	12.00		174.96 I	
			CUSTOMER	51.50	0.00	757.53	
			CATEGORY	51.50	0.00	757.53	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUL BILL WEEK ENDING	Т
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231646 231647	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	KHAN, MARGARET KHAN, MARGARET	12.00 7.00		174.96 I 112.42 I	
				CUSTOMER	19.00	0.00	287.38	
				CATEGORY	19.00	0.00	287.38	

			YSIDE CITYWIDE				PAGE 1 - 129	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	2
			5	SALES REGISTER			BILL WEEK ENDING 3/08/1	. 3
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	IS
231648	3/01/13	000008	VISITING NURSE SERVICE	KNOWLES, ANAMAR	39.50		575.91 I	
231649	3/01/13	800000	VISITING NURSE SERVICE	KNOWLES, ANAMAR	10.00		160.60 I	
				CUSTOMER	49.50	0.00	736.51	_
								-
				CATEGORY	49.50	0.00	736.51	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	
BALLO ORN	ш т 0323	100 001		ALES REGISTER	2		BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
231650	3/01/13	000008	VISITING NURSE SERVICE	KOSTIKIAN, MARI	20.00		291.60	I
231651	3/01/13	800000	VISITING NURSE SERVICE	KOSTIKIAN, MARI	5.00		80.30	I
231652	3/01/13	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		583.20	I
231653	3/01/13	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	8.00		128.48	I
231654	3/01/13	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	48.00		699.84	I
231655	3/01/13	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	8.00		128.48	I
				CUSTOMER	129.00	0.00	1,911.90	
				CATEGORY	129.00	0.00	1,911.90	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.31
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231656	3/01/13	800000	VISITING NURSE SERVICE	LAURON, YOLANDA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE				PAGE 1 - 13	2
SALES JRN	L # 0323	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	3/08/13
				SALES REGISIER			BILL MEEK ENDING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231657	3/01/13	000008	VISITING NURSE SERVICE	LAWRENCE, NANCY	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 133 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231658 231659	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	8.25 3.50		120.29 I 56.21 I
				CUSTOMER	11.75	0.00	176.50
				 CATEGORY	 11.75	0.00	 176.50

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231660	3/01/13	800000	VISITING NURSE SERVICE	LEE, MIRIAM G	2.00		29.16 I	
				CATEGORY	2.00	0.00		

			YSIDE CITYWIDE				PAGE 1		5
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		3/08/13
			'	SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231661	3/01/13	000008	VISITING NURSE SERVICE	,	12.00		174.96	I	
231662	3/01/13	000008	VISITING NURSE SERVICE	LEGASPI, CECILI	4.00		64.24	I	
				CUSTOMER	16.00	0.00	239.20		
				COSTONER	10.00	0.00	237.20		
				CATEGORY	16.00	0.00	239.20		

			YSIDE CITYWIDE				-	136
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	2 / 2 / 1 2
			S	SALES REGISTER			BILL WEEK ENDIN	IG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231663	3/01/13	800000	VISITING NURSE SERVICE	LEICHARDT, MAGD	6.00		87.48 I	
231664	2/22/13	000008	VISITING NURSE SERVICE	LENDOIRO, JUAN	12.00		174.96 I	
231665	3/01/13	800000	VISITING NURSE SERVICE	LENDOIRO, JUAN	11.75		171.32 I	•
				CUSTOMER	29.75	0.00	433.76	
				CATEGORY	29.75	0.00	433.76	

			YSIDE CITYWIDE	5-2			-	- 13	37
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEI	D		VCP CHOICE LE		3/08/13
			b	ALES KEGISIEI	IC.		DIDD WEEK EN.	DING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
001666	0 / 0 1 / 1 0				40.00		600.04	_	
231666	3/01/13	800000	VISITING NURSE SERVICE	LEWIS, CATHERIN	48.00		699.84	Τ	
231667	3/01/13	800000	VISITING NURSE SERVICE	LEWIS, CATHERIN	8.00		128.48	I	
231668	3/01/13	800000	VISITING NURSE SERVICE	LIGARDO, SOL M	29.25		426.47	I	
231669	3/01/13	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	25.00		364.50	I	
231670	3/01/13	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	5.00		80.30	I	
				CUSTOMER	115.25	0.00	1,699.59		
					115 05	0.00	1 600 50		
				CATEGORY	115.25	0.00	1,699.59		

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13	38
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
INVOICEM	DATE	CODI NO	CODIONER WANTE	KET EKENCE	110010	IAX ANI	AMOUNT	111	DOM HOD
231671	2/08/13	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I	
231672	2/15/13	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	15.50		225.99	I	
231673	3/01/13	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	39.50		575.92	I	
231674	3/01/13	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		128.48	I	
231675	3/01/13	800000	VISITING NURSE SERVICE	LOGAN, ADELE	36.00		524.88	I	
231676	3/01/13	800000	VISITING NURSE SERVICE	LOGAN, ADELE	6.00		96.36	I	
				CUSTOMER	113.00	0.00	1,668.27		
				CATEGORY	113.00	0.00	1,668.27		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 139
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
			i	SALES REGISTER			BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231677	3/01/13	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	49.25		718.07 I
231678	3/01/13	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	10.00		160.60 I
				CUSTOMER	59.25	0.00	878.67
				CATEGORY	59.25	0.00	878.67

			YSIDE CITYWIDE				PAGE 1 - 140	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING 3/0	08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
231679	3/01/13	000008	VISITING NURSE SERVICE	LONDONO, JOSE	14.75		215.06 I	
231680	3/01/13	800000	VISITING NURSE SERVICE	LONDONO, JOSE	3.00		48.18 I	
				CUSTOMER	17.75	0.00	263.24	
				CODIONER	17.75	0.00	203.21	
				CATEGORY	17.75	0.00	263.24	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	2		PAGE 1 - 141 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231681 231682	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		35.75 6.00		521.24 I 96.36 I
				CUSTOMER	41.75	0.00	617.60
				CATEGORY	41.75	0.00	617.60

			YSIDE CITYWIDE				PAGE 1		
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			i	SALES REGISTER			BILL WEEK END	ING :	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
231683	3/01/13	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	29.75		433.76	I	
231684	3/01/13	800000	VISITING NURSE SERVICE	LOPEZ, ANGELICA	5.00		80.30	I	
				CUSTOMER	34.75	0.00	514.06		
				CATERCODY.	24 75				
				CATEGORY	34.75	0.00	514.06		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 CCL CONGREGAT BILL WEEK END	E CAR	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231685 231686	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		15.50 4.00		225.99 64.24	I	
				CUSTOMER	19.50	0.00	290.23		
				CATEGORY	19.50	0.00	290.23		

RUN DATE (03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	14
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGIS	TER		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231687	3/01/13	000008	VISITING NURSE SERVICE	LUNA, YSABEL	32.00		466.56	I	
231688	3/01/13	800000	VISITING NURSE SERVICE	LUNA, YSABEL	8.00		128.48	I	
				CUSTOM	2R 40.00	0.00	595.04		
				CATEGOR	RY 40.00	0.00	595.04		

			YSIDE CITYWIDE				PAGE 1 - 145	
SALES JRN	L # 0323	LOC 001		REG NY NY			CCL CONGREGATE CARE	
				SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231689	3/01/13	800000	VISITING NURSE SERVICE	LYMN, ANGIE	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 146 ADU ADULT	
SALES URN	ш # 0323	LOC 001		SALES REGISTER				3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
231690 231691	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		36.00 5.00		524.88 I 80.30 I	
				CUSTOMER	41.00	0.00	605.18	
				CATEGORY	41.00	0.00	605.18	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	17
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231692	3/01/13	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	29.75		433.76 I	
				CATEGORY	29.75	0.00	433.76	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 14 HCSA	18
			S	SALES REGISTER			BILL WEEK ENI	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231693	3/01/13	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	72.50		1,057.05	I	
231694	3/01/13	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	12.00		192.72	Т	
				CUSTOMER	84.50	0.00	1,249.77		
				CATEGORY	84.50	0.00	1,249.77		

l	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	49
l	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING	3/08/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	231695	3/01/13	800000	VISITING NURSE SERVICE	MAIO, CHINGTSAI	6.00		87.48 I	
					CATEGORY	6.00	0.00	87.48	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 150
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
			Ş	SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231696	3/01/13	800000	VISITING NURSE SERVICE	MALDONADO, DOMI	16.00		233.28	I
231697	3/01/13	800000	VISITING NURSE SERVICE	MALDONADO, DOMI	4.00		64.24	I
231698	3/01/13	800000	VISITING NURSE SERVICE	MALDONADO, MARI	18.75		273.38	I
231699	3/01/13	000008	VISITING NURSE SERVICE	MALDONADO, MARI	5.00		80.30	I
				CUSTOMER	43.75	0.00	651.20	
				CATEGORY	43.75	0.00	651.20	

			YSIDE CITYWIDE				PAGE 1 - 15	1
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231700	3/01/13	800000	VISITING NURSE SERVICE	MALTEZOS, ANTHE	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 15	52
	2 0020	200 001		SALES REGISTER			BILL WEEK ENI		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231701 231702	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	16.00 4.00		233.28 64.24	I	
231/02	3/01/13	000008	VISITING NURSE SERVICE	MANGAN, JOHN	4.00		04.24		
				CUSTOMER	20.00	0.00	297.52		
				CATEGORY	20.00	0.00	297.52		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 153 LTC NURSING HOMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231703 231704	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	37.75 7.00		550.40 I 112.42 I
				CUSTOMER	44.75	0.00	662.82
				CATEGORY	44.75	0.00	 662.82

-	03/06/13	- SUP SUNN LOC 001	YSIDE CITYWIDE	DEC NV NV			PAGE 1 VCP CHOICE LH		54
SALES JRN	L # U3Z3	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			BILL WEEK END		3/08/13
			_						-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231705	3/01/13	000008	VISITING NURSE SERVICE	MARAVELAKIS, JO	48.00		699.84	Т	
231706	3/01/13	000008	VISITING NURSE SERVICE	MARAVELAKIS, JO	8.00		128.48	Ī	
231707	3/01/13	000008	VISITING NURSE SERVICE	MARINO, ANN	24.00		349.92	I	
231708	3/01/13	800000	VISITING NURSE SERVICE	MARINO, ANN	6.00		96.36	I	
231709	3/01/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	20.00		291.60	I	
231710	3/01/13	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	5.00		80.30	I	
				CUSTOMER	111.00	0.00	1,646.50		
				CATEGORY	111.00	0.00	1,646.50		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	2		PAGE 1 - 155 LTC NURSING HOMEW/C BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231711 231712	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- <i>,</i>	36.00 7.00		524.88 I 112.42 I	
				CUSTOMER	43.00	0.00	637.30	
				CATEGORY	43.00	0.00	637.30	

RUN DATE	03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	56
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231713	3/01/13	800000	VISITING NURSE SERVICE	MARTE, JOSE	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

ı	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	57
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	3/08/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	231714	3/01/13	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	58.00		845.64 I	
					CATEGORY	58.00	0.00	845.64	

RUN DATE 03/ SALES JRNL #	/06/13 - SUP SUNN # 0323 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231716 3/	/15/13 000008 /01/13 000008 /01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, MARTA MARTINEZ, MARTA MARTINEZ, MARTA	6.00 29.75 6.00		87.48 I 433.76 I 96.36 I	
			CUSTOMER	41.75	0.00	617.60	
			CATEGORY	41.75	0.00	617.60	

			YSIDE CITYWIDE				-	159
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	3/08/13
								., ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231718	3/01/13	000008	VISITING NURSE SERVICE	MARTINEZ, RAMON	23.75		346.28 I	
231719	3/01/13	800000	VISITING NURSE SERVICE	MARTINEZ, RAMON	5.50		88.33 I	
				CUSTOMER	29.25	0.00	434.61	
				0001011111	27.23	0.00	101.01	
				CATEGORY	29.25	0.00	434.61	
1				CATEGORY	49.45	0.00	434.01	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS.	160 A
Briefs ord	11 0525	100 001		ALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231720 231721	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTINEZ, ROSA MARTINEZ, ROSA	28.00 12.00		1,049.76 I 192.72 I	
				CUSTOMER	40.00	0.00	1,242.48	
				CATEGORY	40.00	0.00	1,242.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 161 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
231722 231723	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	31.50 6.00		459.27 I 96.36 I	
				CUSTOMER	37.50	0.00	555.63	
				CATEGORY	37.50	0.00	 555.63	

RUN DATE 03/06	/13 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 -	162
SALES JRNL # 0	323 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	I
			SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231724 3/01	/13 000008	VISITING NURSE SERVICE	MATOS, ROSA	36.00		524.88 I	
231725 3/01	/13 000008	VISITING NURSE SERVICE	MATOS, ROSA	6.00		96.36 I	
			 CUSTOMER	42.00	0.00	621.24	
			COSTONER	42.00	0.00	021.24	
			CATEGORY	42.00	0.00	621.24	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231726 231727 231728 231729	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MAZZONE, FRANCE MCBRAYER, SYLVI	54.00 9.00 144.00 24.00		787.32 144.54 2,099.52 385.44	I I I	
				CUSTOMER	231.00	0.00	3,416.82		
				CATEGORY	231.00	0.00	3,416.82		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	54
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			·	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231730	3/01/13	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	69.25		1,009.67	I	
231731	3/01/13	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	12.00		192.72	I	
				CUSTOMER	81.25	0.00	1,202.39		
				CATEGORY	81.25	0.00	1,202.39		

			YSIDE CITYWIDE				PAGE 1 - 165	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	3/08/13
			•				BIBE WEEK BUSING	3,00,13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231732	2/22/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	16.00		233.28 I	
231733	3/01/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	11.50		167.67 I	
231734	3/01/13	800000	VISITING NURSE SERVICE	MEGALOUDIS, CAR	4.00		64.24 I	
				CUSTOMER	31.50	0.00	465.19	
				CATEGORY	31.50	0.00	465.19	

RUN DATE SALES JRN	, , -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 16	6
SALES UKN	ш # 0323	LOC 001		ALES REGISTER			BILL WEEK EN		3/08/13
							DILL WEEK EN	71110	37 007 13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
001505	0 / 0 1 / 1 0				25.00		504.00	_	
231735	3/01/13	000008	VISITING NURSE SERVICE	MEGUERDITCHIAN,	36.00		524.88	1	
231736	3/01/13	800000	VISITING NURSE SERVICE	MEGUERDITCHIAN,	6.00		96.36	I	
231737	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	42.00		612.36	I	
231738	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, CLAUDIO	7.00		112.42	I	
231739	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, DINORAH	24.00		349.92	I	
231740	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, DINORAH	6.00		96.36	I	
231741	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	20.00		291.60	I	
231742	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, MARINA	4.00		64.24	I	
				CUSTOMER	145.00	0.00	2,148.14		
				 CATEGORY	 145.00	0.00	2,148.14		

RUN DATE C	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	57
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER	2		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231743	3/01/13	000008	VISITING NURSE SERVICE	MEJIA, ROSA	32.00		466.56	I	
231744	3/01/13	800000	VISITING NURSE SERVICE	MEJIA, ROSA	7.75		124.47	I	
				CUSTOMER	39.75	0.00	591.03		
				CATEGORY	39.75	0.00	591.03		

			YSIDE CITYWIDE				PAGE 1 - 1	.68
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	2 / 2 2 / 1 2
			2	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231745	3/01/13	800000	VISITING NURSE SERVICE	MENDEZ, ADA	35.75		521.24 I	
				CATEGORY	35.75	0.00	521.24	

ı	RUN DATE	03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 169	9
ı	SALES JRN	և # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W	/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	3/08/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	231746	3/01/13	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	20.00		291.60 I	
ı									
ı									
ı					CATEGORY	20.00	0.00	291.60	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	70
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER	1		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231747	3/01/13	000008	VISITING NURSE SERVICE	MENDOZA, JULIO	32.00		466.56	I	
231748	3/01/13	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	7.00		112.42	I	
				CUSTOMER	39.00	0.00	578.98		
				CATEGORY	39.00	0.00	578.98		

			YSIDE CITYWIDE				PAGE 1	- 17	71
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231749	3/01/13	000008	VISITING NURSE SERVIC	E MIRANDA, LUIS	6.00		87.48	I	
231750	3/01/13	800000	VISITING NURSE SERVIC	E MIRANDA, LUIS	6.00		96.36	I	
231751	2/15/13	800000	VISITING NURSE SERVIC	E MONSERRAT, DORI	3.00		43.74	I	
231752	3/01/13	800000	VISITING NURSE SERVIC	E MONSERRAT, DORI	12.00		174.96	I	
231753	3/01/13	800000	VISITING NURSE SERVIC	E MONSERRAT, DORI	3.00		48.18	I	
				CUSTOMER	30.00	0.00	450.72		
				 CATEGORY	30.00	0.00	450.72		

RUN DATE (SALES JRN)		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	172 NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231754 231755	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MONT ETNA, FRAN MONT ETNA, FRAN	6.00 3.00		87.48 48.18	I I
				CUSTOMER	9.00	0.00	135.66	
				CATEGORY	9.00	0.00	135.66	

RUN DATE (03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	173
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231756	3/01/13	000008	VISITING NURSE SERVICE	MONTOYA, ROSALB	12.00		174.96 I	
231757	3/01/13	000008	VISITING NURSE SERVICE	MONTOYA, ROSALB	4.00		64.24 I	
231758	3/01/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	25.00		364.50 I	
231759	3/01/13	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	5.00		80.30 I	
				CUSTOMER	46.00	0.00	684.00	
				CATEGORY	46.00	0.00	684.00	

RUN DATE	03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L74
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	V/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231760	3/01/13	000008	VISITING NURSE SERVICE	MORALES, ANGELI	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

ı	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 17	15
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				5	SALES REGISTER			BILL WEEK ENDING	3/08/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	231761	3/01/13	800000	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		96.36 I	
					CATEGORY	6.00	0.00	96.36	

ı	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 176	
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/C	WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING 3	3/08/13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
ı									
ı	231762	3/01/13	800000	VISITING NURSE SERVICE	MORALES, CARMEN	20.00		291.60 I	
ı									
ı									
ı					CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	177
SALES ON	Д # 0323	HOC 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231763 231764	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MOREL, NOHEMY P MOREL, NOHEMY P	16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	297.52	

			YSIDE CITYWIDE				PAGE 1 - 17	78
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	2 /00 /12
			2	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231765	3/01/13	000008	VISITING NURSE SERVICE	MORILLO, MARICE	16.00		233.28 I	
231766	3/01/13	800000	VISITING NURSE SERVICE	MORILLO, MARICE	4.00		64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				0021011211	20.00	0.00	2,7,132	
				CATEGORY	20.00	0.00	297.52	

RUN DATE 03/06/1 SALES JRNL # 032			PAGE 1 - 179 VCP CHOICE LHCSA BILL WEEK ENDING 3/08/13				
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231767 3/01/1 231768 3/01/1 231769 3/01/1 231770 3/01/1	3 000008 3 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MULLER, ROBERT MULLER, ROBERT NAGY, GEORGE NAGY, GEORGE	20.00 5.00 42.00 7.00		291.60 I 80.30 I 612.36 I 112.42 I	
			CUSTOMER	74.00	0.00	1,096.68	
			CATEGORY	74.00	0.00	1,096.68	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY			HOA HOSPICE A	_	
			S	SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231771 231772	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	NANIS, KOSTAS NANIS, KOSTAS	16.00 4.00		233.28 64.24	I	
				CUSTOMER	20.00	0.00	297.52		
				CATEGORY	20.00	0.00	297.52		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 18	1
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231773	3/01/13	000008	VISITING NURSE SERVICE	NAVARRO, MARIA	16.00		233.28	I	
231774	3/01/13	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	4.00		64.24	I	
				CUSTOMER	20.00	0.00	297.52		
				CATEGORY	20.00	0.00	297.52		

RUN DATE 03/0 SALES JRNL #			REGNY NY SALES REGISTER	}		PAGE 1 - 18 LTC NURSING HOMEW, BILL WEEK ENDING	82 /O WALLS (LT 3/08/13
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/13 000008 1/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	42.00 7.00		612.36 I 112.42 I	
			CUSTOMER	49.00	0.00	724.78	
			 CATEGORY	49.00	0.00	724.78	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 183
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				E CARE PROGRAM
				SALES REGISTER			BILL WEEK END:	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
231777	3/01/13	000008	VISITING NURSE SERVICE	NIETO RAMOS, JO	53.50		780.03	I
231778	3/01/13	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	8.00		128.48	I
				CUSTOMER	61.50	0.00	908.51	
				0051011210		0.00	100.01	
1				CATEGORY	61.50	0.00	908.51	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 18 VCP CHOICE LHCSA	34
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231779	3/01/13	800000	VISITING NURSE SERVICE		40.00		583.20 I	
231780 231781	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- •	16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	60.00	0.00	880.72	
				CATEGORY	60.00	0.00	880.72	

RUN DATE 03/0 SALES JRNL #	. ,	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 185 LTC NURSING HOMEW/O BILL WEEK ENDING	
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231783 3/0 231784 3/0	1/13 000008 1/13 000008 1/13 000008 1/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NOBLIN, ELOISE NOBLIN, ELOISE NOBOADESALAZAR, NOBOADESALAZAR,	20.00 5.00 26.00 6.00		291.60 I 80.30 I 379.08 I 96.36 I	
			CUSTOMER	57.00	0.00	847.34	
			CATEGORY	57.00	0.00	847.34	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 18	36
DALLS ORN	ш # 0525	100 001		ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231786	3/01/13	000008	VISITING NURSE SERVICE	NOGUE, FIDELINA	16.00		233.28	I	
231787	3/01/13	800000	VISITING NURSE SERVICE	NOGUE, FIDELINA	4.00		64.24	I	
231788	3/01/13	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	48.00		699.84	I	
231789	3/01/13	800000	VISITING NURSE SERVICE	NUZIALE, CONCET	8.00		128.48	I	
231790	3/01/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	25.00		364.50	I	
231791	3/01/13	800000	VISITING NURSE SERVICE	OCHOA, LUIS	7.00		112.42	I	
				CUSTOMER	108.00	0.00	1,602.76		
				CATEGORY	108.00	0.00	1,602.76		

-				YSIDE CITYWIDE				PAGE 1 -	±0,
	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	•
				:	SALES REGISTER			BILL WEEK ENDII	NG 3/08/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	231792	3/01/13	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	29.00		422.82	I
					CAMEGODY	20.00	0.00	422.02	
ı					CATEGORY	29.00	0.00	422.82	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 188 ADU ADULT	
SALES UKN	ш # 0323	TOC 001		SALES REGISTER				3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
231793 231794	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	12.00 4.00		174.96 I 64.24 I	
				CUSTOMER	16.00	0.00	239.20	
				CATEGORY	16.00	0.00	239.20	

			YSIDE CITYWIDE				PAGE 1 -	189
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDIN	IG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231795	3/01/13	800000	VISITING NURSE SERVICE	ORNANO, BOLIVAR	16.00		233.28	-
231796	3/01/13	000008	VISITING NURSE SERVICE	ORNANO, BOLIVAR	4.00		64.24	• •
231797	3/01/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	14.00		204.12	• •
231798	3/01/13	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	8.00		128.48	• •
				CUSTOMER	42.00	0.00	630.12	
				CATEGORY	42.00	0.00	630.12	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 190)
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
001500	0 / 0 1 / 1 0				10.00		174 06 -	
231799	3/01/13	800000	VISITING NURSE SERVICE	PANDYA, HANSABE	12.00		174.96 I	
				CA EEGODY	12.00	0.00	174.06	
1				CATEGORY	12.00	0.00	174.96	

RUN DATE 03 SALES JRNL	3/06/13 - SUP SUNN # 0323 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 19 VCP CHOICE LHCSA	91
SHEED CHAVE	11 0323 100 001		ALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	3/01/13 000008 3/01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PANTALEONDEREN, PANTALEONDEREN,	20.00 5.00		291.60 I 80.30 I	
			CUSTOMER	25.00	0.00	371.90	
			CATEGORY	25.00	0.00	371.90	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	2
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			\$	SALES REGISTER			BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231802	3/01/13	000008	VISITING NURSE SERVICE	PANTAZIS, EFFIE	1.00		14.58	I	
231803	3/01/13	800000	VISITING NURSE SERVICE	PAOLONI, MARY	12.00		174.96	I	
231804	3/01/13	800000	VISITING NURSE SERVICE	PAOLONI, MARY	3.00		48.18	I	
				CUSTOMER	16.00	0.00	237.72		
				CATEGORY	16.00	0.00	237.72		

RUN DATE SALES JRN			IYSIDE CITYWIDE	DEC MY MY			-	- 19	13
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			VCP CHOICE LI BILL WEEK ENI		3/08/13
							DIEL WEEK EN	21110	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
231805	3/01/13	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	40.00		505.20	I	
231806	3/01/13	800000	VISITING NURSE SERVICE	PAPAZIAN, MANNI	10.00		160.60	I	
231807	3/01/13	800000	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48	I	
231808	3/01/13	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	3.00		48.18	I	
231809	3/01/13	000008	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	I	
231810	3/01/13	000008	VISITING NURSE SERVICE	PARETTI, MARIE	48.00		699.84	I	
231811	3/01/13	000008	VISITING NURSE SERVICE	PARETTI, MARIE			144.54	I	
231812	3/01/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA			349.92	Ī	
231813	3/01/13	000008	VISITING NURSE SERVICE	PENA, VICTORIA	2.75		44.17	T	
231814	2/15/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA			72.90	T	
231815	3/01/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA			364.50	т	
231816	3/01/13	000008	VISITING NURSE SERVICE	PENAGOS, MARIA	5.00		80.30	± +	
231010	3/01/13	000006	VISITING NURSE SERVICE	PENAGOS, MARIA	5.00		00.30	1	
				CHGEOMED.	100 75	0.00	0 670 37		
				CUSTOMER	180.75	0.00	2,679.37		
				CATEGORY	180.75	0.00	2,679.37		
1				CATEGORI	100.75	0.00	2,019.31		

RUN DATE 03/06/1			DEC MY MY			PAGE 1 - 194	
SALES JRNL # 032	3 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231817 3/01/1 231818 3/01/1		VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 2.00		116.64 I 32.12 I	
			CUSTOMER	10.00	0.00	148.76	
			CATEGORY	10.00	0.00	148.76	

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE									5
SALES URNI	L # U3Z3	TOC 001		ALES REGISTER			BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231819	3/01/13	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	42.00		612.36	I	
231820	3/01/13	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		112.42	I	
231821	3/01/13	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	24.00		349.92	I	
231822	3/01/13	000008	VISITING NURSE SERVICE	PEREZ, GLADYS	6.00		96.36	I	
231823	3/01/13	000008	VISITING NURSE SERVICE	PEREZ, JOAQUIN	24.00		349.92	I	
231824	3/01/13	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	6.00		96.36	I	
				CUSTOMER	109.00	0.00	1,617.34		
				CATEGORY	109.00	0.00	1,617.34		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMH ADULT MEN	- 19 NTAL H	
			S	SALES REGISTER			BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231825 231826	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PEREZ, LORRAINE PEREZ, LORRAINE	22.00 5.00		320.76 80.30	I	
231020	3,01,13	00000	VIDITING NORDE BERVIOL	CUSTOMER	27.00	0.00	401.06		
				COSTOMER	27.00	0.00	401.00		
				CATEGORY	27.00	0.00	401.06		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	7
SALES JRN	L # 0323	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231827	3/01/13	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	47.75		696.20 I	
				CATEGORY	47.75	0.00	696.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 AUR ADULT REH BILL WEEK END	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231828 231829	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	PILLARI, MARIA PILLARI, MARIA	4.00		58.32 32.12	I
				CUSTOMER	6.00	0.00	90.44	
				CATEGORY	6.00	0.00	90.44	

	/06/13 - SUP SUNN					PAGE 1 - 19	9
SALES JRNL ‡	# 0323 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	2 / 2 2 / 1 2
		S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231830 3/	/01/13 000008	VISITING NURSE SERVICE	PLACIDO, GENARO	30.00		437.40 I	
231831 3/	/01/13 000008	VISITING NURSE SERVICE	PLACIDO, GENARO	5.00		80.30 I	
			CUSTOMER	35.00	0.00	517.70	
			CODIONER	33.00	0.00	317.70	
			CATEGORY	35.00	0.00	517.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY 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
231832 231833 231834 231835	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PLACIDO, MERCED PLACIDO, MERCED POGGI, EMERITA POGGI, EMERITA	35.75 6.00 24.00 6.00		521.24 96.36 349.92 96.36	I I I
				CUSTOMER	71.75	0.00	1,063.88	
				CATEGORY	71.75	0.00	1,063.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDI	NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231836 231837	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	32.50 6.00		473.85 96.36	I
231037	3/01/13	000000	VIBITING NORDE BERVICE					
				CUSTOMER	38.50	0.00	570.21	
				CATEGORY	38.50	0.00	570.21	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI	- 20)2
Bridde Gra	L 0323	100 001		SALES REGISTER	}		BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231838	3/01/13	000008	VISITING NURSE SERVICE	POLITIS, HELEN	9.00		131.22	I	
231839	3/01/13	800000	VISITING NURSE SERVICE	POLITIS, HELEN	3.00		48.18	Τ	
				CUSTOMER	12.00	0.00	179.40		
				 CATEGORY	12.00	0.00	179.40		

RUN DATE (SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 20)3
			S	SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231840	3/01/13	000008	VISITING NURSE SERVICE	PONCE, ALICIA	32.00		466.56	I	
231841 231842	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PONCE, ALICIA OUILES, CRISPIN	8.00 3.00		128.48 43.74	I	
231012	3701713	000000	VIBILING NORDE BERVICE	2011115, CKIST IN					
				CUSTOMER	43.00	0.00	638.78		
				CATEGORY	43.00	0.00	638.78		

RUN DATE 03/06/13 SALES JRNL # 0323		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 204 VCP CHOICE LHCSA BILL WEEK ENDING 3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231843 3/01/13 231844 3/01/13 231845 3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	QUINONES, MARIA QUINTERO, INES QUINTERO, INES	2.75 28.00 6.50		40.10 I 408.24 I 104.39 I
			CUSTOMER	37.25	0.00	552.73
			CATEGORY	37.25	0.00	552.73

			YSIDE CITYWIDE				PAGE 1	
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
				SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231846	3/01/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	41.75		608.72	I
231847	3/01/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	7.00		112.42	I
				CUSTOMER	48.75	0.00	721.14	
				COSTOMER	40.75	0.00	/21,14	
				CATEGORY	48.75	0.00	721.14	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	206
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			i	SALES REGISTER			BILL WEEK ENDI	NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231848	2/08/13	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	6.00		87.48	I
231849	3/01/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	18.00		262.44	I
231850	3/01/13	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	6.00		96.36	I
231851	3/01/13	800000	VISITING NURSE SERVICE	RAJA, HANIFA	7.00		102.06	I
231852	3/01/13	800000	VISITING NURSE SERVICE	RAJA, HANIFA	5.75		92.35	I
				CUSTOMER	42.75	0.00	640.69	
				CATEGORY	42.75	0.00	640.69	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	17
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI	AIDES	PEDIATRIC
			S	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231853	3/01/13	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	32.00		466.56	I	
231854	3/01/13	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	8.00		128.48	I	
				CUSTOMER	40.00	0.00	595.04		
				COSTOMER	40.00	0.00	595.04		
				CATEGORY	40.00	0.00	595.04		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	R		PAGE 1 - 208 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231855 231856	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	36.00 7.00		524.88 I 112.42 I
				CUSTOMER	43.00	0.00	637.30
				 CATEGORY	43.00	0.00	637.30

ı	RUN DATE	03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 209	
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O WAL	LS LT
ı				5	SALES REGISTER			BILL WEEK ENDING 3/08/	13
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
ı	001057	2 /01 /12	000000	TITATETNA NUDAE ARRITAR	DAMIALI LILOUM	20 50		420 11 T	
ı	231857	3/01/13	000008	VISITING NURSE SERVICE	RAMLALL, LILOWT	29.50		430.11 I	
ı									
ı					CATEGORY	29.50	0.00	430.11	
- 1					CHILCORT	27.50	0.00	150.11	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 21	.0
SALES JRN	rL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231858	3/01/13	800000	VISITING NURSE SERVICE	RAMOS, ISMAEL	3.00		43.74 I	
				CA EECODY	2.00	0.00	42.74	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE	222			-	- 21	11
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		2 /00 /12
			S F	ALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231859	3/01/13	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	16.00		233.28	I	
231860	3/01/13	800000	VISITING NURSE SERVICE	RAMPHAL, INDRIA	4.00		64.24	I	
231861	3/01/13	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I	
231862	3/01/13	800000	VISITING NURSE SERVICE	REINA, JOSE	12.00		174.96	I	
231863	3/01/13	800000	VISITING NURSE SERVICE	REINA, JOSE	4.00		64.24	I	
231864	3/01/13	800000	VISITING NURSE SERVICE	RENDON, EDUARDO	16.00		233.28	I	
231865	3/01/13	800000	VISITING NURSE SERVICE	RENDON, EDUARDO	4.00		64.24	I	
231866	2/08/13	000008	VISITING NURSE SERVICE	RICCA, MARIE	8.00		116.64	I	
231867	3/01/13	000008	VISITING NURSE SERVICE	RICCA, MARIE	16.00		233.28	I	
231868	3/01/13	000008	VISITING NURSE SERVICE	RICCA, MARIE	4.00		64.24	I	
231869	3/01/13	800000	VISITING NURSE SERVICE	RICE, SYDNEY	7.50		109.36	I	
				CUSTOMER	97.50	0.00	1,445.24		
				CATEGORY	97.50	0.00	1,445.24		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AUR ADULT REH	AB ONLY
			S	SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231870 231871	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RICHTERMAN, BUR	4.25 2.75		61.97 44.17	I
2318/1	3/01/13	000008	VISITING NURSE SERVICE	RICHTERMAN, BUR	2.75 		44.1/	
				CUSTOMER	7.00	0.00	106.14	
				CATEGORY	7.00	0.00	106.14	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 CCL CONGREGATE CA BILL WEEK ENDING	13 RE PROGRAM 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231872 231873	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	42.00 6.50		612.36 I 104.39 I	
				CUSTOMER	48.50	0.00	716.75	
				CATEGORY	48.50	0.00	 716.75	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - 21 VCP CHOICE LHCSA BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231874 231875	3/01/13 3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	297.52	

RUN DATE (03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 215	
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O W	ALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING 3/	08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
231876	3/01/13	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	48.00		699.84 I	
231877	3/01/13	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	8.00		128.48 I	
				CUSTOMER	56.00	0.00	828.32	
				CATEGORY	56.00	0.00	828.32	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 216 VCP CHOICE LHCSA	
SALES UKN	ш # 0323	LOC 001		ALES REGISTER				3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231878	3/01/13	000008	VISITING NURSE SERVICE	RIVERA, CARMEN	24.00		349.92 I	
231879	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, CARMEN	6.00		96.36 I	
231880	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, CAROL	15.75		229.64 I	
231881	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, CAROL	4.00		64.24 I	
231882	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, ERNESTO	13.00		189.54 I	
231883	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, ERNESTO	4.00		64.24 I	
				CUSTOMER	66.75	0.00	993.94	
				CATEGORY	66.75	0.00	993.94	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	217
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231884	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	218
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231885	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	8.00		116.64 I	
231886	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	4.00		64.24 I	
				CUSTOMER	12.00	0.00	180.88	
				CATEGORY	12.00	0.00	180.88	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	19
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAI	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231887	3/01/13	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 220 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231888 231889	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		40.00 8.00		583.20 I 128.48 I
				CUSTOMER	48.00	0.00	711.68
				CATEGORY	48.00	0.00	 711.68

			JYSIDE CITYWIDE	DDG NV NV			PAGE 1 -	221
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LHCS BILL WEEK ENDIN	
			5	ALES KEGISIEK			DIDD WEEK ENDIR	IG 3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
001000	0 /01 /10						26.26	
231890	3/01/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, ANA	6.00		96.36 I	-
231891	3/01/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	8.00		116.64	• •
231892	3/01/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, BIEN	2.00		32.12	
231893	3/01/13	000008	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	35.50		517.60	
231894	3/01/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	6.00		96.36	•
				CUSTOMER	57.50	0.00	859.08	
				CATEGORY	57.50	0.00	859.08	

ı	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 222	
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PR	OGRAM
				S	SALES REGISTER			BILL WEEK ENDING 3/0	8/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
	231895	3/01/13	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	71.50		1,042.48 I	
					CATEGORY	71.50	0.00	1,042.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231896 231897 231898	3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RODRIGUEZ, MARC RODRIGUEZ, MARI RODRIGUEZ, MARI	11.75 1.00 4.00		188.71 I 14.58 I 64.24 I	
				CUSTOMER	16.75	0.00	267.53	
				CATEGORY	16.75	0.00	267.53	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 224 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231899 231900	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	20.00 5.00		291.60 I 80.30 I
				CUSTOMER	25.00	0.00	371.90
				CATEGORY	25.00	0.00	 371.90

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	225 SA
	_			SALES REGISTER			BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231901 231902	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		42.00 7.00		612.36 112.42	I T
231702	3,01,13	00000	VIDITING NORDE BERVICE	CUSTOMER	49.00	0.00	724.78	
				COSTONER	49.00	0.00	724.70	
				CATEGORY	49.00	0.00	724.78	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 226 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
231903 231904	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	. ~	37.00 6.00		539.46 I 96.36 I
				CUSTOMER	43.00	0.00	635.82
				CATEGORY	43.00	0.00	635.82

RUN DATE 03/ SALES JRNL #	06/13 - SUP SUNN 0323 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	01/13 000008 01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROJAS, HAYDEE ROJAS, HAYDEE	18.00 3.00		262.44 I 48.18 I	
			CUSTOMER	21.00	0.00	310.62	
			CATEGORY	21.00	0.00	310.62	

			YSIDE CITYWIDE	DEC MY MY			PAGE 1 - 228	
SALES JRN	IL # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEI	₹		LTC NURSING HOMEW/O	3/08/13
			·		.•		BILL WEEK ENDING	3, 30, 23
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231907	2/22/13	800000	VISITING NURSE SERVICE	ROLON, JUANITA	8.00		116.64 I	
231908	3/01/13	800000	VISITING NURSE SERVICE	ROLON, JUANITA	40.00		583.20 I	
231909	3/01/13	800000	VISITING NURSE SERVICE	ROLON, JUANITA	8.00		128.48 I	
				CUSTOMER	56.00	0.00	828.32	
				CATEGORY	56.00	0.00	828.32	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 229 VCP CHOICE LHCSA	
SALES UKN	ш # 0323	LOC 001		SALES REGISTER				08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
231910 231911	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROMERO, SANTHY ROMERO, SANTHY	33.00 8.00		481.14 I 128.48 I	
				CUSTOMER	41.00	0.00	609.62	
				CATEGORY	41.00	0.00	609.62	

RUN DATE 03	3/06/13 - SUP	SUNNYSIDE CITY	YWIDE					PAGE 1	- 23	0
SALES JRNL	# 0323 LOC	001 SUNNYSII	DE CITYWIDE	REG NY N	Y			LTC NURSING	HOMEW/	O WALLS (LT
			S	BALES RE	GIST	E R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE CUST	T NO CUSTOMER	NAME	REFER	ENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231912 3	3/01/13 0000	008 VISITING	NURSE SERVICE	ROMO,	FLOR	48.00		699.84	I	
231913 3	3/01/13 0000	008 VISITING	NURSE SERVICE	ROMO,	FLOR	8.00		128.48	I	
231914 3	3/01/13 0000	008 VISITING	NURSE SERVICE	ROSA,	ANA	32.00		466.56	I	
231915 3	3/01/13 0000	008 VISITING	NURSE SERVICE	ROSA,	ANA	8.00		128.48	I	
					CUSTOMER	96.00	0.00	1,423.36		
					CATEGORY	96.00	0.00	1,423.36		

			YSIDE CITYWIDE					PAGE 1	- 23	31
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	_	NY			VCP CHOICE L		
			\$	SALES R	EGISTE	R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231916	3/01/13	800000	VISITING NURSE SERVICE	ROSA,	LUZ E	47.50		692.55	I	
231917	3/01/13	800000	VISITING NURSE SERVICE	ROSA,	LUZ E	8.00		128.48	I	
					- CUSTOMER	55.50	0.00	821.03		
					CATEGORY	55.50	0.00	821.03		

RUN DATE 03/ SALES JRNL	/06/13 - SUP SUNN # 0323 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY 1	1Y			PAGE 1 ADU ADULT	- 23	2
SALES URNL +	# 0323 LOC 001		-	EGISTER	2		BILL WEEK END	ING	3/08/13
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFER	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	/01/13 000008 /01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	MANOLO MANOLO	18.75 5.50		273.38 88.33	I	
				CUSTOMER	24.25	0.00	361.71		
				CATEGORY	24.25	0.00	361.71		

RUN DATE 03/0 SALES JRNL #	06/13 - SUP SUNN 0323 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 233 VCP CHOICE LHCSA BILL WEEK ENDING 3	3/08/13
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
231921 3/0 231922 3/0	01/13 000008 01/13 000008 01/13 000008 01/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSARIO, ELSA ROSARIO, ELSA ROSARIO, MARIA ROSARIO, MARIA	27.00 7.00 25.00 5.00		393.66 I 112.42 I 364.50 I 80.30 I	
			CUSTOMER	64.00	0.00	950.88	
			CATEGORY	64.00	0.00	950.88	

			YSIDE CITYWIDE				-	- 23	4
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			ADU ADULT BILL WEEK END	TNC	3/08/13
			5				DILL WEEK END	ZING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
001004	0 / 0 1 / 1 0						0.7.40	_	
231924	3/01/13	800000	VISITING NURSE SERVICE	ROSTKOWSKI, WIE	6.00		87.48	Τ	
231925	3/01/13	800000	VISITING NURSE SERVICE	ROSTKOWSKI, WIE	3.00		48.18	I	
231926	3/01/13	800000	VISITING NURSE SERVICE	ROUZINOS, GEORG	12.00		174.96	I	
231927	3/01/13	800000	VISITING NURSE SERVICE	ROUZINOS, GEORG	3.00		48.18	I	
231928	2/01/13	800000	VISITING NURSE SERVICE	ROZIER, MARY	3.00		43.74	I	
				CUSTOMER	27.00	0.00	402.54		
				CATEGORY	27.00	0.00	402.54		
1									

RUN DATE 03/00 SALES JRNL # 0		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE# DAT	re cust no	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231930 3/03 231931 3/03	1/13 000008 1/13 000008 1/13 000008 1/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RUEDA, INES RUEDA, INES RUFFEN, SANDRA RUFFEN, SANDRA	40.00 7.00 24.00 6.00		583.20 1 112.42 1 349.92 1 96.36 1	-
			CUSTOMER	77.00	0.00	1,141.90	
			CATEGORY	77.00	0.00	1,141.90	

		NYSIDE CITYWIDE				PAGE 1 - 236	
SALES JRNL # 0	323 LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 3/	08/13
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
231933 3/01 231934 3/01		VISITING NURSE SERVICE VISITING NURSE SERVICE	RUSSO, MONICA RUSSO, MONICA	59.75 10.00		871.16 I 160.60 I	
			CUSTOMER	69.75	0.00	1,031.76	
			CATEGORY	69.75	0.00	1,031.76	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		37
	_ 0020	200 001		SALES REGISTER			BILL WEEK END		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231935	3/01/13	800000	VISITING NURSE SERVICE	,	29.75		433.76	I	
231936 231937	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 66.00		96.36 962.28	I	
231737	3/01/13	000000	VISITING NORSE SERVICE	SALADIN, MAKIA					
				CUSTOMER	101.75	0.00	1,492.40		
				CATEGORY	101.75	0.00	1,492.40		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 238	
SALES JRN	rL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING 3	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
231938	2/15/13	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	6.00		87.48 I	
231939	3/01/13	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	30.00		437.40 I	
231940	3/01/13	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	6.00		96.36 I	
				CUSTOMER	42.00	0.00	621.24	
				CATEGORY	42.00	0.00	621.24	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	39
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231941	3/01/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	66.00		962.28	I	
231942	3/01/13	800000	VISITING NURSE SERVICE	SAMPOGNA, LUCY	11.00		176.66	I	
231943	3/01/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	19.25		280.67	I	
231944	3/01/13	800000	VISITING NURSE SERVICE	SANCHEZ, ADOLFO	5.00		80.30	I	
231945	3/01/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	35.00		510.30	I	
				CUSTOMER	136.25	0.00	2,010.21		
				CATEGORY	136.25	0.00	2,010.21		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231946	3/01/13	800000	VISITING NURSE SERVICE	SANCHEZ, FLORA	7.00		112.42 I	
				CATEGORY	7.00	0.00	112.42	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
231947 231948	3/01/13 3/01/13	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SANCHEZ, LIDIA SANCHEZ, LIDIA	41.25 7.00		601.43 I 112.42 I	
				CUSTOMER	48.25	0.00	713.85	
				CATEGORY	48.25	0.00	713.85	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	12
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
			·	SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231949	3/01/13	000008	VISITING NURSE SERVICE	SANCHEZ, MARIA	28.00		408.24	I	
231950	3/01/13	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	7.00		112.42	I	
				CUSTOMER	35.00	0.00	520.66		
				CATEGORY	35.00	0.00	520.66		
1				CALEGORY	33.00	0.00	520.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER	1		PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
231951 231952 231953 231954	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE		47.75 8.00 40.00 8.00		696.20 128.48 583.20 128.48	I I I
				CUSTOMER	103.75	0.00	1,536.36	
				CATEGORY	103.75	0.00	1,536.36	

ı	RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 24	4
ı	SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	3/08/13
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	231955	3/01/13	800000	VISITING NURSE SERVICE	SANTELLA, LAURA	4.00		58.32 I	
					CATEGORY	4.00	0.00	58.32	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	ł5
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S.	ALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231956	3/01/13	800000	VISITING NURSE SERVICE	SANTIAGO, EDILT	16.00		233.28	I	
231957	3/01/13	800000	VISITING NURSE SERVICE	SANTIAGO, EDILT	4.00		64.24	I	
231958	3/01/13	000008	VISITING NURSE SERVICE	SANTOS, LETY I	17.50		255.15	I	
231959	3/01/13	000008	VISITING NURSE SERVICE	SANTOS, LETY I	6.00		96.36	I	
231960	3/01/13	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	36.00		524.88	I	
231961	3/01/13	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	6.00		96.36	I	
231962	3/01/13	000008	VISITING NURSE SERVICE	SCRO, WILLIAM	24.00		349.92	I	
231963	3/01/13	000008	VISITING NURSE SERVICE	SCRO, WILLIAM	4.00		64.24	I	
231964	3/01/13	000008	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I	
231965	3/01/13	000008	VISITING NURSE SERVICE	SEGOVIA, BEATRI	6.00		96.36	I	
231966	3/01/13	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	59.50		867.52	I	
231967	3/01/13	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	10.00		160.60	I	
	-, - , -								
				CUSTOMER	225.00	0.00	3,333.79		
							-,		
				CATEGORY	225.00	0.00	3,333.79		
1				CHILDON		0.00	2,333.73		

RUN DATE 03/06/1 SALES JRNL # 032	.3 - SUP SUNNYSIDE CITYWIDE 23 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	246
SALES ORNE # 032		SALES REGISTE	R		BILL WEEK ENDI	NG 3/08/13
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
231968 3/01/1 231969 3/01/1		,	35.00 7.00		510.30 112.42	I I
		CUSTOMER	42.00	0.00	622.72	
		CATEGORY	42.00	0.00	622.72	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 VCP CHOICE LHCSA	247
	,,		S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231970	3/01/13	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	35.00		510.30 I	
231971	3/01/13	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	7.00		112.42 I	
231972	3/01/13	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80 I	
				CUSTOMER	52.00	0.00	768.52	
				CATEGORY	52.00	0.00	768.52	

RUN DATE 03 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 248 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		36.00 6.00		524.88 I 96.36 I
				CUSTOMER	42.00	0.00	621.24
				CATEGORY	42.00	0.00	621.24

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	249
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231975	3/01/13	000008	VISITING NURSE SERVICE	SINGH, BADREE	32.50		473.85 I	
231976	3/01/13	800000	VISITING NURSE SERVICE	SINGH, BADREE	6.00		96.36 I	
231977	3/01/13	800000	VISITING NURSE SERVICE	SINGH, JAMOONIE	12.00		174.96 I	
231978	3/01/13	800000	VISITING NURSE SERVICE	SINGH, JAMOONIE	3.00		48.18 I	
				CUSTOMER	53.50	0.00	793.35	
				CATEGORY	53.50	0.00	793.35	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 -	250
SALES JRNI	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	G 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
231979 231980	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 3.00		87.48 I 48.18 I	
				CUSTOMER	9.00	0.00	135.66	
				CATEGORY	9.00	0.00	135.66	

		03/06/13 - L # 0323			REG NY NY SALES REGISTER			PAGE 1 - 251 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13	
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
2	231981	3/01/13	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
					CATEGORY	15.00	0.00	218.70	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	52
SALES JRN	rL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231982	3/01/13	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
				CATEGORY	12.00	0.00		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25	3
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231983	3/01/13	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	26.00		379.08 I	
231984	3/01/13	000008	VISITING NURSE SERVICE	SORIA, ROLANDO	6.00		96.36 I	
231985	3/01/13	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	32.00		466.56 I	
231986	3/01/13	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	8.00		128.48 I	
				CUSTOMER	72.00	0.00	1,070.48	
				CATEGORY	72.00	0.00	1,070.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	54
Brillio orav	11 0525	100 001		SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
231987 231988	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	STACK, LAURA STACK, LAURA	4.00		58.32 I 32.12 I	
				CUSTOMER	6.00	0.00	90.44	
				CATEGORY	6.00	0.00	90.44	

RUN DATE 0 SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
231990 231991	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	STAFILIAS, EVAN STAFILIAS, EVAN STAMBOULIDIS, V STAMBOULIDIS, V	72.00 12.00 48.75 8.00		1,049.76 I 192.72 I 710.78 I 128.48 I	
				CUSTOMER	140.75	0.00	2,081.74	
				CATEGORY	140.75	0.00	2,081.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE AL BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
231993 231994	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STEIN, STEPHANI STEIN, STEPHANI	18.00 3.00		262.44 48.18	I I
				CUSTOMER	21.00	0.00	310.62	
				CATEGORY	21.00	0.00	310.62	

RUN DATE SALES JRN		- SUP SUNN LOC 001	IYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 25	57
SALES URN	ш # 0323	TOC 001	SUNNYSIDE CITYWIDE S.	REGNY NY ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
231995	3/01/13	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	3.25		47.39	I	
231996	3/01/13	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	16.00		233.28	I	
231997	3/01/13	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	4.00		64.24	I	
231998	3/01/13	800000	VISITING NURSE SERVICE	STICKELL, BLANC	28.00		408.24	I	
231999	3/01/13	800000	VISITING NURSE SERVICE	STICKELL, BLANC	6.25		100.38	I	
232000	3/01/13	800000	VISITING NURSE SERVICE	STROBL, ALFRED	30.00		437.40	I	
232001	3/01/13	800000	VISITING NURSE SERVICE	STROBL, ALFRED	6.00		96.36	I	
232002	3/01/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	24.00		349.92	I	
232003	3/01/13	800000	VISITING NURSE SERVICE	SUAREZ, MARINA	6.00		96.36	I	
				CUSTOMER	123.50	0.00	1,833.57		
				CATEGORY	123.50	0.00	1,833.57		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	2		PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232004 232005 232006 232007	3/01/13 3/01/13 3/01/13 3/01/13	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SUAREZ, TULIA SUAREZ, TULIA TAVERAS ARIAS, TAVERAS ARIAS,	35.75 6.00 22.50 5.75		521.24 I 96.36 I 328.06 I 92.35 I	
				CUSTOMER	70.00	0.00	1,038.01	
				CATEGORY	70.00	0.00	1,038.01	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	259
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			:	SALES REGISTER			BILL WEEK ENDI	NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
232008	3/01/13	000008	VISITING NURSE SERVICE	TAVERAS, BERNAR	16.00		233.28	I
232009	3/01/13	800000	VISITING NURSE SERVICE	TAVERAS, BERNAR	4.00		64.24	I
232010	3/01/13	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	24.00		349.92	I
232011	3/01/13	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	4.00		64.24	I
				CUSTOMER	48.00	0.00	711.68	
				CATEGORY	48.00	0.00	711.68	

RUN DATE 03/	06/13 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 260	
SALES JRNL #	0323 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDING 3/08/13	
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
232012 3/	01/13 000008	VISITING NURSE SERVICE	TEODORU, MIRELL	3.00		43.74 I	
232013 3/	01/13 000008	VISITING NURSE SERVICE	TEODORU, MIRELL	3.00		48.18 I	
232014 3/	01/13 000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	36.00		524.88 I	
232015 3/	01/13 000008	VISITING NURSE SERVICE	TERZIAN, ASDGHI	6.00		96.36 I	
			CUSTOMER	48.00	0.00	713.16	
			CATEGORY	48.00	0.00	713.16	

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 261 SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCSA									51
511225 0144	0025	200 001		ALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232016	1/25/13	000008	VISITING NURSE SERVICE	TINOCO, INES	1.00		14.58	I	
232017	3/01/13	000008	VISITING NURSE SERVICE	TINOCO, INES	28.00		408.24	I	
232018	3/01/13	800000	VISITING NURSE SERVICE	TINOCO, INES	7.00		112.42	I	
232019	3/01/13	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	20.00		291.60	I	
232020	3/01/13	800000	VISITING NURSE SERVICE	TOLENTINO, PASC	5.00		80.30	I	
232021	3/01/13	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	16.00		233.28	I	
232022	3/01/13	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	4.00		64.24	I	
				CUSTOMER	81.00	0.00	1,204.66		
				CATEGORY	81.00	0.00	1,204.66		

RUN DATE 03/06/13	B - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	262
SALES JRNL # 0323	B LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	BALES REGISTER	_		BILL WEEK ENDING	3/08/13
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232023 3/01/13	000008	VISITING NURSE SERVICE	TORO, PURA	72.00		1,049.76 I	
232024 3/01/13	000008	VISITING NURSE SERVICE	TORO, PURA	12.00		192.72 I	
232025 3/01/13	000008	VISITING NURSE SERVICE	TORRES, EMELINA	23.00		335.34 I	
232026 3/01/13	000008	VISITING NURSE SERVICE	TORRES, EMELINA	7.00		112.42 I	
			CUSTOMER	114.00	0.00	1,690.24	
			CATEGORY	114.00	0.00	1,690.24	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	53
Brilles orde	11 11 0323	100 001		SALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232027 232028	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORRES, LUZ M TORRES, LUZ M	70.50 12.00		1,027.89 192.72	I	
232020	3/01/13	000008	VISITING NORSE SERVICE	,					
				CUSTOMER	82.50	0.00	1,220.61		
				CATEGORY	82.50	0.00	1,220.61		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E	R		PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	64 /O WALLS (LT 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232029 232030	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		36.00 6.00		524.88 I 96.36 I	
				CUSTOMER	42.00	0.00	621.24	
				- CATEGORY	42.00	0.00	621.24	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 26 ADU ADULT BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232031	3/01/13	800000	VISITING NURSE SERVICE	TOUMA, MATTA	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

			YSIDE CITYWIDE				-	- 26	56
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		2 / 0 0 / 1 2
			S	ALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232032	3/01/13	000008	VISITING NURSE SERVICE	TOVARDE BOCAN,	13.00		189.54	т	
232032	3/01/13	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	16.00		233.28		
232033	3/01/13	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	4.00		64.24		
232034	3/01/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	47.50		692.56	T	
232036	3/01/13	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	7.50		120.45	T	
232030	3,01,13	00000	VIBITING NORDE BERVICE						
				CUSTOMER	88.00	0.00	1,300.07		
				CATEGORY	88.00	0.00	1,300.07		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 267 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
232037 232038	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	16.00 4.00		233.28 I 64.24 I
				CUSTOMER	20.00	0.00	297.52
				CATEGORY	20.00	0.00	 297.52

			YSIDE CITYWIDE	DEC MY MY			-	- 26	58
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTE	R		VCP CHOICE LE		3/08/13
			_						-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232039	3/01/13	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	53.50		780.03	I	
232040	3/01/13	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	9.00		144.54	I	
232041	2/22/13	800000	VISITING NURSE SERVICE	URBINA, ANA	5.00		72.90	I	
232042	3/01/13	800000	VISITING NURSE SERVICE	URBINA, ANA	30.00		437.40	I	
232043	3/01/13	000008	VISITING NURSE SERVICE	URBINA, ANA	5.00		80.30	I	
				_					
				CUSTOMER	102.50	0.00	1,515.17		
				CATEGORY	102.50	0.00	1,515.17		
				CALEGORY	102.50	0.00	1,515.1/		

RUN DATE 03/0 SALES JRNL #			REGNY NY SALES REGISTER			PAGE 1 - 26 ADU ADULT BILL WEEK ENDING	9 3/08/13
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/13 000008 1/13 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		34.25 7.00		499.37 I 112.42 I	
			CUSTOMER	41.25	0.00	611.79	
			CATEGORY	41.25	0.00	611.79	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 CCL CONGREGATE CA BILL WEEK ENDING	70 RE PROGRAM 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232046 232047	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 5.00		291.60 I 80.30 I	
				CUSTOMER	25.00	0.00	371.90	
				CATEGORY	25.00	0.00	371.90	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0323	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCS	
				SALES KEGISTER			MEEK ENDING	3 3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
232048	3/01/13	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

			YSIDE CITYWIDE				PAGE 1	- 27	'2
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK ENI	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP	SURPLUS
232049	3/01/13	000008	VISITING NURSE SERVICE	VALENTI, HELEN	42.50		619.65	I	
232050	3/01/13	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		128.48	I	
				CUSTOMER	50.50	0.00	748.13		
				CATEGORY	50.50	0.00	748.13		

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END:	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
232051	3/01/13	800000	VISITING NURSE SERVICE	VALENTI, PAULIN	5.75		83.84	I
				CATEGORY	5.75	0.00	83.84	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	- 274 CSA
	_ "			SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
232052 232053	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	39.00 8.00		568.62 128.48	I
232033	3/01/13	000000	VISITING NORSE SERVICE	,				
				CUSTOMER	47.00	0.00	697.10	
				CATEGORY	47.00	0.00	697.10	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 275 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
232054 232055	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		7.00 3.75		102.06 I 60.23 I
				CUSTOMER	10.75	0.00	162.29
				 CATEGORY	10.75	0.00	 162.29

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 276 ADU ADULT	400410
				SALES REGISTER			BILL WEEK ENDING 3	/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
232056 232057	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ ~ ,	16.00 4.00		233.28 I 64.24 I	
				CUSTOMER	20.00	0.00	297.52	
				CATEGORY	20.00	0.00	 297.52	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 277
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
232058	3/01/13	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	27.00		393.66 I
232059	3/01/13	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	5.00		80.30 I
232060	3/01/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	18.00		262.44 I
				CUSTOMER	50.00	0.00	736.40
				CATEGORY	50.00	0.00	736.40

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	278	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_I	
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
232061	3/01/13	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	3.00		48.18 I		
				CATEGORY	3.00	0.00	48.18		

			YSIDE CITYWIDE	DDG 1991			PAGE 1 - 279	
SALES JRN	L # U323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (I BILL WEEK ENDING 3/08/13	ıΤ
			•				DIDE WEEK ENDING 3/00/13	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
020060	0/15/12	000000			F 00		F0.00	
232062	2/15/13	000008	VISITING NURSE SERVICE	~ ,	5.00		72.90 I	
232063	3/01/13	800000	VISITING NURSE SERVICE	~ ,	34.00		495.72 I	
232064	3/01/13	000008	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	6.00		96.36 I	
				CUSTOMER	45.00	0.00	664.98	
				CATEGORY	45.00	0.00	664.98	

RUN DATE	03/06/13	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	280
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	ALES REGISTER			BILL WEEK ENDI	NG 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
232065	3/01/13	800000	VISITING NURSE SERVICE	VAZQUEZ, FELIPE	4.75		69.26	I
232066	3/01/13	800000	VISITING NURSE SERVICE	VELECELA, LUIS	18.00		262.44	I
232067	3/01/13	800000	VISITING NURSE SERVICE	VELECELA, LUIS	6.00		96.36	I
232068	3/01/13	800000	VISITING NURSE SERVICE	VELOZ REYES, AL	16.00		233.28	I
232069	3/01/13	800000	VISITING NURSE SERVICE	VELOZ REYES, AL	4.00		64.24	I
				CUSTOMER	48.75	0.00	725.58	
				CATEGORY	48.75	0.00	725.58	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	281
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTE	R		BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232070	3/01/13	000008	VISITING NURSE SERVICE	VENTURA, ROSA	42.00		612.36 I	
232071	3/01/13	800000	VISITING NURSE SERVICE	VENTURA, ROSA	7.00		112.42 I	
				CUSTOMER	49.00	0.00	724.78	
				CATEGORY	49.00	0.00	724.78	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	282
			2	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
232072 232073 232074	1/25/13 3/01/13 3/01/13	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VERAS, JUANA VERAS, JUANA VERAS, JUANA	7.00 60.00 10.00		102.06 I 874.80 I 160.60 I	
				CUSTOMER	77.00	0.00	1,137.46	
				CATEGORY	77.00	0.00	1,137.46	

			YSIDE CITYWIDE	DEC MY MY			PAGE 1 -	
SALES JRNI	⊔ # 0323	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADUI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
232075	3/01/13	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	TYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 284 VCP CHOICE LHCSA BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232076 232077	3/01/13 3/01/13	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VILLAPOL, ANNA VILLAPOL, ANNA	30.00 6.00		437.40 I 96.36 I	
				CUSTOMER	36.00	0.00	533.76	
				CATEGORY	36.00	0.00	 533.76	

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 28	5
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY N	1X			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES RE	GIST	E R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFER	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232078	3/01/13	000008	VISITING NURSE SERVICE	VITO,	CARMEN	24.00		349.92	I	
232079	3/01/13	800000	VISITING NURSE SERVICE	VITO,	CARMEN	6.00		96.36	I	
					CUSTOMER	30.00	0.00	446.28		
					CATEGORY	30.00	0.00	446.28		

			YSIDE CITYWIDE				PAGE 1	
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
232080	3/01/13	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	60.00		874.80	I
232081	3/01/13	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	10.00		160.60	I
				CUSTOMER	70.00	0.00	1,035.40	
				COSTOMER	,	0.00	1,033.40	
				CATEGORY	70.00	0.00	1,035.40	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 28	37
			S	SALES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232082 232083	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VLAHOS, MARIE VLAHOS, MARIE	16.00 4.00		233.28 64.24	I T	
232003	3701713	00000	VIBILING NORDE BERVICE	·					
				CUSTOMER	20.00	0.00	297.52		
				CATEGORY	20.00	0.00	297.52		

RUN DATE (03/06/13 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	288
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232084	3/01/13	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74 I	
1				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	- 289
			5	SALES REGISTER			BILL WEEK END:	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
232085 232086	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	WALLACE, LYDIA WALLACE, LYDIA	6.00 3.00		87.48 48.18	I
				CUSTOMER	9.00	0.00	135.66	
				CATEGORY	9.00	0.00	135.66	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	290 A
	_			ALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
232087 232088	3/01/13 3/01/13	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	WEINHAUS, SUSAN WEINHAUS, SUSAN	30.00 6.00		437.40 I 96.36 I	
232000	3/01/13	000000	VIBILING NORDE BERVICE	WEINIAGS, BODAN				
				CUSTOMER	36.00	0.00	533.76	
				CATEGORY	36.00	0.00	533.76	

			YSIDE CITYWIDE				PAGE 1	- 291
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				E CARE PROGRAM
				SALES REGISTER			BILL WEEK END	ING 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
232089	3/01/13	000008	VISITING NURSE SERVICE	WHITEHEAD, NANC	10.00		145.80	I
232090	3/01/13	800000	VISITING NURSE SERVICE	WHITEHEAD, NANC	5.00		80.30	I
				CUSTOMER	15.00	0.00	226.10	
					15.00			
				CATEGORY	15.00	0.00	226.10	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI	- 29	2
Brilling Grav	1 0323	100 001		SALES REGISTER			BILL WEEK EN		3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232091	3/01/13	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	12.00		174.96	I	
232092	3/01/13	000008	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	4.00		64.24		
				CUSTOMER	16.00	0.00	239.20		
				CATEGORY	 16.00	0.00	239.20		

RUN DATE (03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 293	
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232093	3/01/13	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 294 SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 3/08/13 CUST NO CUSTOMER NAME

REFERENCE

REFERENCE

HOURS

TAX AMT

AMOUNT TYP

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ALI, AMRGNITSSA
ALI REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 232094 3/01/13 232095 3/01/13 232096 3/01/13 232097 3/01/13 232098 3/01/13 232099 3/01/13 232100 3/01/13 232101 3/01/13 232102 3/01/13 232103 3/01/13 232104 3/01/13 232105 2/22/13 232106 3/01/13 232107 3/01/13 232108 3/01/13 232109 3/01/13 232110 3/01/13 232111 3/01/13 232112 3/01/13 232113 3/01/13 232114 3/01/13 232115 3/01/13 232116 3/01/13 232117 3/01/13 232118 3/01/13 232119 3/01/13 232120 3/01/13 232121 3/01/13 232122 3/01/13 232123 3/01/13 232124 3/01/13 232125 3/01/13 232126 3/01/13 232127 3/01/13 232128 3/01/13 232129 3/01/13 232130 3/01/13 232131 3/01/13 232132 3/01/13 232133 3/01/13 232134 3/01/13 232135 3/01/13 232136 2/15/13 232137 3/01/13 232138 3/01/13 232139 2/22/13 232140 3/01/13 232141 3/01/13 3/01/13 000010 GUILDNET 232142

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 2 - 295SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET YWIDE REGNY NY SALES REGISTER BILL WEEK ENDING 3/08/13 CUST NO CUSTOMER NAME

REFERENCE

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AMOUNT

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FERRARA, ANN

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000010

GUILINNTT

FERRACIS, VICTOR

42.00

635.04

000010

GUILINNTT

GRACIA, LUCILA

35.00

529.20

100010

GUILINNTT

GRACIA, LUCILA

35.00

105.84

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GRACIA, LUCILA

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GRACIA, MARIA A

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GRACIA, MARIA B

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GREEN REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 232143 786.24 I 3/01/13 1,058.40 I 232144 3/01/13 232145 3/01/13 232146 2/22/13 232147 3/01/13 232148 3/01/13 232149 3/01/13 232150 3/01/13 232151 3/01/13 232152 3/01/13 232153 3/01/13 232154 3/01/13 232155 3/01/13 232156 3/01/13 232157 3/01/13 232158 3/01/13 232159 2/22/13 232160 3/01/13 232161 3/01/13 232162 3/01/13 232163 3/01/13 232164 3/01/13 232165 3/01/13 232166 3/01/13 232167 3/01/13 232168 3/01/13 232169 3/01/13 232170 3/01/13 232171 3/01/13 232172 3/01/13 232173 3/01/13 232174 2/01/13 232175 3/01/13 232176 3/01/13 232177 3/01/13 232178 3/01/13 232179 3/01/13 232180 3/01/13 232181 3/01/13 232182 3/01/13 232183 3/01/13 232184 3/01/13 232185 3/01/13 232186 3/01/13 232187 3/01/13 232188 3/01/13 232189 3/01/13 232190 3/01/13 3/01/13 000010 GUILDNET 232191

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 3 - 296 SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET WIDE REGIN NY
SALES REGISTER BILL WEEK ENDING 3/08/13 REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 232192 378.00 I 3/01/13 000010 GUILDNET 232193 378.00 I 3/01/13 000010 GUILDNET 232194 718.20 I 3/01/13 000010 GUILDNET 232195 3/01/13 000010 GUILDNET 232196 GUILDNET 3/01/13 000010 232197 GUILDNET 3/01/13 000010 232198 GUILDNET 3/01/13 000010 232199 2/22/13 000010 GUILDNET 232200 3/01/13 000010 GUILDNET 232201 3/01/13 000010 GUILDNET 232202 3/01/13 000010 GUILDNET GUILDNET 232203 3/01/13 000010 232204 3/01/13 000010 GUILDNET 232205 3/01/13 000010 GUILDNET 232206 3/01/13 000010 GUILDNET 232207 3/01/13 000010 GUILDNET 232208 2/22/13 000010 GUILDNET 232209 3/01/13 000010 GUILDNET 232210 3/01/13 000010 GUILDNET 232211 3/01/13 000010 GUILDNET 232212 000010 GUILDNET 3/01/13 232213 000010 GUILDNET 3/01/13 232214 000010 GUILDNET 3/01/13 232215 3/01/13 000010 GUILDNET 232216 3/01/13 000010 GUILDNET 232217 3/01/13 000010 GUILDNET 232218 3/01/13 000010 GUILDNET 232219 3/01/13 000010 GUILDNET 232220 3/01/13 000010 GUILDNET 232221 3/01/13 000010 GUILDNET 232222 3/01/13 000010 GUILDNET 232223 3/01/13 000010 GUILDNET 232224 3/01/13 000010 GUILDNET 232225 2/22/13 000010 GUILDNET 232226 3/01/13 000010 GUILDNET 232227 3/01/13 000010 GUILDNET 232228 2/08/13 000010 GUILDNET 232229 3/01/13 000010 GUILDNET 232230 000010 GUILDNET 3/01/13 232231 000010 GUILDNET 3/01/13 232232 000010 GUILDNET 3/01/13 232233 000010 GUILDNET 3/01/13 232234 000010 GUILDNET 3/01/13 232235 3/01/13 000010 GUILDNET 232236 3/01/13 000010 GUILDNET 232237 3/01/13 000010 GUILDNET 232238 3/01/13 000010 GUILDNET 232239 2/22/13 000010 GUILDNET 3/01/13 000010 GUILDNET 232240

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 4 - 297 SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET CITYWIDE REG NY NY
SALES REGISTER BILL WEEK ENDING 3/08/13 CUST NO CUSTOMER NAME

O00010 GUILDNET

000010 GUILDNET REFERENCE HOURS TAX AMT INVOICE# DATE CUST NO CUSTOMER NAME AMOUNT TYP SURPLUS 232241 531.96 I 3/01/13 232242 3/01/13 241.92 I 232243 60.48 I 3/01/13 232244 3/01/13 997.92 232245 3/01/13 211.68 232246 60.48 3/01/13 232247 3/01/13 302.40 232248 2/15/13 846.72 232249 3/01/13 120.96 232250 3/01/13 196.56 232251 3/01/13 96.72 232252 3/01/13 580.32 232253 362.88 3/01/13 232254 3/01/13 90.72 232255 3/01/13 635.04 232256 3/01/13 105.84 232257 3/01/13 317.52 232258 3/01/13 105.84 232259 3/01/13 302.40 232260 3/01/13 362.88 232261 3/01/13 960.12 232262 3/01/13 710.64 232263 302.40 3/01/13 232264 3/01/13 302.40 232265 3/01/13 90.72 232266 3/01/13 725.76 232267 3/01/13 120.96 232268 3/01/13 302.40 232269 846.72 3/01/13 232270 2/08/13 635.04 232271 3/01/13 249.48 232272 3/01/13 241.80 232273 3/01/13 48.36 232274 3/01/13 241.80 232275 3/01/13 48.36 232276 771.12 3/01/13 232277 3/01/13 136.08 232278 3/01/13 193.44 232279 3/01/13 650.16 3/01/13 232280 241.92 232281 3/01/13 60.48 3/01/13 232282 378.00 232283 3/01/13 241.92 3/01/13 232284 60.48 232285 3/01/13 846.72 232286 3/01/13 740.88 232287 3/01/13 302.40 232288 3/01/13 000010 GUILDNET 665.28 3/01/13 000010 GUILDNET 232289 725.76

			YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 5 - 298		
SALES JRN	NL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		
				SALES REGISTE	R		BILL WEEK ENI	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
02000	2 /01 /12	000010	GIIII DIIII	TUTU 1/2 D T 2	22.00		400.06	_	
232290	3/01/13	000010	GUILDNET	THEN, MARIA	33.00		498.96	I	
232291	3/01/13	000010	GUILDNET	THERMOSY, MARIE	45.00		680.40	I	
232292	3/01/13	000010	GUILDNET	TORO, ROSARIO	42.25		638.82	I	
232293	3/01/13	000010	GUILDNET	TORRES, JUANITA	38.00		574.56	I	
232294	3/01/13	000010	GUILDNET	TORRES, JUANITA	8.00		120.96	I	
232295	3/01/13	000010	GUILDNET	TOUSSAINT, MIGU	33.00		498.96	I	
232296	3/01/13	000010	GUILDNET	VARGAS, ALCIBIA	35.00		529.20	I	
232297	3/01/13	000010	GUILDNET	VARGAS, AUREA	30.00		483.60	I	
232298	3/01/13	000010	GUILDNET	VARGAS, AUREA	5.00		80.60	I	
232299	3/01/13	000010	GUILDNET	VARGAS, RAMON	24.00		362.88	I	
232300	3/01/13	000010	GUILDNET	VAZOUEZ, ROSA	19.25		291.06	I	
232301	3/01/13	000010	GUILDNET	VEGA, ADELAIDA	6.00		1,179.36	I	
232302	3/01/13	000010	GUILDNET	VEGA . ADELATDA	1.00		196.56	Ī	
232303	3/01/13	000010	GUILDNET	VELEZ CARMEN	38 00		574 56	Ī	
232304	3/01/13	000010	GUILDNET	VELEZ, CHUIEN	16.00		241 92	Ī	
232301	3/01/13	000010	GUILDNET	VEDEZ, WIDDIANO	25 00		378 00	Ī	
232305	2/08/13	000010	GUILDNET	VENTORA, DAISI	62.00		027 11	I	
232300	3/01/13	000010	GUILDNET	VICTORIO, ROQUE	11 00		166 22	Ī	
232307	3/01/13	000010	GUILDNET	VICTORIO, ROQUE	62 50		060.32		
232308	3/01/13	000010	GUILIDNEE	VLANOS, MAKIE	53.50		75.60	I	
			GUILDNET	WARD, ALIHEA	5.00		75.00	I	
232310	3/01/13	000010	GUILDNET	WARD, ALTHEA	2.00		30.24	I	
232311	3/01/13	000010	GUILDNET	WEISZ, KLARA	8.00		128.96	I	
232312	3/01/13	000010	GUILDNET	WEST, BALDWIN	16.00		241.92	I	
232313	3/01/13	000010	GUILDNET	WEST, BALDWIN	4.00		60.48	I	
232314	3/01/13	000010	GUILDNET	WHITLEY, MYRNA	16.00		241.92	I	
232315	3/01/13	000010	GUILDNET	YI, CARLOS	20.00		302.40	I	
232316	3/01/13	000010	GUILDNET	ZARAGOZA, ISABE	40.00		604.80	I	
232317	3/01/13	000010	GUILDNET	ZARE, GLORIA	71.75		1,084.86	I	
232318	3/01/13	000010	GUILDNET	ZARE, GLORIA	11.75		177.66	I	
232319	3/01/13	000010	GUILDNET	ZUMAETA, FANNY	64.00		967.68	I	
				THEN, MARIA THERMOSY, MARIE TORO, ROSARIO TORRES, JUANITA TORRES, JUANITA TORRES, JUANITA TOUSSAINT, MIGU VARGAS, ALCIBIA VARGAS, AUREA VARGAS, RAMON VAZQUEZ, ROSA VEGA, ADELAIDA VEGA, ADELAIDA VELEZ, WILLIAMS VENTURA, DAISY VICTORIO, ROQUE VICTORIO, ROQUE VICTORIO, ROQUE VLAHOS, MARIE WARD, ALTHEA WARD, ALTHEA WEISZ, KLARA WEISZ, KLARA WEST, BALDWIN WHITLEY, MYRNA YI, CARLOS ZARAGOZA, ISABE ZARE, GLORIA ZUMAETA, FANNY CUSTOMER	6,245.00	0.00	102,218.44		
				CATEGORY	6,245.00	0.00	102,218.44		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 29	
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH FI	RST	
				SALES REGISTER	-		BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232320	3/01/13	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
232321	3/01/13	000122	HEALTH FIRST	BLANCO, CARMELI	20.00		337.60	I	
232322	3/01/13	000122	HEALTH FIRST	BOCHENEC, JOLAN	36.00		607.68	I	
232323	3/01/13	000122	HEALTH FIRST	BOWERS * DIANE	40.00		675.20	T	
232324	3/01/13	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	Ī	
232325	3/01/13	000122	HEALTH FIRST	CARRION. MARIA	48.00		810.24	T	
232326	3/01/13	000122	HEALTH FIRST	CEBALLOS ANA	36.00		607.68	T	
232327	3/01/13	000122	HEALTH FIRST	CHARITAR, RAMKA	25.00		422.00	Ī	
232328	3/01/13	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	T	
232329	3/01/13	000122	HEALTH FIRST	DELACRUZ ANA	70.00		1.181.60	T	
232330	3/01/13	000122	HEALTH FIRST	ESPATILAT. AMPA	38.00		641.44	T	
232331	3/01/13	000122	HEALTH FIRST	ESTEVES. JOSE	42.00		708.96	T	
232332	3/01/13	000122	HEALTH FIRST	FERRERA, FRANCT	56.00		945.28	T	
232333	3/01/13	000122	HEALTH FIRST	FONTANES PEDRO	49.00		827.12	T	
232334	3/01/13	000122	HEALTH FIRST	FRANCISCO. RICH	56.00		945.28	T	
232335	3/01/13	000122	HEALTH FIRST	FRIAS. BARBARA	12.00		202.56	T	
232336	3/01/13	000122	HEALTH FIRST	HENRY, BRENDA	12.00		202.56	T	
232337	3/01/13	000122	HEALTH FIRST	ISKANDER, JACOU	56.00		945.28	Ī	
232338	3/01/13	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	Ī	
232339	3/01/13	000122	HEALTH FIRST	LARA, TOMASA	40.00		675.20	Ī	
232340	3/01/13	000122	HEALTH FIRST	LAZALA, GLADYS	84.00		1,417.92	Ī	
232341	3/01/13	000122	HEALTH FIRST	LOPEZ-RAMIREZ.	77.00		1,299.76	Ī	
232342	3/01/13	000122	HEALTH FIRST	MACARENA, SAHAR	84.00		1,417.92	Ī	
232343	3/01/13	000122	HEALTH FIRST	ORTIZ. TULA	30.00		506.40	Ī	
232344	3/01/13	000122	HEALTH FIRST	PALAZZOLO, FLOR	84.00		1,417.92	I	
232345	3/01/13	000122	HEALTH FIRST	REINOSO, EMELIA	70.00		1,181.60	I	
232346	3/01/13	000122	HEALTH FIRST	RIVERA, CHRISTO	21.00		354.48	I	
232347	3/01/13	000122	HEALTH FIRST	RIVERA, EDDIE	12.00		202.56	I	
232348	3/01/13	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
232349	3/01/13	000122	HEALTH FIRST	SALAZAR, LUZ MA	48.00		810.24	I	
232350	3/01/13	000122	HEALTH FIRST	SALHUANA, YOLAN	40.00		675.20	I	
232351	3/01/13	000122	HEALTH FIRST	SPIVEY, PATRICI	25.00		422.00	I	
232352	2/15/13	000122	HEALTH FIRST	ST ROMAINE, CLA	10.00		168.80	I	
232353	3/01/13	000122	HEALTH FIRST	ST ROMAINE, CLA	68.00		1,147.84	I	
232354	3/01/13	000122	HEALTH FIRST	SURIEL, GERTRUD	56.00		945.28	I	
232355	1/25/13	000122	HEALTH FIRST	VASQUEZ, OLGA	25.00		422.00	I	
232356	3/01/13	000122	HEALTH FIRST	VEGÃ, GLORIA	40.00		675.20	I	
				REG NY NY S A L E S R E G I S T E R REFERENCE BHAIRO, KOWSILI BLANCO, CARMELI 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 ISKANDER, JACOU KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR ORTIZ, TULA PALAZZOLO, FLOR REINOSO, EMELIA RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, CHRISTO RIVERA, EDIE RODRIGUEZ, MARG SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VASQUEZ, OLGA VEGA, GLORIA	1,605.00	0.00	27,092.40		
				CATEGORY	1,605.00	0.00	27,092.40		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S A				PAGE 1	- 30	0
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			NHP NEIGHBORE	HOOD F	IEALTH
			S A	LES REGISTER	{		BILL WEEK END	DING	3/08/13
INVOICE#	DATE	CIICT NO	CUSTOMER NAME						SURPLUS
INVOICE#	DAIL	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAX AMI	AMOUNT	IIP	SURPLUS
232357	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII NEIGHBORHOOD HEALTH PROVII NEIGHBORHOOD HEALTH PROVII NEIGHBORHOOD HEALTH PROVII	DERS AHMED, UMARA	56.00		945.28	I	
232358	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS AKHTER, SELINA	45.00		759.60	I	
232359	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS CHUKWUJIORAH, T	50.00		844.00	I	
232360	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS DEKMAK, GRISEL	84.00		1,417.92	I	
232361	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS DIAZ 1, CARMEN	28.00		472.64	I	
232362	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS FERNANDEZ, MARI	12.00		202.56	I	
232363	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS FLORES, MARITZA	60.00		1,012.80	I	
232364	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS HAMPTON, PRISCI	45.00		759.60	I	
232365	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS JONES, CYNTHIA	15.00		253.20	I	
232366	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS KHAN, FARUQUE	81.00		1,367.28	I	
232367	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS KROLL, KATHERIN	35.00		590.80	I	
232368	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS MORALES HERNAD	42.00		708.96	I	
232369	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS MOSKOWITZ, RONA	36.00		607.68	I	
232370	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS OCASIO, VIRGINI	30.00		506.40	I	
232371	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS RODRIGUEZ -2, M	30.00		506.40	I	
232372	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS RODRIGUEZ, JESS	25.00		422.00	I	
232373	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS SHEPPARD, ERMA	70.00		1,181.60	I	
232374	3/01/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS WELLS, WYNORIA	16.00		270.08	I	
232375	2/22/13	000120	NEIGHBORHOOD HEALTH PROVII	DERS DEKMAK, GRISEL DERS DIAZ 1, CARMEN DERS FERNANDEZ, MARI DERS FLORES, MARITZA DERS HAMPTON, PRISCI DERS JONES, CYNTHIA DERS KHAN, FARUQUE DERS KROLL, KATHERIN DERS MORALES HERNAD DERS MOSKOWITZ, RONA DERS OCASIO, VIRGINI DERS RODRIGUEZ -2, M DERS RODRIGUEZ, JESS DERS SHEPPARD, ERMA DERS WELLS, WYNORIA DERS WILSON, SHERYL	44.00		742.72	I	
				CUSTOMER	804.00	0.00	13,571.52		
				 CATEGORY	804.00		13,571.52		

RUN DATE SALES JRN	, , -	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - FID NY CATHOLIC	301 /FIDELIS
Brilling Grav	1 1 0525	100 001	SOMMISTED CITIVIDE	SALES REGISTER			BILL WEEK ENDIN	,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
232376	3/01/13	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63 I	
232377	3/01/13	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45 I	
232378	3/01/13	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	15.00		253.05 I	
232379	3/01/13	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81 I	
232380	3/01/13	000126	NYS CATHOLIC/FIDELIS	REYES, DUNNY	5.00		84.35 I	
232381	3/01/13	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	30.00		506.10 I	
232382	3/01/13	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	41.00		691.67 I	
232383	3/01/13	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81 I	
				CUSTOMER	301.00	0.00	5,077.87	
				CATEGORY	301.00	0.00	 5,077.87	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3 UHC UNITED HEALTH BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232384 232385 232386 232387	3/01/13 3/01/13 3/01/13 3/01/13	000128 000128 000128 000128	UNITED HEALTH CARE UNITED HEALTH CARE UNITED HEALTH CARE UNITED HEALTH CARE	CALDERON, MIGDA KHAN, FAZAL MILLAN, ARMIDA SAFOS, PATRA	70.00 84.00 53.00 55.00		1,201.20 I 1,441.44 I 909.48 I 943.80 I	
				CUSTOMER	262.00	0.00	4,495.92	
				CATEGORY	262.00	0.00	4,495.92	

			YSIDE CITYWIDE				11102	- 30	13
SALES JRNL	# 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM H		2 / 0 0 / 1 2
				SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232388	3/01/13	000114	EMBLEM HEALTH	BERNARD, SOPHIE	30.00		506.40	I	
232389	3/01/13	000114	EMBLEM HEALTH	CAMPBELL, CAROL	40.00		675.20	I	
232390	3/01/13	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,417.92	I	
232391	3/01/13	000114	EMBLEM HEALTH	DE JESUS, TIBUR	76.00		1,083.00	I	
232392	3/01/13	000114	EMBLEM HEALTH	GAFFNEY, FREDER	16.00		270.08	I	
232393	3/01/13	000114	EMBLEM HEALTH	IANNAZZO, ANGEL	63.00		1,063.44	I	
232394	3/01/13	000114	EMBLEM HEALTH	JACKSON, FRANCE	42.00		708.96	I	
232395	3/01/13	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,417.92	I	
232396	3/01/13	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		202.56	I	
232397	3/01/13	000114	EMBLEM HEALTH	WEATHERS, VERDE	71.00		1,198.48	I	
232398	3/01/13	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		945.28	I	
232399	3/01/13	000114	EMBLEM HEALTH	YIANNITSIS, LEO	25.00		422.00	I	
				CUSTOMER	599.00	0.00	9,911.24		
				CATEGORY	 599.00	0.00	9,911.24		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REG NY NY LES REGIST	E R		PAGE 1 HIP HEALTH IN BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
232400 232401 232402 232403 232404	3/01/13 3/01/13 3/01/13 3/01/13 3/01/13	000136 000136 000136 000136 000136	HEALTH INSURANCE PLAN OF I HEALTH INSURANCE PLAN OF I HEALTH INSURANCE PLAN OF I HEALTH INSURANCE PLAN OF I	NY LOYOLA, MARIÂ NY ORR, LOUISE NY SHAH, HANSIKABE	40.00 35.00 5.00		337.60 675.20 590.80 84.40 270.08	I I I
				CUSTOMER	116.00	0.00	1,958.08	
				CATEGORY	116.00	0.00	1,958.08	

			YSIDE CITYWIDE					- 30	
SALES JRN	IL # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLU:		
				SALES REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
INVOICE#	DAIL	COSI NO	COSTOMER NAME	REFERENCE	поока	IAA AMI	AMOUNT	IIP	SURPLUS
232405	3/01/13	000130	METROPLUS HEALTH	ANDERSON, BETH	27.00		463.05	I	
232406	3/01/13	000130	METROPLUS HEALTH	ARIAS, NORA	63.00		1,080.45	I	
232407	3/01/13	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
232408	3/01/13	000130	METROPLUS HEALTH	DOBBINS, SANDRA			2,881.20	I	
232409	3/01/13	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	12.00		205.80	I	
232410	3/01/13	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
232411	3/01/13	000130	METROPLUS HEALTH	MURDOCK, GERTRU	48.00		823.20	I	
232412	3/01/13	000130	METROPLUS HEALTH	OSORIO, ELVIA	18.00		308.70	I	
232413	2/15/13	000130	METROPLUS HEALTH	PERSAD, USHA			1,406.30	I	
232414	2/15/13	000130	METROPLUS HEALTH	RAMPERSAID, ALI	32.00		548.80	I	
232415	3/01/13	000130	METROPLUS HEALTH	RYALS, CHARLES	23.00		394.45	I	
232416	2/22/13	000130	METROPLUS HEALTH	SANTORO, MATTHE	70.00		1,200.50	I	
232417	2/22/13	000130	METROPLUS HEALTH	VALLE, BLASINA	40.00		686.00	I	
232418	3/01/13	000130	METROPLUS HEALTH	VERAS, EMMA	84.00		1,440.60	I	
				CUSTOMER	772.00	0.00	13,239.80		
				CATEGORY	772.00	0.00	13,239.80		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 30	16
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE		REG NY NY			WEL WELCARE O	F NY	
				S A	LES REGISTER			BILL WEEK END	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REG NY NY LES REGISTER REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232419	3/01/13	000124	WELCARE OF NEW YORK.	INC.	ALONSO, ANA	15.00		258.00	I	
232420	3/01/13	000124	WELCARE OF NEW YORK.	TNC	BATTIO, MARTA	38.00		653.60	T	
232421	3/01/13	000124	WELCARE OF NEW YORK.	TNC	BISRAM, ROOPKAL	20.00		344.00	T	
232422	3/01/13	000124	WELCARE OF NEW YORK	TNC	CEBALLOS FRANC	70 00		1 204 00	T	
232423	3/01/13	000121	WELCARE OF NEW YORK	INC.	CDII7 LIITO	56 00		963 20	T	
232424	3/01/13	000121	WELCARE OF NEW YORK	INC.	CODINOT CARMEN	30.00		516 00	T	
232424	3/01/13	000124	WELCARE OF NEW YORK,	INC.	COMEZ DANNIE	0.00		127 60	 	
232425	3/01/13	000124	WELCARE OF NEW YORK,	INC.	GUMEZ, KANNIE	14 00		240 90	 	
232427	3/01/13	000124	WELCARE OF NEW TORK,	INC.	CIIFDDEDO EIDDO	72 00		1 220 40	_ _	
232427	3/01/13	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, FIRPO	12.00		206 40	 	
232429	3/01/13	000124	WELCARE OF NEW YORK,	INC.	GUERRERU, ISABE	20.00		200.40 E16 00		
		000124	WELCARE OF NEW YORK,	INC.	HAINES, LAMONI	30.00		510.00	<u>+</u>	
232430	3/01/13	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, ISABEL	35.00		1 444 00		
232431	3/01/13	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, MANUEL	84.00		1,444.80	Τ	
232432	3/01/13	000124	WELCARE OF NEW YORK,	INC.	LOPEZ, VITALIA	84.00		1,444.80	Τ	
232433	2/22/13	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	30.00		516.00		
232434	3/01/13	000124	WELCARE OF NEW YORK,	INC.	MEDINA, MARTHA	15.00		258.00	Ţ	
232435	3/01/13	000124	WELCARE OF NEW YORK,	INC.	MOHAMED, DENISE	48.00		825.60	Ţ	
232436	3/01/13	000124	WELCARE OF NEW YORK,	INC.	MOHAMED, DENISE	8.00		137.60	Ţ	
232437	3/01/13	000124	WELCARE OF NEW YORK,	INC.	MORALES, FRANCI	35.00		602.00	Ţ	
232438	3/01/13	000124	WELCARE OF NEW YORK,	INC.	NAVARRO, ANTONI	38.00		653.60	Ţ	
232439	3/01/13	000124	WELCARE OF NEW YORK,	INC.	ORTIZ, DOLORES	50.00		860.00	Ţ	
232440	3/01/13	000124	WELCARE OF NEW YORK,	INC.	ORTIZ, JOSE	8.00		137.60	Ţ	
232441	3/01/13	000124	WELCARE OF NEW YORK,	INC.	PATRICK, IMAGEN	48.00		825.60	I	
232442	3/01/13	000124	WELCARE OF NEW YORK,	INC.	PERALTA RODRIGO	20.00		344.00	I	
232443	3/01/13	000124	WELCARE OF NEW YORK,	INC.	PERALTA, INEZ	20.00		344.00	I	
232444	3/01/13	000124	WELCARE OF NEW YORK,	INC.	PEREZ, JULIO	15.00		258.00	I	
232445	3/01/13	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	54.00		928.80	I	
232446	3/01/13	000124	WELCARE OF NEW YORK,	INC.	RAMOS, SILVIA	15.00		258.00	I	
232447	3/01/13	000124	WELCARE OF NEW YORK,	INC.	REGLA, MARIA F	40.00		688.00	I	
232448	2/22/13	000124	WELCARE OF NEW YORK,	INC.	REYES, TERESA	8.00		137.60	I	
232449	3/01/13	000124	WELCARE OF NEW YORK,	INC.	REYES, TERESA	31.00		533.20	I	
232450	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SANCHEZ FLORES,	5.00		86.00	I	
232451	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SANCHEZ, BETANI	5.00		86.00	I	
232452	2/22/13	000124	WELCARE OF NEW YORK,	INC.	SANTOS MARQUEZ,	12.00		206.40	I	
232453	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SERRANO, CARMEN	21.00		361.20	I	
232454	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SILVEIRA, BERTA	8.00		137.60	I	
232455	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SOTO, RAFAEL B	54.00		928.80	I	
232456	3/01/13	000124	WELCARE OF NEW YORK,	INC.	SOTO, RAFAEL B	9.00		154.80	I	
232457	3/01/13	000124	WELCARE OF NEW YORK,	INC.	VAZQUEZ, ROSA	40.00		688.00	I	
232458	3/01/13	000124	WELCARE OF NEW YORK,	INC.	VENTURA, CLARA	15.00		258.00	I	
					CUSTOMER	1,220.00	0.00	20,984.00		
					REFERENCE ALONSO, ANA BATILO, MARTA BISRAM, ROOPKAL CEBALLOS, FRANC CRUZ, LUIS GODINOT, CARMEN GOMEZ, RANNIE GUERRERO *, MIR GUERRERO, FIRPO GUERRERO, FIRPO GUERRERO, ISABE HAYNES, LAMONT LOPEZ, MANUEL LOPEZ, WITALIA MARTINEZ, MARIA MEDINA, MARTHA MOHAMED, DENISE MOHAMED, DENISE MORALES, FRANCI NAVARRO, ANTONI ORTIZ, DOLORES ORTIZ, JOSE PATRICK, IMAGEN PERALTA RODRIGO PERALTA, INEZ PEREZ, JULIO RAMIREZ, ALIDA RAMOS, SILVIA REGLA, MARIA F REYES, TERESA SANCHEZ, BETANI SANTOS MARQUEZ, SERRANO, CARMEN SILVEIRA, BERTA SOTO, RAFAEL B VAZQUEZ, ROSA VENTURA, CLARA —— CUSTOMER	1,220.00	0.00	20,984.00		

			YSIDE CITYWIDE	DEG NV NV			-	- 3C)7
SALES JRN	IL # U323	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			AMG AMERIGROU BILL WEEK ENI		3/08/13
				SADES KEGISTEK			DIDD WEEK EMI	JING	3/00/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232459	3/01/13	000132	AMERIGROUP	FRASIEUR, GARY	15.00		253.20	I	
232460	3/01/13	000132	AMERIGROUP	FRASIEUR, GARY	5.00		84.40	I	
232461	3/01/13	000132	AMERIGROUP	GUERRA, LORRAIN	60.00		1,012.80	I	
232462	3/01/13	000132	AMERIGROUP	GUERRA, LORRAIN	8.00		135.04	I	
232463	3/01/13	000132	AMERIGROUP	HARDING, EDNA	20.00		337.60	I	
232464	3/01/13	000132	AMERIGROUP	PRUITT, JOHNNY	4.00		67.52	I	
				CUSTOMER	112.00	0.00	1,890.56		
				CATEGORY	112.00	0.00	1,890.56		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AM2 AMERIGROU	- 30 JP 2)8
				SALES REGISTER			BILL WEEK ENI	ING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232465	3/01/13	000204	AMERIGROUP 2	DENNISON, KELVI	19.00		285.00	I	
232466	3/01/13	000204	AMERIGROUP 2	ESPINAL, MARIA	36.00		540.00	I	
232467	3/01/13	000204	AMERIGROUP 2	FERNANDEZ, NORK	33.00		495.00	I	
232468	3/01/13	000204	AMERIGROUP 2	MARTINEZ, TOMAS	20.00		300.00	I	
232469	2/22/13	000204	AMERIGROUP 2	RIVERA, CARMEN	50.00		750.00	I	
				CUSTOMER	158.00	0.00	2,370.00		
				CATEGORY	158.00	0.00	2,370.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3 HCP HEALTHCARE PA BILL WEEK ENDING	09 RTNERS 3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232470 232471 232472	3/01/13 3/01/13 3/01/13	000148 000148 000148	HEALTH CARE PARTNERS HEALTH CARE PARTNERS HEALTH CARE PARTNERS	GOMES, AGUSTINA TOWLES, ADA ZAMBRANO, ZOILA	63.00 16.00 15.00		1,063.44 I 270.08 I 253.20 I	
				CUSTOMER	94.00	0.00	1,586.72	
				CATEGORY	94.00	0.00	1,586.72	

	IN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE ALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER							PAGE 1 - 310 ICS INDEPENDENCE CARE SYSTEMS BILL WEEK ENDING 3/08/13			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS			
232474 232475 232476	3/01/13 2/15/13 2/15/13 3/01/13 3/01/13	000172 000172 000172 000172 000172	INDEPENDENCE CARE SYSTEMS	AGOSTINI, MONSE BARRAZA, MERCED BERRY, ANGELINA JONES, VALERIE MUSHAYEV, BORIS	30.00 12.00 32.00 20.00 20.00		480.00 190.80 510.80 320.00 320.00	I I I I			
				CUSTOMER	114.00	0.00	1,821.60				
				CATEGORY	114.00	0.00	1,821.60				

			YSIDE CITYWIDE						- 31	
SALES JRNL	# 0323	LOC 001	SUNNYSIDE CITYWIDE	REG 1				VCS VNSNY CH		
				SALES	S REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232478 3	3/01/13	000170	VNSNY CHOICE SELECT	HEALTH	KARASSAVIDES, A	21.00		360.36	I	
232479 2	2/15/13	000170	VNSNY CHOICE SELECT	HEALTH	REYES, LORGIO	58.00		995.28	I	
					CUSTOMER	79.00	0.00	1,355.64		
					CATEGORY	79.00	0.00	1,355.64		

RUN DATE (03/06/13 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 31	L2
SALES JRNI	L # 0323	LOC 001	SUNNYSIDE CITYWIDE REG				PAR PRIVATE		
			SALE	S REGISTER			BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232480 232481 232482 232483 232484	3/01/13 3/01/13 3/01/13 3/01/13 3/01/13	000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES	ANGEL, LUCY ESCOBAR, MARIA HERNANDEZ, REGI KOZHUSHICO, ROZ VARELAS, ANNA	8.00 8.00 8.00 4.00 4.00		116.00 116.00 116.00 58.00 58.00	I I I I	
				CUSTOMER	32.00	0.00	464.00		
232485	3/01/13	000040	DUISIN, CHRISTINE	DUISIN, XENIA	4.00		68.00	I	
232486 232487	3/01/13 3/01/13	000049 000049	DOMINICAN SISTERS FAM HLTH DOMINICAN SISTERS FAM HLTH	DIOP, SERIGNE DIOP, SERIGNE	33.25 6.00		482.13 87.00	I	
				CUSTOMER	39.25	0.00	569.13		
232488	3/01/13	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	83.25	0.00	1,225.13		

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 - CAS CHILDREN'S ABILL WEEK ENDING	ID SOCIETY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
232489 232490 232491 232492 232493 232494	3/01/13 3/01/13 3/01/13 3/01/13 3/01/13 3/01/13	000088 000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA DUNNE, MYEISHA SALAS, HELENA SALAS, HELENA VARGAS, BRANDON VARGAS, JOHN	20.00 5.00 24.00 4.00 5.00 4.50		310.00 I 77.50 I 372.00 I 62.00 I 77.50 I 69.75 I	
				CUSTOMER	62.50	0.00	968.75	
				CATEGORY	62.50	0.00	968.75	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 PAR PRIVATE BILL WEEK END	- 31	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		TYP	SURPLUS
232495 232496	3/01/13 3/01/13	000098 000098	MILDRED PANSE MILDRED PANSE	PANSE, MILDRED PANSE, MILDRED	16.00 4.00		248.00 62.00	I I	
				CUSTOMER	20.00	0.00	310.00		
				CATEGORY	20.00	0.00	310.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	-	NY E G I S T E	R		PAGE 1 ELD ELDERSER' BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFEI	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232497 232498 232499	2/15/13 3/01/13 3/01/13	000101 000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN,	ELMIRA ELMIRA ELMIRA	5.00 20.00 5.00		71.25 285.00 71.25	I I I	
					CUSTOMER	30.00	0.00	427.50		
					CATEGORY	30.00	0.00	427.50		

RUN DATE	03/06/13 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 31	L6
SALES JRN	L # 0323	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			CCM COMPREHE	NSIVE	CARE MGMT
				SALE	S REGISTER	2		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232500	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	APONTE, ANA	12.00		169.20	I	
232501	3/01/13	000150	COMPREHENSIVE CARE M		APONTE, ANA			42.30	T	
232502	3/01/13	000150	COMPREHENSIVE CARE M		BONES, ANA			225.60	T	
232503	3/01/13	000150	COMPREHENSIVE CARE M		BONES, ANA			56.40	T	
232504	3/01/13	000150	COMPREHENSIVE CARE M		GARCIA, MARIA	32.00		451.20	Ī	
232505	3/01/13	000150	COMPREHENSIVE CARE M		GARCIA, MARIA			112.80	Ī	
232506	3/01/13	000150	COMPREHENSIVE CARE M		MELAMED, ESTER			112.80	Ī	
232507	3/01/13	000150	COMPREHENSIVE CARE M		POOLE, JENNIFER			123.38	Ī	
232508	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	PULLIAM, WILLIE	20.75		292.58	I	
232509	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	PULLIAM, WILLIE	6.00		84.60	I	
232510	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	ROSARIO, CELEST	24.75		348.98	I	
232511	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	ROSARIO, CELEST	5.00		70.50	I	
232512	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	RUDA, EDWIN	17.00		239.70	I	
232513	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	RUSSELL, BERNIC			239.70	I	
232514	3/01/13	000150	COMPREHENSIVE CARE M	MANAGEMENT	RUSSELL, BERNIC	6.00		84.60	I	
					CUSTOMER	188.25	0.00	2,654.34		
					CATEGORY	188.25	0.00	2,654.34		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 PAR PRIVATE	31	17
SALES OWN	H 0323	100 001	SOMMISIDE CITIWIDE	SALES REGISTE	2		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232515 232516	3/01/13 3/01/13	000155 000155	ROSEMARY JIBAJA ROSEMARY JIBAJA	JIBAJA, ROSEMAR JIBAJA, ROSEMAR	143.25 24.00		2,292.38 372.00	I I	
				CUSTOMER	167.25	0.00	2,664.38		
232517 232518	3/01/13 3/01/13	000179 000179	DOROTHY TABICKMAN DOROTHY TABICKMAN	TABICKMAN, DORT TABICKMAN, DORT	12.00 4.00		186.00 62.00	I I	
				CUSTOMER	16.00	0.00	248.00		
				CATEGORY	183.25	0.00	2,912.38		

RUN DATE 03/06/2 SALES JRNL # 03			REG S A L E		}		PAGE 1 HHH HHH HOME BILL WEEK ENI		
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232519 3/01/2 232520 3/01/2		HHH LONG TERM HOME HHH LONG TERM HOME		TOVAR, ELENA TOVAR, ELENA	21.00 8.00		315.00 120.00	I	
				CUSTOMER	29.00	0.00	435.00		
				 CATEGORY	29.00	0.00	435.00		

	03/06/13 - NL # 0323	- SUP SUNN LOC 001	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - PAR PRIVATE BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
232521 232522	3/01/13 3/01/13	000197 000197	KLEA THEOHARIS KLEA THEOHARIS	THEOHARIS, ARIS THEOHARIS, ARIS	6.00		93.00 I 93.00 I	
						0.00	186.00	
232523 232524	3/01/13 3/01/13	000205 000205	BILL NANIS BILL NANIS	NANIS, KOSTAS	72.00 12.00		1,152.00 I 186.00 I	
				CUSTOMER	84.00	0.00	1,338.00	
232525 232526	3/01/13 3/01/13	002215 002215	KEITH SALMON KEITH SALMON	LAWRANCE, LILLA LAWRANCE, LILLA	16.00		260.00 I 62.00 I	
				CUSTOMER		0.00	322.00	
232527 232528	3/01/13 3/01/13	003108 003108	NIGRO, CATHERINE NIGRO, CATHERINE	NIGRO, CATHERIN NIGRO, CATHERIN	16.00		248.00 I 62.00 I	
				CUSTOMER	20.00	0.00	310.00	
232529 232530	3/01/13 3/01/13	004784 004784	CAMILLERI, JOSEPH CAMILLERI, JOSEPH	CAMILLERI, JOSE CAMILLERI, JOSE	20.00 5.00		270.00 I 67.50 I	
						0.00	337.50	
232531 232532	3/01/13 3/01/13	009498 009498	LOUIS LE NOACH LOUIS LE NOACH	LENOACH, LOUIS LENOACH, LOUIS	6.00		102.00 I 46.50 I	
						0.00	148.50	
232533 232534	1/18/13 1/25/13	009605 009605	OLGA OBYMAKO OLGA OBYMAKO	OBYMAKO, OLGA OBYMAKO, OLGA	2.00		31.00 I 31.00 I	
				CUSTOMER	4.00	0.00	62.00	
232535	3/01/13	009752	PETER CAPORASO	CAPORASO, VINCE	12.00		204.00 I	
232536 232537	3/01/13 3/01/13	010269 010269	ANGELINA MARASA ANGELINA MARASA	MARASA, ANGELIN MARASA, ANGELIN	6.00		93.00 I 46.50 I	
				CUSTOMER	9.00	0.00	139.50	
232538	3/01/13	010530	DANA SITILDES	ANSELMI, PETER	20.00		316.00 I	
232539 232540	3/01/13 3/01/13	011016 011016	MICHAEL SIANO MICHAEL SIANO	SIANO, ANDREW	24.00		324.00 I 81.00 I	
				CUSTOMER	30.00	0.00	405.00	_

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY							PAGE 2 - 320 PAR PRIVATE		
			S	ALES REGISTE	R		BILL WEEK EN	DING	3/08/13
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
232541 232542	3/01/13 3/01/13	011060 011060	ROBIN WARREN CHARLES ROBIN WARREN CHARLES	WARREN, CYNTHIA WARREN, CYNTHIA	114.00 19.00		1,824.00 294.50	I	
				CUSTOMER	133.00	0.00	2,118.50		
232543 232544	3/01/13 3/01/13	011394 011394	HELGA JENSEN HELGA JENSEN	JENSEN, HELGA	60.00		960.00 155.00	I	
				CUSTOMER	70.00	0.00	1,115.00		
232545	3/01/13	011630	JAMES BENZ	CAGAN, RUMANDO	7.75		120.13	I	
232546 232547	3/01/13 3/01/13	011642 011642	ROSA FLORES ROSA FLORES	FLORES, ROSA	24.00		372.00 93.00	I	
				CUSTOMER	30.00	0.00	465.00		
232548 232549	3/01/13 3/01/13	012326 012326	LORRAINE BIANCO-HOPKINS LORRAINE BIANCO-HOPKINS	BIANCO HOPKINS, BIANCO HOPKINS,	4.00		248.00 62.00	I I	
				CUSTOMER	20.00	0.00	310.00		
232550 232551	3/01/13 3/01/13	012565 012565	AMY L. WELTMAN AMY L. WELTMAN	LUSKIND, FRANCE LUSKIND, FRANCE			1,152.00 186.00	I I	
				CUSTOMER	7.00		1,338.00		
232552	3/01/13	012615	RUTH KANN	KANN, RUTH	10.00		155.00	I	
				CATEGORY	522.75	0.00	9,390.13		
					29,194.50		464,160.09		
				COMPANY	29,194.50	0.00	464,160.09		

RUN DATE 03/06/13 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 321
SALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

ALES JRNL # 0323 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
SALES REGISTER BILL WEEK ENDING 3/08/13

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

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