RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY

SALES REGISTER

PAGE 1 - 1 SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 4/13/12

			E		•		DILL WELK LI	DIIIO	1/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190207	4/06/12	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		57.00	I	
190208	1/27/12	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		52.40	I	
190209	2/03/12	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		52.40	I	
190210	4/06/12	000082	SENIOR HEALTH PARTNERS	ALVAREZ, ANGELA	4.00		57.00	I	
190211	4/06/12	000082	SENIOR HEALTH PARTNERS	BROOKS, NATALIE	17.75		252.94	I	
190212	4/06/12	000082	SENIOR HEALTH PARTNERS	CARRILLO, MARIA	35.00		498.75	I	
190213	4/06/12	000082	SENIOR HEALTH PARTNERS	COLON, RAYMUNDA	35.00		498.75	I	
190214	4/06/12	000082	SENIOR HEALTH PARTNERS	DABU, JUANITA	16.00		228.00	I	
190215	4/06/12	000082	SENIOR HEALTH PARTNERS	DABU, JUANITA	4.00		57.00	I	
190216	4/06/12	000082	SENIOR HEALTH PARTNERS	FENTON, JESSIE	8.00		114.00	I	
190217	4/06/12	000082	SENIOR HEALTH PARTNERS	FENTON, JESSIE	4.00		57.00	I	
190218	4/06/12	000082	SENIOR HEALTH PARTNERS	GHILIOTTY, FLOR	5.00		71.25	I	
190219	4/06/12	000082	SENIOR HEALTH PARTNERS	GHILIOTTY, FLOR	27.00		384.75	I	
190220	4/06/12	000082	SENIOR HEALTH PARTNERS	GRAFSTEIN, LILL	1.00		200.00	I	
190221	4/06/12	000082	SENIOR HEALTH PARTNERS	GRAFSTEIN, LILL	6.00		1,200.00	I	
190222	1/06/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, KHAMAT	4.00		52.40	I	
190223	4/06/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, KHAMAT	4.00		57.00	I	
190224	4/06/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, KHAMAT	29.00		413.25	I	
190225	1/27/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	7.00		91.70	I	
190226	4/06/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	20.00		285.00	I	
190227	4/06/12	000082	SENIOR HEALTH PARTNERS	HARIDIN, RAMDIA	115.00		1,638.75	I	
190228	4/06/12	000082	SENIOR HEALTH PARTNERS	HERNANDEZ, FRAN	35.00		498.75	I	
190229	4/06/12	000082	SENIOR HEALTH PARTNERS	LEPORE, CLAIRE	5.00		71.26	I	
190230	4/06/12	000082	SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	12.00		171.00	I	
190231	4/06/12	000082	SENIOR HEALTH PARTNERS	MOROCHO, MANUEL	64.00		912.00	I	
190232	4/06/12	000082	SENIOR HEALTH PARTNERS	RODRIGUEZ, MARI	20.00		285.00	I	
190233	4/06/12	000082	SENIOR HEALTH PARTNERS	SIERRA, MIRIAM	20.00		285.00	I	
190234	4/06/12	000082	SENIOR HEALTH PARTNERS	SIMON, LUPE	8.00		114.00	I	
190235	4/06/12	000082	SENIOR HEALTH PARTNERS	TORRESCAMPOS, J	40.00		570.00	I	
190236	4/06/12	000082	SENIOR HEALTH PARTNERS	VASQUEZ, CORNEL	8.00		114.00	I	
190237	4/06/12	000082	SENIOR HEALTH PARTNERS	VIDOT-LINARES,	40.00		570.00	I	
				REFERENCE ALVAREZ, ANGELA ALVAREZ, ANGELA ALVAREZ, ANGELA ALVAREZ, ANGELA BROOKS, NATALIE CARRILLO, MARIA COLON, RAYMUNDA DABU, JUANITA DABU, JUANITA FENTON, JESSIE FENTON, JESSIE GHILIOTTY, FLOR GHILIOTTY, FLOR GRAFSTEIN, LILL GRAFSTEIN, LILL HARIDIN, KHAMAT HARIDIN, KHAMAT HARIDIN, KHAMAT HARIDIN, RAMDIA HARIDIN, RAMDIA HARIDIN, RAMDIA HARIDIN, RAMDIA HOROCHO, MANUEL MOROCHO, MANUEL RODRIGUEZ, MARI SIERRA, MIRIAM SIMON, LUPE TORRESCAMPOS, J VASQUEZ, CORNEL VIDOT-LINARES, ———————————————————————————————————	605.75	0.00	9,910.35		
				CATEGORY	605.75	0.00	9,910.35		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	2
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	ALES REGISTER			BILL WEEK ENDI	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190238	4/06/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	8.00		116.64	I
190239	4/06/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	48.00		699.84	I
190240	3/30/12	000008	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I
190241	4/06/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I
				CUSTOMER	80.00	0.00	1,166.40	
				CATEGORY	80.00	0.00	1,166.40	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	3
SALES JRN	L # 0276	LOC 001		REG NY NY			LTC NURSING HOME	•
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190242	4/06/12	800000	VISITING NURSE SERVICE	ACUNA, JOSE	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	-
SILLE GIAV	1 11 0270	100 001		LES REGISTER			BILL WEEK ENDI	· · -
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP SURPLUS
190243	4/06/12	000008	VISITING NURSE SERVICE	ADAMES, OLGA	23.00		335.34	I
190244	4/06/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	5.00		72.90	I
190245	4/06/12	800000	VISITING NURSE SERVICE	ADAMES, RICARDO	30.00		437.40	I
190246	4/06/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	10.00		145.80	I
190247	4/06/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	60.00		874.80	I
190248	4/06/12	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	4.00		58.32	I
190249	4/06/12	000008	VISITING NURSE SERVICE	ADUN, JEANETTE	10.50		153.09	I
190250	4/06/12	800000	VISITING NURSE SERVICE	AFZAL, AMIR	4.00		58.32	I
				CUSTOMER	146.50	0.00	2,135.97	
				CATEGORY	 146.50	0.00	2,135.97	

RUN DATE 04/11 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 LTC NURSING F BILL WEEK ENI		5 O WALLS (LT 4/13/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190251 4/06 190252 4/06		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	5.00 40.00		72.90 583.20	I I	
			CUSTOMER	45.00	0.00	656.10		
			CATEGORY	45.00	0.00	656.10		

			YSIDE CITYWIDE						6
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LI		4/13/12
				SALES REGISIER			DILL MEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
100053	4 (06 (10	000000		3 07777 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	6.00		0.0.40	_	
190253	4/06/12	000008	VISITING NURSE SERVICE	,	6.00		87.48	Τ_	
190254	4/06/12	800000	VISITING NURSE SERVICE	AGUILAR-PROCE,	31.00		451.98	I	
190255	4/06/12	000008	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60	I	
				CUSTOMER	57.00	0.00	831.06		
				CATEGORY	57.00	0.00	831.06		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	7
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING E	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENI	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190256	4/06/12	000008	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
190257	4/06/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
				CUSTOMER	10.00	0.00	145.80		
				CATEGORY	10.00	0.00	145.80		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	8	
SALES JRN	rL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
190258	4/06/12	800000	VISITING NURSE SERVICE	ALESSIU, AGRIPI	2.50		36.45 I		
				CATEGORY	2.50	0.00	36.45		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	9
SALES JR	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	ALES REGISTER			BILL WEEK	ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUN	TYP	SURPLUS
190259	4/06/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	24.00		349.9	92 I	
				CATEGORY	24.00	0.00	349.9	 92	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	10
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDING	3 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190260	3/23/12	800000	VISITING NURSE SERVICE	ALMANZAR, REMIG	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			PAGE 1 - HOA HOSPICE AI	DULT
			5	SALES REGISTER			BILL WEEK ENDI	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
190261 190262	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ALVAREZ, NAZARE ALVAREZ, NAZARE	8.00 45.25		116.64 659.75	I I
				CUSTOMER	53.25	0.00	776.39	
				CATEGORY	53.25	0.00	776.39	

RUN DATE (04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	12
SALES JRNI	ь # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	ALES REGISTER			BILL WEEK ENDING	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	P SURPLUS
190263	4/06/12	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	8.00		116.64 I	
190264	4/06/12	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	48.00		699.84 I	
190265	4/06/12	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	8.00		116.64 I	
190266	4/06/12	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	48.00		699.84 I	
				CUSTOMER	112.00	0.00	1,632.96	
				CATEGORY	112.00	0.00	1,632.96	

RUN DATE 04/1 SALES JRNL #	.1/12 - SUP SUNN 0276 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	.3
SALES ORNE #	0270 LOC 001		SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	00/12 000008 06/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ANGRISANO, RUTH ANGRISANO, RUTH	3.00 15.00		43.74 I 218.70 I	
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	4
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			2	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190269	4/06/12	000008	VISITING NURSE SERVICE	ANGULO, ELCY	16.00		233.28	I	
190270	4/06/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	8.00		116.64	I	
190271	4/06/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	52.50		765.45	I	
							1 115 05		
				CUSTOMER	76.50	0.00	1,115.37		
				CATEGORY	76.50	0.00	1,115.37		

			YSIDE CITYWIDE				11100	- 1	L5
SALES JRN	ĭL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190272	4/06/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	12.00		174.96	I	
190273	4/06/12	800000	VISITING NURSE SERVICE	ARIAS, LEOPOLDI	6.00		87.48	I	
190274	4/06/12	800000	VISITING NURSE SERVICE	ARIAS, LEOPOLDI	36.00		524.88	I	
190275	4/06/12	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	6.00		87.48	I	
190276	4/06/12	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	39.25		572.27	I	
				CUSTOMER	99.25	0.00	1,447.07		
				CATEGORY	99.25	0.00	1,447.07		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 16 ADU ADULT	
Brilles Grav	1 1 0270	100 001		SALES REGISTER				4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190277 190278 190279	4/06/12 4/06/12 4/06/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ASADOURIAN, COR	8.00 15.00 12.00		116.64 I 218.70 I 174.96 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

	04/11/12 · L # 0276		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	17 W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190280	3/30/12	800000	VISITING NURSE SERVICE	ASHLEY, CLYDE	1.00		174.96 I	
190281 190282	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ASHLEY, CLYDE ASHLEY, CLYDE	1.00 33.29		174.96 I 645.75 I	
				CUSTOMER	35.29	0.00	995.67	
				CATEGORY	35.29	0.00	995.67	

RUN DA	ATE 04/11/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	18
SALES	JRNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190283	3 4/06/12	800000	VISITING NURSE SERVICE	AVILA, ENIDIA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
190284	4/06/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	18.00		262.44 I	
				CAMECODY	10.00			
				CATEGORY	18.00	0.00	262.44	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	20
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	
			:	SALES REGISTER			BILL WEEK ENDIN	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190285	4/06/12	000008	VISITING NURSE SERVICE	BADILLO, JOVITA	8.00		116.64 I	
190286	4/06/12	800000	VISITING NURSE SERVICE	BAEZ, JUAN	35.00		510.30 I	
				CUSTOMER	43.00	0.00	626.94	
				CATEGORY	43.00	0.00	626.94	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- :	21
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW	O WALLS (LT
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190287	4/06/12	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	5.00		72.90	I	
190288	4/06/12	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	25.00		364.50	I	
190289	4/06/12	000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	8.00		116.64	I	
190290	4/06/12	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	48.00		699.84	I	
190291	4/06/12	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	5.00		72.90	I	
190292	4/06/12	800000	VISITING NURSE SERVICE	BARDEANU, VICTO	42.00		612.36	I	
190293	4/06/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		102.06	I	
190294	4/06/12	800000	VISITING NURSE SERVICE	BATTLE, JEANETT	34.50		503.02	I	
				CUSTOMER	174.50	0.00	2,544.22		
				CATEGORY	174.50	0.00	2,544.22		

RUN DATE	04/11/12 -	- SUP SUNN	IYSIDE CITYWIDE				PAGE 1 - 22	2
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190295	4/06/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

			YSIDE CITYWIDE				PAGE 1 -	23
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			2	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190296	4/06/12	000008	VISITING NURSE SERVICE	BELLOROFONTE, M	20.00		291.60 I	
190297	4/06/12	800000	VISITING NURSE SERVICE	BELLOROFONTE, M	131.00		1,909.98 I	
				CUSTOMER	151.00	0.00	2,201.58	
				CATEGORY	151.00	0.00	2,201.58	

				YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	-	24
				S	SALES REGISTER			BILL WEEK END	ING	4/13/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	ΓΥΡ	SURPLUS
19	0298	4/06/12	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	3.00		43.74	I	
					CATEGORY	3.00	0.00	43.74		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	25
SALES JRN	r∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190299	4/06/12	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	6
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			Š	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190300	4/06/12	000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	29.50		430.11 I	
				CATEGORY	29.50	0.00	430.11	

RUN DATE 04/ SALES JRNL	/11/12 - SUP SUNN # 0276 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 2	7
		S	SALES REGISTER			BILL WEEK END	DING	4/13/12
INVOICE# I	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	/06/12 000008 /06/12 000008	VISITING NURSE SERVICE	BHULLA, JIWAN	40.00		583.20 295.25	I	
190302 4/	/06/12 000008	VISITING NURSE SERVICE	BIANCO HOPKINS,					
			CUSTOMER	60.25	0.00	878.45		
			CATEGORY	60.25	0.00	878.45		

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	28
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190303	4/06/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE F	REG NY NY			PAGE 1 - ADU ADULT	29
DALLO OIGI	L # 0270	100 001		LES REGISTER			BILL WEEK ENDIN	IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190304	4/06/12	800000	VISITING NURSE SERVICE	BLUMENTHAL, EST	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

F	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	30
5	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	190305	4/06/12	000008	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	25.75		375.44 I	
					CATEGORY	 25.75	0.00	375.44	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3	1
	_ 02.0	200 001		SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190306	4/06/12	000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	12.00		174.96 I	
190307 190308	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BONILLA, ESPERA BONILLA, ESPERA	7.00 42.00		102.06 I 612.36 I	
				CUSTOMER	61.00	0.00	889.38	
				COBTOMER	01.00	0.00	007.50	
				CATEGORY	61.00	0.00	889.38	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	ь # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190309	4/06/12	000008	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	04/11/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 33	
SALES JR	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (L'	Γ
			S	SALES REGISTER			BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190310	4/06/12	000008	VISITING NURSE SERVICE	BONSIGNORE, GAE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	34
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	3 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190311	4/06/12	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190312	3/30/12	000008	VISITING NURSE SERVICE	BOYADJIAN, ZARO	18.00		262.44 I	
190313	4/06/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	5.00		72.90 I	
190314	4/06/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	30.00		437.40 I	
				CUSTOMER	53.00	0.00	772.74	
				CATEGORY	53.00	0.00	772.74	

RUN DATE	- , ,	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	-	36
511225 5141	_ 02/0	200 001		ALES REGISTER			BILL WEEK END		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190315	3/30/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	18.00		262.44	I	
190316	4/06/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	9.00		131.22	I	
190317	4/06/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	45.00		656.10	I	
190318	4/06/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	9.00		131.22	I	
190319	4/06/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	8.00		116.64	I	
190320	4/06/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	48.00		699.84	I	
				CUSTOMER	137.00	0.00	1,997.46		
				CATEGORY	137.00	0.00	1,997.46		

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	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190321 190322	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	8.00 50.00		116.64 I 729.00 I	
				CUSTOMER	58.00	0.00	845.64	
				CATEGORY	58.00	0.00	845.64	

RUN DATE SALES JRN	- ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		38
Brilles Grav	1 0270	100 001	DOMNIBIDE CITIVIDE	SALES REGIST	E R		BILL WEEK EN		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190323	4/06/12	000008	VISITING NURSE SERV	CCE CABA, PURA	8.00		116.64	I	
190324	4/06/12	800000	VISITING NURSE SERV	CE CALABRO, JOSEPH	10.00		145.80	I	
190325	4/06/12	800000	VISITING NURSE SERV	CE CALABRO, JOSEPH	f 59.50		867.51	I	
190326	4/06/12	000008	VISITING NURSE SERV	CE CALDERON, FRANC	8.00		116.64	I	
190327	4/06/12	000008	VISITING NURSE SERV	CE CALDERON, FRANC	39.25		572.27	I	
190328	4/06/12	000008	VISITING NURSE SERV	CE CALDERON, VIRGI	6.00		87.48	I	
190329	4/06/12	800000	VISITING NURSE SERV	CE CALDERON, VIRGI	36.00		524.88	I	
				CUSTOMER	166.75	0.00	2,431.22		
				CATEGORY	166.75	0.00	2,431.22		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE A	- 3: DULT	9
			S	SALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
190330	4/06/12	000008	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	9.00		131.22	I	
190331	4/06/12	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	54.00		787.32		
				CUSTOMER	63.00	0.00	918.54		
				CATEGORY	63.00	0.00	918.54		

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	40
SALES URNI	1 # 0276	LOC UUI		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190332 190333	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE	,	8.00 48.00		116.64 699.84	I -
190333	4/06/12	000008	VISITING NURSE SERVICE	CAMBARA, JOSEFA	48.00		099.84	L
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	PAGE 1 – 41 AUR ADULT REHAB ONLY
SALES REGISTER	BILL WEEK ENDING 4/13/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS	TAX AMT AMOUNT TYP SURPLUS
190334 4/06/12 000008 VISITING NURSE SERVICE CANDIDO, ELENA 9.00	131.22 I
CATEGORY 9.00	0.00 131.22

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 4	2
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE		NY			LTC NURSING	HOMEW/	,
				SALES R	EGISTE	R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190335	4/06/12	000008	VISITING NURSE SERVICE	CANO,	ADELINA	6.00		87.48	I	
190336	4/06/12	800000	VISITING NURSE SERVICE	CANO,	ADELINA	36.00		524.88	I	
					- CUSTOMER	42.00	0.00	612.36		
					000101111	12.00	0.00	012.00		
					_					
					CATEGORY	42.00	0.00	612.36		

		NYSIDE CITYWIDE				PAGE 1	_	13
SALES JRNL # 0	276 LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LH		4/13/12
			SALES REGISIER			DILL MEEV FIND	TING	4/13/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
100225 4/06	/10 000000		GIRORIGO VIIVAT	10.00		184.06	_	
190337 4/06 190338 4/06		VISITING NURSE SERVICE VISITING NURSE SERVICE	·	12.00 72.00		174.96 1,049.76		
190330 4/00	712 000008	VISITING NURSE SERVICE	CAPORASO, VINCE			1,049.70		
			CUSTOMER	84.00	0.00	1,224.72		
			CATECODY	94 00	0.00	1 224 72		
			CATEGORY	84.00	0.00	1,224.72		

			YSIDE CITYWIDE				-	44
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	4 /12 /12
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190339	4/06/12	000008	VISITING NURSE SERVICE	CARDONA, MARIA	10.00		145.80 I	
190340	4/06/12	800000	VISITING NURSE SERVICE	CARDONA, MARIA	46.25		674.33 I	
				CUSTOMER	56.25	0.00	820.13	
				CATEGORY	56.25	0.00	820.13	

		- SUP SUNN	YSIDE CITYWIDE	DEC MY MY			11102		45
SALES JRN	L # UZ/6	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			VCP CHOICE LE		4/13/12
			5		•		DIDD WEEK EN	71110	1/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190341	4/06/12	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	7.00		102.06	I	
190342	4/06/12	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	48.00		699.84	I	
190343	4/06/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	6.00		87.48	I	
190344	4/06/12	800000	VISITING NURSE SERVICE	CARDOZA, ANAIDA	32.50		473.85	I	
190345	4/06/12	800000	VISITING NURSE SERVICE	CARELA-REYES, M	20.00		291.60	I	
190346	4/06/12	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	12.00		174.96	I	
				CUSTOMER	125.50	0.00	1,829.79		
				CATEGORY	125.50	0.00	1,829.79		

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRI	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	T
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190347	4/06/12	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	18.00		262.44 I	
				 CATEGORY	18.00	0.00		

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 – 47 ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 4	13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
190348	3/30/12	000008	VISITING NURSE SERVICE	CARSON, GERTRUD	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 48
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190349	4/06/12	000008	VISITING NURSE SERVICE	CARTAGENA, FRAN	8.00		116.64	I
190350	4/06/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	48.00		699.84	I
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE 04/1	.1/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	49
SALES JRNL #	0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	BALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190351 4/0	000008	VISITING NURSE SERVICE	CARUSO, GIUSEPP	15.00		218.70 I	
190352 4/0	6/12 000008	VISITING NURSE SERVICE	CARUSO, MARIANN	6.00		87.48 I	
190353 4/0	6/12 000008	VISITING NURSE SERVICE	CASTANO, MARIA	3.00		43.74 I	
190354 4/0	6/12 000008	VISITING NURSE SERVICE	CASTANO, MARIA	6.00		87.48 I	
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY 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
190355	4/06/12	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

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 ENDING	51 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190356	4/06/12	800000	VISITING NURSE SERVICE	CELIO, MARION	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	

PAGE 1 - 52
VCP CHOICE LHCSA BILL WEEK ENDING 4/13/12
BILL WEEK ENDING 4/13/12
T AMOUNT TYP SURPLUS
87.48 I
262.44 I
 0 349.92
313.32
 0 349.92

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 53	
SALES JRN	rL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS	(LT
			S	ALES REGISTER			BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190359	4/06/12	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE (04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 54
SALES JRNI	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
				SALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
100260	4 /06 /10	00000	TITATETNA NUDAE ARRITA	GUADIEG DIEDDE	20.00		437 40 T
190360	4/06/12	800000	VISITING NURSE SERVICE	E CHARLES PIERRE,	30.00		437.40 I
				CATEGORY	30.00	0.00	437.40
				CAILGORI	30.00	0.00	137.10

RUN DATE SALES JRN				REGNY NY BALES REGISTER			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	I/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190361	4/06/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE (04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	56
SALES JRNI	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190362	4/06/12	000008	VISITING NURSE SERVICE	CHINGA, ALBA	32.00		466.56 I	
				CATEGORY	32.00	0.00		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 57	
SALES JRN	rL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190363	4/06/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

-	- , ,		YSIDE CITYWIDE	DDG 1971			11101		58
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		4/13/12
				SALES REGISIER			DILL MEEK EN	JING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190364	4/06/12	800000	VISITING NURSE SERVICE	CHOUDHURY, SHAM	8.00		116.64	I	
190365	4/06/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	23.50		342.63	I	
190366	4/06/12	000008	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
190367	4/06/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	1.00		14.58	I	
190368	4/06/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	20.00		291.60	I	
				CUSTOMER	92.50	0.00	1,348.65		
				CATECODY	02 E0	0.00	1 240 65		
				CATEGORY	92.50	0.00	1,348.65		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 5	59
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190369	4/06/12	000008	VISITING NURSE SERVICE	CIPRIAN, FREDEV	8.00		116.64	I	
190370	4/06/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	48.00		699.84	I	
				CUSTOMER	56.00	0.00	816.48		
				COSTOMER	56.00	0.00	810.48		
				CATEGORY	56.00	0.00	816.48		

			YSIDE CITYWIDE				PAGE 1 -	60
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	a 4/13/10
			5	ALES REGISTER			BILL WEEK ENDIN	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190371	4/06/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	
I								

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 6	51
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				SALES REGISTE	E R		BILL WEEK ENI	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190372	4/06/12	000008	VISITING NURSE SERVIC	E COLLER, FELISA	12.00		174.96	I	
190373	4/06/12	800000	VISITING NURSE SERVIC	E COLLER, JOSE	9.00		131.22	I	
190374	4/06/12	800000	VISITING NURSE SERVIC	E COLON, ANTONIA	6.00		87.48	I	
190375	4/06/12	800000	VISITING NURSE SERVIC	E COLON, ANTONIA	36.00		524.88	I	
190376	4/06/12	800000	VISITING NURSE SERVIC	E COLON, ISABEL	1.00		14.58	I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 6	52
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190377	4/06/12	000008	VISITING NURSE SERVICE	CORDERO, NELLY	24.00		349.92	I	
190378	4/06/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	144.00		2,099.52	I	
				 CUSTOMER	168.00	0.00	2,449.44		
				CODIONER	100.00	0.00	2,110.11		
				CATEGORY	168.00	0.00	2,449.44		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	63
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190379	4/06/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE (04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64	
SALES JRNI	և # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA	
			5	SALES REGISTER			BILL WEEK ENDI	NG 4/13/1	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLU	S
190380	4/06/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60	I	
				CATEGORY	20.00	0.00	 291.60		_

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 65
SALES JRN	rL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190381	4/06/12	800000	VISITING NURSE SERVICE	COSTA, ARSENE	18.00		262.44 I
				CATEGORY	18.00	0.00	262.44

RUN DATE C	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	66
SALES JRNI	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDIN	IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190382	2/03/12	800000	VISITING NURSE SERVICE	COVALIU, SAVETA	5.00		72.90 I	-
190383	4/06/12	800000	VISITING NURSE SERVICE	COVALIU, SIMION	15.75		229.64	- -
				CHGEOMED	20.75	0.00	202 54	
				CUSTOMER	20.75	0.00	302.54	
				CATEGORY	20.75	0.00	302.54	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
T1770 T GT	D	G11GE 110		SALES REGISTER			BILL WEEK ENDING	, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190384	4/06/12	800000	VISITING NURSE SERVICE	COX, PETRA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	_	68
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	-	NY					W/O WALLS LT
			\$	SALES R	EGISTE	R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190385	4/06/12	000008	VISITING NURSE SERVICE	CRUZ,	HECTOR	7.00		102.06	I	
190386	4/06/12	800000	VISITING NURSE SERVICE	CRUZ,	HECTOR	29.00		422.82	I	
					CUSTOMER	36.00	0.00	524.88		
					CATEGORY	36.00	0.00	524.88		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	J
			S	SALES REGISTER			BILL WEEK ENDING	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190387	4/06/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 70
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDI	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190388	4/06/12	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	5.00		72.90	I
190389	4/06/12	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	8.00		116.64	I
190390	4/06/12	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	48.00		699.84	I
				CUSTOMER	61.00	0.00	889.38	
				CATEGORY	61.00	0.00	889.38	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHC	, -
BALLED GIGV	L # 0270	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190391 190392	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 36.50		87.48 532.17	I I
				CUSTOMER	42.50	0.00	619.65	
				CATEGORY	42.50	0.00	619.65	

			SUP SUNN		REG NY NY			ADU ADULT	72
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	.90393	4/06/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	15.00		218.70 I	
					CATEGORY	15.00	0.00	218.70	

ı	RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	73
ı	SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
ı				:	SALES REGISTER			BILL WEEK ENDING	4/13/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190394	4/06/12	800000	VISITING NURSE SERVICE	DEL CARPIO, FEL	8.00		116.64 I	
					CATEGORY	8.00	0.00	116.64	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	74	
SALES JRN	SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY							LTC NURSING HOMEW/O WALLS (LT		
				S A L E S R E G I S T E R			BILL WEEK EN	DING	4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
190395	4/06/12	000008	VISITING NURSE SERVICE	DEL CARPIO, FEL	24.00		349.92	I		
190396	4/06/12	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	4.00		58.32	I		
190397	4/06/12	800000	VISITING NURSE SERVICE	DELACRUZ, SEFER	34.00		495.72	I		
190398	4/06/12	800000	VISITING NURSE SERVICE	DELAROSA, CORAL	5.00		72.90	I		
190399	4/06/12	800000	VISITING NURSE SERVICE	DELAROSA, CORAL	30.75		448.34	I		
				CUSTOMER	97.75	0.00	1,425.20			
				CATEGORY	97.75	0.00	1,425.20			

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	75	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA		
				SALES REGISTER			BILL WEEK END	ING	4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
190400	4/06/12	000008	VISITING NURSE SERVIC	E DELOSSANTOS, MA	30.00		437.40	I		
190401	3/16/12	800000	VISITING NURSE SERVIC	E DELPOZO, MIGUEL	4.00		58.32	I		
190402	3/30/12	800000	VISITING NURSE SERVIC	E DELPOZO, MIGUEL	4.00		58.32	I		
190403	4/06/12	800000	VISITING NURSE SERVIC	E DELPOZO, MIGUEL	4.00		58.32	I		
190404	4/06/12	800000	VISITING NURSE SERVIC	E DELPOZO, MIGUEL	20.00		291.60	I		
				CUSTOMER	62.00	0.00	903.96			
				CATEGORY	62.00	0.00	903.96			

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	76
Brilles order	1 1 0270	100 001		ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190405	4/06/12	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	24.00		349.92 I	
1				CATEGORY	24.00	0.00	349.92	

			NYSIDE CITYWIDE					77
SALES JRN	IL # 0276	LOC 001		REG NY NY SALES REGISTER			LTC NURSING HOME	· ·
				SALES REGISIER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190406	4/06/12	000008	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

-	- , ,		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	78
			S	SALES REGISTER			BILL WEEK ENDING	3 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190407	4/06/12	800000	VISITING NURSE SERVICE	DERISE, JEROME	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			i	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
190408	4/06/12	000008	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I
190409	4/06/12	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	33.25		484.80	I
190410	4/06/12	000008	VISITING NURSE SERVICE	DIAZ, MARIA	35.00		510.30	I
				CUSTOMER	71.25	0.00	1,038.84	
				CATEGORY	71.25	0.00	1,038.84	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	80 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190411	4/06/12	800000	VISITING NURSE SERVICE	DIAZ, MARIA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE 04/	11/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	81
SALES JRNL #	‡ 0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	!SA
		S	ALES REGISTER			BILL WEEK ENDI	NG 4/13/12
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190412 4/	06/12 000008	VISITING NURSE SERVICE	DIAZ, OLGA	6.00		87.48	I
190413 4/	06/12 000008	VISITING NURSE SERVICE	DIAZ, OLGA	30.00		437.40	I
190414 4/	06/12 000008	VISITING NURSE SERVICE	DIAZ, ROSA	6.00		87.48	I
190415 4/	06/12 000008	VISITING NURSE SERVICE	DIAZ, ROSA	30.00		437.40	I
			CUSTOMER	72.00	0.00	1,049.76	
			CATEGORY	72.00	0.00	1,049.76	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	82 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190416	4/06/12	800000	VISITING NURSE SERVICE	DIELE, MARIE	4.00		58.32 I	
				CATEGORY	4.00	0.00		

	RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE REG NY NY PAGE 1 - 83 SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCSA										
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS				
			2	SALES REGISTER			BILL WEEK ENDING	G 4/13/12			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS			
190417	4/06/12	000008	VISITING NURSE SERVICE	DILLUVIO, MATTI	10.00		145.80 I				
190418	4/06/12	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	57.50		838.35 I				
190419	4/06/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	36.00		524.88 I				
190420	4/06/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	16.00		233.28 I				
				CUSTOMER	119.50	0.00	1,742.31				
				CATEGORY	119.50	0.00	1,742.31				

RUN DATE 04,	N DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 84										
SALES JRNL	# 0276 LOC 0	001 SUNNYSIDE CIT	YWIDE REG	NY NY			LTC NURSING	HOMEW/	O WALLS (LT		
			SALE	S REGISTER			BILL WEEK EN	DING	4/13/12		
INVOICE# I	DATE CUST	NO CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
190421 4	/06/12 00000	08 VISITING NURSE	SERVICE	DOMINICK, GINA	7.00		102.06	I			
190422 4	/06/12 00000	08 VISITING NURSE	SERVICE	DOMINICK, GINA	46.75		681.62	I			
190423 4,	/06/12 00000	08 VISITING NURSE	SERVICE	DUTAN, SELINDA	5.00		72.90	I			
190424 4,	/06/12 00000	08 VISITING NURSE	SERVICE	DUTAN, SELINDA	28.00		408.24	I			
				CUSTOMER	86.75	0.00	1,264.82				
				CATEGORY	86.75	0.00	1,264.82				

RUN	DATE 04	4/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	35
SALE	ES JRNL	# 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVO	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1904	125 4	4/06/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	9.00		131.22 I	
					GATTIGODY.			121 00	
					CATEGORY	9.00	0.00	131.22	

RUN DATE 04/11/	/12 - SUP SUN	NYSIDE CITYWIDE				PAGE 1	- 86
SALES JRNL # 02	276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190426 4/06/	/12 000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	4.00		58.32	I
190427 4/06/	/12 000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	39.00		568.62	I
			CUSTOMER	43.00	0.00	626.94	
			CATEGORY	43.00	0.00	626.94	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	87	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA	
			5	SALES REGISTER			BILL WEEK ENDI	NG 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS	
INVOICE	DIIIL	CODI NO	CODIONER WINE	KEI EKEIVEE	1100115	11111 11111	11100111 1	II DOMI LOD	
190428	4/06/12	800000	VISITING NURSE SERVICE	ELGAWLY, NADIA	1.00		14.58	I	
				CATEGORY	1.00	0.00	14.58		

F	RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	8
5	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
					SALES REGISTER			BILL WEEK ENDING	4/13/12
١,	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
-	21110101	21112	0001 110		1121 21121102	1100110		11100111 111	20112 200
1	190429	4/06/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		89
			\$	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190430	4/06/12	000008	VISITING NURSE SERVICE	ESPEJO, FLORENC	18.00		262.44	I	
190431	4/06/12	800000	VISITING NURSE SERVICE	ESPINAL, JOSE	9.00		131.22	I	
190432	4/06/12	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	15.00		218.70	I	
				CUSTOMER	42.00	0.00	612.36		
				CATEGORY	42.00	0.00	612.36		

RUN DATE 0 SALES JRNI		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	90 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FADEN, ROBIN FADEN, ROBIN	8.00 48.00		116.64 I 699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	91
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYE	SURPLUS
IN AOTCE#	DAIE	COSI NO	COSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOON1 111	SURPLUS
190435	4/06/12	800000	VISITING NURSE SERVICE	FAMBIATOU, PARA	10.50		153.10 I	
				CATEGORY	10.50	0.00	153.10	

			YSIDE CITYWIDE	DEC NV NV				92
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190436	4/06/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

			TYSIDE CITYWIDE	DDG NV NV				- 93
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AMH ADULT MEN BILL WEEK END	
			_					
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190437	4/06/12	000008	VISITING NURSE SERVICE	FARO, VIRGINIA	2.50		36.45	I
190438	4/06/12	800000	VISITING NURSE SERVICE	FARO, VIRGINIA	3.00		43.74	I
				CUSTOMER	5.50	0.00	80.19	
				CODIONER	3.30	0.00	00.19	
				CATEGORY	5.50	0.00	80.19	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 94	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTER			BILL WEEK EN	DING 4/	13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SU	RPLUS
190439	4/06/12	000008	VISITING NURSE SERVICE	, - ~ -	8.00		116.64	I	
190440	4/06/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	39.75		579.56	1	
				CUSTOMER	47.75	0.00	696.20		
				CATEGORY	47.75	0.00	696.20		

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	95
SALES JRI	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICEM	DATE	CODI NO	COBTONER WANTE	KEL EKENCE	110010	IAM APII	ANOONI III	DOKT HOD
190441	4/06/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			i	SALES REGISTER			BILL WEEK ENDI	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190442	4/06/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	15.00		218.70	I
				CATEGORY	15.00	0.00	218.70	

			YSIDE CITYWIDE				PAGE 1	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190443	3/30/12	000008	VISITING NURSE SERVICE	FIUMARA, ROSE	6.00		87.48	I
190444	4/06/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	31.75		462.92	I
				CUSTOMER	 37.75	0.00	550.40	
				CATEGORY	37.75	0.00	550.40	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - !	98
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAI	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190445	4/06/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

	:/11/12 - SUP SUNI					PAGE 1 -	99
SALES JRNL	# 0276 LOC 001		REG NY NY			VCP CHOICE LHCS	
		S	SALES REGISTER			BILL WEEK ENDING	G 4/13/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
190446 4	/06/12 000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	32.00		466.56 I	
190447 4	/06/12 000008	VISITING NURSE SERVICE	FONG, ALEFINA	20.00		291.60 I	
			CUSTOMER	52.00	0.00	758.16	
			000-01				
			CATEGORY	F2 00	0.00	750 16	
			CATEGORY	52.00	0.00	758.16	

RU	N DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	00
SA	LES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				:	SALES REGISTER			BILL WEEK ENDING	4/13/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19	0448	4/06/12	800000	VISITING NURSE SERVICE	FONSECA, EUGENI	22.00		320.76 I	
					CATEGORY	22.00	0.00	320.76	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 10)1
	2 11 0270	200 001		SALES REGISTER			BILL WEEK END		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190449 190450	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE	FONTEBOA, GUILL	5.00 30.00		72.90 437.40	I	
190450	4/06/12	000008	VISITING NURSE SERVICE	FONTEBOA, GUILL	30.00		437.40		
				CUSTOMER	35.00	0.00	510.30		
				CATEGORY	35.00	0.00	510.30		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	2
SALES JRN	ъ # 0276	LOC 001		REG NY NY			LTC NURSING H		,
			S	SALES REGISTER			BILL WEEK END	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190451	4/06/12	000008	VISITING NURSE SERVICE	FRED, EULALIA	8.00		116.64	I	
190452	4/06/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	48.00		699.84	I	
				CUSTOMER	56.00	0.00	816.48		
				CATEGORY	56.00	0.00	816.48		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 10 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190453	4/06/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10)4
SALES JRN	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190454	4/06/12	000008	VISITING NURSE SERVICE	FREIJOSO, ROSA	6.00		87.48	I	
190455	4/06/12	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	32.00		466.56	I	
190456	4/06/12	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	5.00		72.90	I	
190457	4/06/12	800000	VISITING NURSE SERVICE	FUNES, GEORGINA	30.00		437.40	I	
				CUSTOMER	73.00	0.00	1,064.34		
1				CATEGORY	73.00	0.00	1,064.34		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 10	05
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY I	NY			VCP CHOICE L	HCSA	
			\$	SALES RI	EGISTE	R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190458	4/06/12	000008	VISITING NURSE SERVICE	GAID,	ASILA	5.00		72.90	I	
190459	4/06/12	800000	VISITING NURSE SERVICE	GAID,	ASILA	30.00		437.40	I	
					CUSTOMER	35.00	0.00	510.30		
					- CATEGORY	35.00	0.00	510.30		

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	06
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190460	3/02/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	7.00		102.06 I	
				CATEGORY	7.00	0.00	102.06	

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10)7
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190461	4/06/12	000008	VISITING NURSE SERVICE	GALARZA, JOSE	5.00		72.90	I	
190462	4/06/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	35.75		521.24	I	
190463	4/06/12	800000	VISITING NURSE SERVICE	GALLARDO, ZOILA	6.00		87.48	I	
190464	4/06/12	800000	VISITING NURSE SERVICE	GALLARDO, ZOILA	36.00		524.88	I	
190465	4/06/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I	
				CUSTOMER	91.75	0.00	1,337.72		
				CATEGORY	91.75	0.00	1,337.72		

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 108	
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	ALES REGISTER			BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190466	4/06/12	800000	VISITING NURSE SERVICE	GALLO, BENJAMIN	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 109 ADU ADULT BILL WEEK ENDING	9 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190467	4/06/12	800000	VISITING NURSE SERVICE	GALSTIAN, DJOUL	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190468 190469	3/30/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	4.00 12.00		58.32 174.96	I	
				CUSTOMER	16.00	0.00	233.28		
				CATEGORY	16.00	0.00	233.28		

			YSIDE CITYWIDE				PAGE 1 -	111
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	4/10/10
				SALES REGISTER			BILL WEEK ENDIN	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190470	4/06/12	000008	VISITING NURSE SERVICE	GARCIA, CONCEPC	4.50		65.61	- -
190471	4/06/12	800000	VISITING NURSE SERVICE	GARCIA, CONCEPC	38.00		554.04	. -
				CUSTOMER	42.50	0.00	619.65	
				COSTONER	42.50	0.00	019.03	
				CATEGORY	42.50	0.00	619.65	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	.2
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190472	4/06/12	000008	VISITING NURSE SERVICE	GARCIA, JOSEFIN	8.00		116.64 I	
190473	4/06/12	800000	VISITING NURSE SERVICE	GARCIA, JOSEFIN	48.00		699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 113
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
190474	4/06/12	000008	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		437.40	I
190475	4/06/12	800000	VISITING NURSE SERVICE	GARY, MIKE	13.75		200.48	I
190476	4/06/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	32.00		466.56	I
				CUSTOMER	75.75	0.00	1,104.44	
				CATEGORY	75.75	0.00	1,104.44	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS.	114
SALES OIL	1 # 0270	HOC 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190477 190478	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	7.00 35.00		102.06 I 510.30 I	
				CUSTOMER	42.00	0.00	612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 04/11 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	15 /O WALLS (LT 4/13/12
INVOICE# DAT	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190479 4/06 190480 4/06		VISITING NURSE SERVICE VISITING NURSE SERVICE		6.75 39.50		98.42 I 575.91 I	
			CUSTOMER	46.25	0.00	674.33	
			CATEGORY	46.25	0.00	674.33	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	16
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190481	4/06/12	800000	VISITING NURSE SERVICE	GIUNTA, MADELIN	1.00		14.58 I	
				 CATEGORY	1.00	0.00	14.58	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	117
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE (
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190482	4/06/12	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	8.00		116.64 I	
190483	4/06/12	800000	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	48.00		699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	118
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190484	4/06/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	9
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190485	4/06/12	000008	VISITING NURSE SERVICE		35.00		510.30	I	
190486	4/06/12	000008	VISITING NURSE SERVICE	GOMEZ, VICTORIA	25.00		364.50	Τ	
				CUSTOMER	60.00	0.00	874.80		
				CATEGODY		0.00	074 00		
				CATEGORY	60.00	0.00	874.80		

RUN	DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	120
SAL	ES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
				5	SALES REGISTER			BILL WEEK ENDING	G 4/13/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190	487	4/06/12	800000	VISITING NURSE SERVICE	GONGORA, MARUJA	3.00		43.74 I	
					CATEGORY	3.00	0.00	43.74	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY S A L E S	NY R E G I S T E R			PAGE 1 ADU ADULT BILL WEEK ENI	- 12 DING	4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	RE	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
190488	4/06/12	800000	VISITING NURSE SERVICE	GON	IZALEZ, CARLO	8.75		127.58	I		
					CATEGORY	8.75	0.00	127.58			

Ŧ

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.22
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S.	ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190489	4/06/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	3
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	,
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190490	4/06/12	000008	VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00		437.40 I	
190491	4/06/12	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	3.00		43.74 I	
190492	4/06/12	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	6.00		87.48 I	
				CUSTOMER	39.00	0.00	568.62	
				CATEGORY	39.00	0.00	568.62	

-	- , ,		YSIDE CITYWIDE				-	- 12	4
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
190493	3/16/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	4.00		58.32	I	
190494	3/30/12	800000	VISITING NURSE SERVICE	GOYES, ELBA	4.00		58.32	I	
190495	4/06/12	800000	VISITING NURSE SERVICE	GOYES, ELBA	4.00		58.32	I	
190496	4/06/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	20.00		291.60	I	
190497	4/06/12	800000	VISITING NURSE SERVICE	GRAVER, EDNA	32.00		466.56	I	
				CUSTOMER	64.00	0.00	933.12		
				CATEGORY	64.00	0.00	933.12		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	25
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI	AIDS	ADULT POPUL
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190498	4/06/12	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	7.00		102.06	I	
190499	4/06/12	800000	VISITING NURSE SERVICE	GRESSINE, ARNOL	41.75		608.72	I	
				CHOMOMED	40.75	0.00	710 70		
				CUSTOMER	48.75	0.00	710.78		
				CATEGORY	48.75	0.00	710.78		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END	- 126 ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190500	4/06/12	800000	VISITING NURSE SERVICE	GUERRA, ANSELMA	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	27
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190501	4/06/12	000008	VISITING NURSE SERVICE	GUEVARA, ELENA	12.00		174.96	I	
190502	4/06/12	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	72.00		1,049.76	I	
				CUSTOMER	84.00	0.00	1,224.72		
				CATEGORY	84.00	0.00	1,224.72		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 12	28
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190503	4/06/12	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	6.00		87.48	I	
190504	4/06/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	30.00		437.40	I	
				CUSTOMER	36.00	0.00	524.88		
				COBTOLLIC	20.00	0.00	321.00		
				CATEGORY	36.00	0.00	524.88		

			YSIDE CITYWIDE	DEG NW NW			PAGE 1 - 129	
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190505	4/06/12	800000	VISITING NURSE SERVICE	HENAO, VICTORIA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 - 1	.30
SALES JR	NL # 0276	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	4/13/12
				SALES REGISIER			RILL MEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100506	4 /05 /10				05.00		264 50 -	
190506	4/06/12	000008	VISITING NURSE SERVICE	HENDY, BERNICE	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE 0	4/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13	31
SALES JRNL	# 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190507	4/06/12	800000	VISITING NURSE SERVICE	HENRIOUEZ, MARI	8.00		116.64	I	
190508	4/06/12	800000	VISITING NURSE SERVICE	HENRIQUEZ, MARI	48.00		699.84	I	
190509	4/06/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MARI	6.00		87.48	I	
190510	4/06/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MARI	36.00		524.88	I	
				CUSTOMER	98.00	0.00	1,428.84		
				CATEGORY	98.00	0.00	1,428.84		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
	2 11 0270	200 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190511 190512	4/06/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	6.00		87.48 I	
190512	4/06/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	24.00		349.92 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 04/11/1 SALES JRNL # 027	2 - SUP SUNNYSIDE CITYWIDE 5 LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 133 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 4/13/12	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190513 4/06/1 190514 4/06/1		, -	30.00 36.00		437.40 I 524.88 I	
		CUSTOMER	66.00	0.00	962.28	
		 CATEGORY	66.00	0.00	962.28	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	, -,
190515	4/06/12	800000	VISITING NURSE SERVICE	HOWARD, FRANCIS	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE 04/ SALES JRNL #	11/12 - SUP SUNN 0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# D.	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	06/12 000008 06/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	5.00 35.00		72.90 I 510.30 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190518	4/06/12	800000	VISITING NURSE SERVICE	IANNELLO, ROSE	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13	37
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTER			BILL WEEK END	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190519	3/30/12	000008	VISITING NURSE SERVICE	IBASCO, SOFIA	4.00		58.32	I	
190520	4/06/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60	I	
				CUSTOMER	24.00	0.00	349.92		
				CATEGORY	24.00	0.00	349.92		

RUN DATE 04/1 SALES JRNL #	11/12 - SUP SUNN 0276 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1: LAA LOMBARDI AIDS BILL WEEK ENDING	
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	06/12 000008 06/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.00 40.00		72.90 I 583.20 I	
			CUSTOMER	45.00	0.00	656.10	
			CATEGORY	45.00	0.00	656.10	

			YSIDE CITYWIDE				PAGE 1 -	139
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	4/12/12
			:	SALES REGISTER			BILL WEEK ENDIN	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
190523	4/06/12	000008	VISITING NURSE SERVICE	INSERRA, CATHER	7.00		102.06	I
190524	4/06/12	800000	VISITING NURSE SERVICE	INSERRA, CATHER	41.75		608.72	Ι
				CUSTOMER	48.75	0.00	710.78	
				CATEGORY	48.75	0.00	710.78	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	10
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190525	4/06/12	800000	VISITING NURSE SERVICE	IRUSTA, MARIA	12.50		182.25 I	
				CATEGORY	12.50	0.00	182.25	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	141
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190526	4/06/12	800000	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HON	142 /EW/O WALLS (LT
	- "			SALES REGISTER			BILL WEEK ENDIN	,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190527 190528	3/23/12 4/06/12	000008 000008	VISITING NURSE SERVICE	,	8.00 5.75		116.64 3 83.84 3	<u>[</u>
190528	4/06/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		40.00		583.20	[
				CUSTOMER	53.75	0.00	783.68	
				CATEGORY	53.75	0.00	783.68	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 14	:3
	"			SALES REGISTER			BILL WEEK END		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190530	3/23/12	000008	VISITING NURSE SERVICE	JARA DEURUCHIM,	5.00		72.90	I	
190531	4/06/12	000008	VISITING NURSE SERVICE	JARA DEURUCHIM,	10.00		145.80	I	
190532	4/06/12	000008	VISITING NURSE SERVICE	JARAMILLO PAL,	4.00		58.32	I	
				CUSTOMER	19.00	0.00	277.02		
				CATEGORY	19.00	0.00	277.02		

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 -	144
SALES URN	L # 0276	TOC 001	SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			ADU ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190533	4/06/12	000008	VISITING NURSE SERVICE	JASZKOWSKI, GEN	6.00		87.48 I	
	-,,							
				CATEGORY	6.00	0.00	87.48	

RUN DATE 04/11/12 SALES JRNL # 0276	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190534 4/06/12 190535 4/06/12 190536 4/06/12 190537 4/06/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JEWAT, LUCILLE JHAVERI, RAMESH	11.00 43.75 4.00 20.00		160.38 I 637.88 I 58.32 I 291.60 I	
			CUSTOMER	78.75	0.00	1,148.18	
			CATEGORY	78.75	0.00	1,148.18	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE A	- 146 DULT	;
			S	SALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190538 190539	4/06/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	9.50		138.51	I	
190539	4/06/12	000008	VISITING NURSE SERVICE	JIANNARAS, ANNA	56.50 		823.77		
				CUSTOMER	66.00	0.00	962.28		
				CATEGORY	66.00	0.00	962.28		

ı	RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	147
ı	SALES JRN	ь # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	4/13/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	190540	4/06/12	000008	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	16.00		233.28 I	
ı									
ı									
ı					CATEGORY	16.00	0.00	233.28	

	04/11/12 - NL # 0276		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
	"			SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190541	4/06/12	800000	VISITING NURSE SERVICE	JIMENEZ, BETTY	15.00		218.70 I	
				CATEGORY	15.00	0.00		

RUN DATE (LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 149 ADU ADULT	12/10
INVOICE#	DATE	CUST NO	CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT		13/12 RPLUS
190542	4/06/12	000008	VISITING NURSE SERVICE	JOHNSON, DOROTH	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	04/11/12 -	- SUP SUNN	NYSIDE CITYWIDE			I	PAGE 1 -	150
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY		7	VCP CHOICE LHC	SA
			S	SALES REGISTER		I	BILL WEEK ENDI	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190543	4/06/12	800000	VISITING NURSE SERVICE	JOHNSON, FANNY	20.00		291.60	I
				CATEGORY	20.00	0.00	291.60	

RUN DATE 04/11/12 SALES JRNL # 0276		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 15 LTC NURSING HOMEW/ BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190544 4/06/12 190545 4/06/12 190546 4/06/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JORRIN, NILIO	24.50 7.00 35.00		357.22 I 102.06 I 510.30 I	
			CUSTOMER	66.50	0.00	969.58	
			CATEGORY	66.50	0.00	969.58	

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
190547	4/06/12	800000	VISITING NURSE SERVICE	KAKOULLIS, FAY	13.00		189.54 I	
				CATEGORY	13.00	0.00	189.54	

RUN DATE 0 SALES JRNI		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 VCP CHOICE L BILL WEEK EN		53 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190549 190550	4/06/12 4/06/12 4/06/12 4/06/12	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SARD KAUR, SHARAN KAUR, SHARAN KEARNEY, LORRAI	8.00 6.00 40.00 16.00		116.64 87.48 583.20 233.28	I I I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

			YSIDE CITYWIDE	DEG NW NW			PAGE 1 - 154	
SALES JRN	IL # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	1/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
190552	4/06/12	800000	VISITING NURSE SERVICE	KHAN, MARGARET	11.50		167.67 I	
				CATEGORY	11.50	0.00	 167.67	

RUN DATE 04/11/12 - SUP SALES JRNL # 0276 LOC		REG NY NY			PAGE 1 - 1 ADU ADULT	55
SIZZB SIZVE II SZYS ZGS		SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE# DATE CUST	T NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190553 4/06/12 0000		KILIMLIAN, PEPR	48.00		699.84 I	
190555 4/06/12 0000		•	54.25		790.97 I	
		CUSTOMER	112.25	0.00	1,636.61	
			110.05		1 636 61	
190554 4/06/12 0000	008 VISITING NURSE SERVICE	KONSTANTINAKOS, KONSTANTINAKOS,	10.00 54.25	 0.00 	145.80 I 790.97 I	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 156	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTER			BILL WEEK EN	DING 4/13/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU	JS
190556	4/06/12	000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	8.00		116.64	I	
190557	4/06/12	000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	48.00		699.84	I	
				CUSTOMER	56.00	0.00	816.48		_
				CATEGORY	56.00	0.00	816.48		

	ATE 04/11/12 JRNL # 0276		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	157	
	"			SALES REGISTER			BILL WEEK ENDING	4/13/12	
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS	
19055	8 4/06/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	15.00		218.70 I		
				CATEGORY	15.00	0.00	218.70		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	8
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
			:	SALES REGISTER			BILL WEEK ENI	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190559	4/06/12	000008	VISITING NURSE SERVICE	LARA-MORA, BELE	8.00		116.64	I	
190560	4/06/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	40.00		583.20	I	
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE (BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190561	3/09/12	800000	VISITING NURSE SERVICE	LEE, HEE	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	160
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190562	3/30/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	4.00		58.32 I	
190563	4/06/12	800000	VISITING NURSE SERVICE	LEE, KATHLEEN	4.00		58.32 I	
190564	4/06/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	20.00		291.60 I	
190565	4/06/12	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	15.75		229.64 I	
				CUSTOMER	43.75	0.00	637.88	
				CATEGORY	43.75	0.00	637.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	161 IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190566	4/06/12	800000	VISITING NURSE SERVICE	LEVENDIS, GEORG	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 162 VCP CHOICE LHCSA
Bridde Grav	1 11 0270	100 001		SALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190567 190568	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LEWIS, CATHERIN LEWIS, CATHERIN	8.00 48.00		116.64 I 699.84 I
				CUSTOMER	56.00	0.00	816.48
				CATEGORY	56.00	0.00	816.48

RUN DATE 04/11	/12 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	163
SALES JRNL # 0	276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDI	ING 4/13/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190569 4/06	/12 000008	VISITING NURSE SERVICE	LIMANDRI, FRANC	8.00		116.64	I
190570 4/06	/12 000008	VISITING NURSE SERVICE	LIMANDRI, FRANC	46.75		681.62	I
190571 4/06	/12 000008	VISITING NURSE SERVICE	LINARES, MYRIAM	4.00		58.32	I
190572 4/06	/12 000008	VISITING NURSE SERVICE	LINARES, MYRIAM	15.50		225.99	I
						1 000 55	
			CUSTOMER	74.25	0.00	1,082.57	
			CATEGORY	74.25	0.00	1,082.57	

RUN DATE (04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 164
SALES JRNI	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
				SALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190573	4/06/12	000008	VISITING NURSE SERVICE	LIRIANO, FRANCI	60.00		874.80 I
				CAERCODY	60.00	0.00	074.00
				CATEGORY	60.00	0.00	874.80

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16!	5
SALES JRN	rL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190574	4/06/12	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	13.50		196.83 I	
				CATEGORY	13.50	0.00	196.83	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	56
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190575	3/30/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I	
190576	4/06/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	8.00		116.64	I	
190577	4/06/12	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	40.00		583.20	I	
190578	4/06/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	6.00		87.48	I	
190579	4/06/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	36.00		524.88	I	
				CUSTOMER	98.00	0.00	1,428.84		
				CATEGORY	98.00	0.00	1,428.84		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 16	57
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
				SALES REGISTER			BILL WEEK END	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190580	4/06/12	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	10.00		145.80	I	
190581	4/06/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	60.00		874.80	I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	168
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190582	4/06/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	23.50		342.63 I	
							240 62	
				CATEGORY	23.50	0.00	342.63	

			YSIDE CITYWIDE	DDG 1911			PAGE 1 - 16	9
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	4/13/12
			•				DIDD WEEK BROING	1/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190583	4/06/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	5.00		72.90 I	
190584	4/06/12	000008	VISITING NURSE SERVICE	•	30.00		437.40 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

	04/11/12 - NL # 0276		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - AUR ADULT REHA BILL WEEK ENDI	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190585	3/30/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	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			PAGE 1 - 1 VCP CHOICE LHCSA	71
			٤	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190586	4/06/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 172
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	OMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
190587	3/23/12	000008	VISITING NURSE SERVICE	LOPEZ, MARIA	6.00		87.48	I
190588	4/06/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	6.00		87.48	I
190589	4/06/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	36.00		524.88	I
				CHGEOMED	40.00	0.00	600.04	
				CUSTOMER	48.00	0.00	699.84	
				CATEGORY	48.00	0.00	699.84	

			YSIDE CITYWIDE				PAGE 1	- 17	73
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190590	4/06/12	000008	VISITING NURSE SERVICE	LOPEZDELCASTIL,	10.00		145.80	I	
190591	4/06/12	800000	VISITING NURSE SERVICE	LOPEZDELCASTIL,	60.00		874.80	I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 17 ADU ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190592	4/06/12	800000	VISITING NURSE SERVICE	LOZADA, LAURA	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	

			YSIDE CITYWIDE				PAGE 1 - 175	
SALES JRN	L # 0276	LOC 001		REG NY NY			CCL CONGREGATE CARE	
			2	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100500	4 40 5 41 0				10 50			
190593 190594	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	19.50 30.00		284.32 I 437.40 I	
100004	4/00/12	000000	VISITING NORSE SERVICE	HIM, ANGIE				
				CUSTOMER	49.50	0.00	721.72	
				CATEGORY	49.50	0.00	721.72	

			YSIDE CITYWIDE				PAGE 1 -	176
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	-~ 4/10/10
			:	SALES REGISTER			BILL WEEK ENDIN	IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	ZT TNUOMA	P SURPLUS
190595	4/06/12	000008	VISITING NURSE SERVICE	MACCHIA, CATHY	8.00		116.64	- -
190596	4/06/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	33.00		481.14	• •
				CUSTOMER	41.00	0.00	597.78	
				CATEGORY	41.00	0.00	597.78	

-	- , ,		YSIDE CITYWIDE				PAGE 1	- 17	7
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	ALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190597	4/06/12	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	12.00		174.96	I	
190598	4/06/12	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	72.00		1,049.76	I	
190599	4/06/12	000008	VISITING NURSE SERVICE	MANGAN, JOHN	18.75		273.38	I	
190600	4/06/12	000008	VISITING NURSE SERVICE	MANNINO, FRANCE	11.00		160.38	I	
190601	4/06/12	800000	VISITING NURSE SERVICE	MANNINO, FRANCE	66.00		962.28	I	
				CUSTOMER	179.75	0.00	2,620.76		
				CATEGORY	179.75	0.00	2,620.76		

DIDI DAME 0	1 / 1 1 / 1 0	CIID CIDD					53.65	1.5	7.0
			YSIDE CITYWIDE				-	- 17	
SALES JRNL	J # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TVD	SURPLUS
TIMAOTCE	DAIE	COSI NO	COSTONER NAME	KEFEKENCE	1100105	IAX ANI	AMOUNT	IIF	SORFIOS
10000	2 / 2 2 / 3 2						0.4 55	_	
	3/09/12	800000	VISITING NURSE SERVICE	MANOS, ARCHIE	6.50		94.77	Τ	
190603	4/06/12	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	8.00		116.64	I	
190604	4/06/12	800000	VISITING NURSE SERVICE	MANOS, ARCHIE	47.50		692.55	I	
	3/09/12	000008	VISITING NURSE SERVICE	MANOS, VASILIKE	3.00		43.74	Т	
	3/30/12	000008		•	4.00		58.32	± T	
	- , ,		VISITING NURSE SERVICE	MANOS, VASILIKE				Τ.	
190607	4/06/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	4.00		58.32	I	
190608	4/06/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	23.50		342.63	I	
				·					
				CUSTOMER	96.50	0.00	1,406.97		
				COBTONER	50.50	0.00	1,100.57		
				CATEGORY	96.50	0.00	1,406.97		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 179	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PROGRAM	
			S	SALES REGISTER			BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190609	4/06/12	800000	VISITING NURSE SERVICE	MARINO, ANN	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

TE 04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	180
JRNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
		5	SALES REGISTER			BILL WEEK ENDIN	NG 4/13/12
E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
4/06/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50 I	-
			CATEGORY	25.00	0.00	364.50	
		JRNL # 0276 LOC 001 E# DATE CUST NO	E# DATE CUST NO CUSTOMER NAME	JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R E# DATE CUST NO CUSTOMER NAME REFERENCE	JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R E# DATE CUST NO CUSTOMER NAME REFERENCE HOURS 4/06/12 000008 VISITING NURSE SERVICE MARMOL ESPINAL, 25.00	JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY S A L E S R E G I S T E R E# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT 4/06/12 000008 VISITING NURSE SERVICE MARMOL ESPINAL, 25.00	JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCS S A L E S R E G I S T E R BILL WEEK ENDIN E# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TY 4/06/12 000008 VISITING NURSE SERVICE MARMOL ESPINAL, 25.00 364.50 I

RUN DATE (SALES JRNI		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 181 LTC NURSING HOMEW/O WALLS (BILL WEEK ENDING 4/13/12	LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	3.50 44.00		51.03 I 641.52 I	
				CUSTOMER	47.50	0.00	692.55	
				CATEGORY	47.50	0.00	692.55	

			YSIDE CITYWIDE				PAGE 1 - 1	.82
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTE	R		BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190613	4/06/12	800000	VISITING NURSE SERVICE	MARTIN, ELAUCAD	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				-	183	
SALES JRN	⊔ # 0276	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
190614	4/06/12	800000	VISITING NURSE SERVICE	MARTIN, GRISELA	3.00		43.74 I		
				CATEGORY	3.00	0.00	43.74		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	184
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA
			S	SALES REGISTER			BILL WEEK ENDIN	IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190615	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	14.75		215.06 I	
				CATEGORY	14.75	0.00	215.06	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 18	35
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT	TE CAR	RE PROGRAM
			i	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190616	4/06/12	000008	VISITING NURSE SERVICE	MARTINEZ, ELENA	10.00		145.80	I	
190617	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	59.25		863.87	I	
				CUSTOMER	69.25	0.00	1,009.67		
				CUSTOMER	09.25	0.00	1,009.67		
				CATEGORY	69.25	0.00	1,009.67		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			S	ALES REGISTER	_		BILL WEEK ENDI	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190618	4/06/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	30.00		437.40	I
190619	3/30/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	6.00		87.48	I
190620	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	6.00		87.48	I
190621	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	29.50		430.11	I
190622	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	12.00		174.96	I
190623	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	72.00		1,049.76	I
				CUSTOMER	155.50	0.00	2,267.19	
				CATEGORY	155.50	0.00	2,267.19	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 18	37
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190624	4/06/12	000008	VISITING NURSE SERVICE	MARTINEZ, ROSAL	3.75		54.68	I	
190625	4/06/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	33.75		492.08	I	
				CUSTOMER	37.50	0.00	546.76		
				CUSTOMER	37.50	0.00	540.70		
				CATEGORY	37.50	0.00	546.76		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITY	WIDE REG	NY NY			PAGE 1 ADU ADULT	- 18	38
SALES UKN	L # 02/0	TOC 001	SUNNISIDE CITI	S A L E		R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190626	4/06/12	000008	VISITING NURSE S	SERVICE	MATOS, ROSA	10.00		145.80	I	
190627	4/06/12	800000	VISITING NURSE S	SERVICE	MATOS, ROSA	50.00		729.00	I	
190628	4/06/12	800000	VISITING NURSE S	SERVICE	MAZZONE, FRANCE	9.00		131.22	I	
190629	4/06/12	800000	VISITING NURSE S	SERVICE	MAZZONE, FRANCE	54.00		787.32	I	
190630	4/06/12	800000	VISITING NURSE S	SERVICE	MCBRAYER, SYLVI	24.00		349.92	I	
190631	4/06/12	800000	VISITING NURSE S	SERVICE	MCBRAYER, SYLVI	132.00		1,924.56	I	
190632	4/06/12	800000	VISITING NURSE S	SERVICE	MCDUFFY, ALOMA	3.00		43.74	I	
					CUSTOMER	282.00	0.00	4,111.56		
					 CATEGORY	282.00	0.00	4,111.56		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
511225 5141	_ 02/0	200 001		SALES REGISTER			BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190633 190634	4/06/12	800000	VISITING NURSE SERVICE	·	8.00		116.64	I T
190634	4/06/12	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	40.00		583.20	
				CUSTOMER	48.00	0.00	699.84	
				CATEGORY	 48.00	0.00	699.84	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 190
SALES JRN	ъ # 0276	LOC 001		REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
100635	4 /06 /10	000000	TITATETNA NEDAE ABDITA	MODADELAND DILL	10 00		174.06
190635	4/06/12	000008	VISITING NURSE SERVICE	MCPARTLAND, PHI	12.00		174.96 I
				CATEGORY	12.00	0.00	174.96
1				CATEGORI	12.00	0.00	1/4.70

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 19	91
BALLED GIGV	L # 0270	100 001		SALES REGISTER			BILL WEEK EN		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190636	4/06/12	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	16.00		233.28	I	
190637 190638	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MEJIA, MARINA MEJIA, MARINA	4.00 26.00		58.32 379.08	I T	
150030	1,00,12	00000	VIBILING NORSE SERVICE						
				CUSTOMER	46.00	0.00	670.68		
				CATEGORY	46.00	0.00	670.68		

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.92
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
			S	ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190639	4/06/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	39.00		568.63 I	
				CATEGORY	39.00	0.00	568.63	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 193	
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 4/1	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
190640	4/06/12	000008	VISITING NURSE SERVICE	MELILLO, GRACE	4.00		58.32 I	
190641	4/06/12	800000	VISITING NURSE SERVICE	MELILLO, GRACE	20.00		291.60 I	
				CUSTOMER	24.00	0.00	349.92	
				CATEGORY	24.00	0.00	349.92	

1	RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	4
5	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AIDS	ADULT POPUL
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
:	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
:	190642	4/06/12	000008	VISITING NURSE SERVICE	MENDEZ, NELLY	15.25		222.35 I	
					CATEGORY	15.25	0.00	222.35	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	195
SALES UKN.	ы _# 0270	LOC UUI		SALES REGISTER			BILL WEEK ENDIN	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190643 190644	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 62.00		131.22 I 903.96 I	
				CUSTOMER	71.00	0.00	1,035.18	
				CATEGORY	71.00	0.00	1,035.18	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	96
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	,
			5	SALES REGISTER	8		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190645	4/06/12	000008	VISITING NURSE SERVICE	MENDOZA, JULIO	4.00		58.32	I	
190646	4/06/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	23.00		335.34	I	
				 CUSTOMER	 27.00	0.00	393.66		
				COSTOMER	27.00	0.00	393.00		
				CATEGORY	27.00	0.00	393.66		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 197	
SALES JRN	r∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	1/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	SURPLUS
190647	4/06/12	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	19.50		284.31 I	
				CATEGORY	19.50	0.00	284.31	

ı	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	98
ı	SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190648	4/06/12	800000	VISITING NURSE SERVICE	MEYERS, BEATRIC	9.00		131.22 I	
					CATEGORY	9.00	0.00	131.22	

RUN DATE 04/ SALES JRNL #	/11/12 - SUP SUNN # 0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	CSA
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
190650 4/	/06/12 000008 /06/12 000008 /06/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MILEO, MARY MILEO, MARY MOLINA, ANA	4.00 24.00 6.00		58.32 349.92 87.48	I I
			CUSTOMER	34.00	0.00	495.72	
			CATEGORY	34.00	0.00	495.72	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	200
Brille ordi	1 1 0270	100 001		A L E S R E G I S T E R			BILL WEEK ENDI	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190652	4/06/12	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	6.00		87.48	I
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190653	4/06/12	800000	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE (04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 202	
SALES JRNI	և # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 4/	/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
190654	4/06/12	800000	VISITING NURSE SERVICE	MOORE, JOSEPH	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 203	
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING 4	/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
190655	4/06/12	000008	VISITING NURSE SERVICE	MORAITIS, AGATH	5.00		72.90 I	
190656	4/06/12	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	30.00		437.40 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE	DDG 1911			PAGE 1 -	
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			BILL WEEK END	OMEW/O WALLS (LT ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
190657 190658	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	4.00 31.00		58.32 451.98	I I
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	205
			:	SALES REGISTER			BILL WEEK ENDIN	IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190659	4/06/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	12.00		174.96	<u>.</u> -
190660 190661	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MORALES, GENERO MOURAS, ANNA	70.75 7.25		1,031.54 I 105.71 I	- - -
190662	3/23/12	000008	VISITING NURSE SERVICE	MUSHIYEVA, RIVA	1.00		14.58	= = =
				CUSTOMER	91.00	0.00	1,326.79	
				CATEGORY	91.00	0.00	1,326.79	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 VCP CHOICE L	- 20	6
SALES URN	L # UZ/6	TOC 001		-	EGISTI	E R		BILL WEEK EN		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190663 190664	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	GEORGE GEORGE	6.00 36.00		87.48 524.88	I	
150004	4/00/12	000000	VISITING NORSE SERVICE	NAGI,	CUSTOMER	42.00	0.00	612.36		
					COSTOMER	42.00		012.30		
					CATEGORY	42.00	0.00	612.36		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 20)7
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190665	4/06/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

- 1				YSIDE CITYWIDE					208
	SALES JRNI	L # 0276	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/13/12
									, -,
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190666	4/06/12	800000	VISITING NURSE SERVICE	NEIRA, MARIO	3.00		43.74 I	
					CATEGORY	3.00	0.00	43.74	

	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	209
	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190667	4/06/12	000008	VISITING NURSE SERVICE	NELLINI, MARY	20.00		291.60 I	
l									
1					CATEGORY	20.00	0.00	291.60	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	10
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
IIIVOICE	DITTE	COD1 140	CODIONER WIND	KEI BREIVEE	110010	11111 11111	11100111 111	BORT BOD
190668	4/06/12	800000	VISITING NURSE SERVICE	NICKELL, JEAN	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 04/11/12 SALES JRNL # 0276	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 211 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 4/13/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190669 4/06/12 190670 4/06/12		,	7.00 41.50		102.06 I 605.07 I
		CUSTOMER	48.50	0.00	707.13
		CATEGORY	48.50	0.00	707.13

			YSIDE CITYWIDE				PAGE 1	- 21	.2
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGAT		
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190671	4/06/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	9.00		131.22	I	
190672	4/06/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	52.25		761.81	I	
				CUSTOMER	61.25	0.00	893.03		
				CATEGORY	61.25	0.00	893.03		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 213	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 4	/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
190673	4/06/12	000008	VISITING NURSE SERVICE	NIEVES, NANCY	36.00		524.88 I	
190674	4/06/12	800000	VISITING NURSE SERVICE	NINO, CARMEN	20.00		291.60 I	
				CUSTOMER	56.00	0.00	816.48	
				COSTOMER	36.00	0.00	010.40	
				CATEGORY	56.00	0.00	816.48	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	214 MEW/O WALLS (LT
BILLED CITY	L 0270	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190675	4/06/12	800000	VISITING NURSE SERVICE	·	21.50		313.47	I -
190676	4/06/12	000008	VISITING NURSE SERVICE	NOBOADESALAZAR,	33.50		488.43	1
				CUSTOMER	55.00	0.00	801.90	
				CATEGORY	55.00	0.00	801.90	

RUN DATE 04/11 SALES JRNL # 0			REG NY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHO BILL WEEK END	
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
190677 4/06 190678 4/06 190679 4/06 190680 4/06	/12 000008 /12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NUZIALE, CONCET NUZIALE, CONCET OCHOA, LUIS OCHOA, LUIS	7.00 41.75 4.00 38.75		102.06 608.72 58.32 564.98	I I I
			CUSTOMER	91.50	0.00	1,334.08	
			CATEGORY	91.50	0.00	1,334.08	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 216 ADU ADULT BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190681	4/06/12	800000	VISITING NURSE SERVICE	ONATE, MIGUEL	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 04/11 SALES JRNL # 0			REG NY NY SALES REGISTER			PAGE 1 - 23 VCP CHOICE LHCSA BILL WEEK ENDING	17 4/13/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190682 4/06 190683 4/06 190684 4/06	/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORTEGA, CARLOS ORTEGA, CARLOS OSPINA, ANA	5.00 11.00 8.00		72.90 I 160.38 I 116.64 I	
			CUSTOMER	24.00	0.00	349.92	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK ENI	- 21 DING	8 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190686	4/06/12 4/06/12 4/06/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	OTINIANO, ALBER OTINIANO, ALBER PALACIOS, MARGA	3.00 6.00 11.25		43.74 87.48 164.03	I I I	
				CUSTOMER	20.25	0.00	295.25		
				CATEGORY	20.25	0.00	295.25		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	
			\$	SALES REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
190688	4/06/12	000008	VISITING NURSE SERVICE	PANASKAROLIDIS,	34.75		506.67	I
190689 190690	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PAPAZIAN, MANNI PAPOUTSIS, MARY	50.00 6.00		729.00 87.48	I T
190691	4/06/12	000008	VISITING NURSE SERVICE	PAPP, TEREZIA	3.00		43.74	Ī
				CUSTOMER	93.75	0.00	1,366.89	
				CATEGORY	93.75	0.00	1,366.89	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	20
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190692	4/06/12	800000	VISITING NURSE SERVICE	PARK, SUNG	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 04 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY 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
190694 4	4/06/12 4/06/12 4/06/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PENA, VICTORIA PENA, VICTORIA PENAGOS, MARIA	6.00 32.75 25.00		87.48 1 477.50 1 364.50 1	[[[
				CUSTOMER	63.75	0.00	929.48	
				CATEGORY	63.75	0.00	929.48	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 222 ADU ADULT	
			5	SALES REGISTER			BILL WEEK ENDING 4/13	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	PLUS
190696	4/06/12	800000	VISITING NURSE SERVICE	PENARANDA, CARM	11.00		160.38 I	
				CATEGORY	11.00	0.00	160.38	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	3
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190697	3/23/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06 I	
190698	3/30/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06 I	
190699	4/06/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06 I	
190700	4/06/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	35.00		510.30 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				MEW/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDI	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
190701	4/06/12	000008	VISITING NURSE SERVICE	PEREZ, DOMINGA	6.00		87.48	I
190702	4/06/12	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	35.00		510.30	I
				CUSTOMER	41.00	0.00	597.78	
				CODIONER	11.00	0.00	337.70	
				CATEGORY	41.00	0.00	597.78	

RUN DATE 04/11 SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	225 G 4/13/12
INVOICE# DATE	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190703 4/06, 190704 4/06, 190705 4/06,	/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PEREZ, GLADYS PEREZ, GLADYS PEREZ, JOAQUIN	6.00 29.75 30.00		87.48 I 433.76 I 437.40 I	
			CUSTOMER	65.75	0.00	958.64	
			CATEGORY	65.75	0.00	958.64	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 22	26
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190706	4/06/12	000008	VISITING NURSE SERVICE	PERSAUD, RITA	5.00		72.90	I	
190707	4/06/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	29.75		433.76	I	
				CUSTOMER	34.75	0.00	506.66		
				COSTOMER	34.73	0.00	300.00		
				CATEGORY	34.75	0.00	506.66		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	==:
511225 614.	.2 02/0	200 001		ALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
190708	4/06/12	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	40.00		583.20	I
190709 190710	4/06/12 3/09/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PIZARRO, BARBAR PLACIDO, GENARO	3.00 10.00		43.74 145.80	I
190711	4/06/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	25.00		364.50	I
				CUSTOMER	78.00	0.00	1,137.24	
				CATEGORY	78.00	0.00	1,137.24	

			YSIDE CITYWIDE				PAGE 1 - 22	8
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190712 190713	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	5.75 35.75		83.84 I 521.24 I	
				CUSTOMER	41.50	0.00	605.08	
				CATEGORY	41.50	0.00	605.08	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 229	
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190714	4/06/12	000008	VISITING NURSE SERVICE	POGGI, EMERITA	6.00		87.48 I	
190715	4/06/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	30.00		437.40 I	
				CUSTOMER	36.00	0.00	524.88	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	230
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190716	4/06/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE 04/ SALES JRNL #	/11/12 - SUP SUNN # 0276 LOC 001		EG NY NY			PAGE 1 - VCP CHOICE LHCS	
SALES URNL #	1 02/6 LOC 001	SONNISIDE CITIWIDE R	_			BILL WEEK ENDIN	
							-,,
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190717 4/	06/12 000008	VISITING NURSE SERVICE	PUISELLO, CIRA	2.00		29.16	-
	06/12 000008	VISITING NURSE SERVICE	PUISELLO, CIRA	20.75		302.54	-
	23/12 000008	VISITING NURSE SERVICE	PULLIZA, DIANNE	6.00		87.48	-
	06/12 000008	VISITING NURSE SERVICE	PULLIZA, DIANNE	6.00		87.48	
190721 4/	06/12 000008	VISITING NURSE SERVICE	PULLIZA, DIANNE	7.00		102.06	[
190722 4/	06/12 000008	VISITING NURSE SERVICE	QUINTERO, INES	30.00		437.40	[
						1 046 10	
			CUSTOMER	71.75	0.00	1,046.12	
			CATEGORY	71.75	0.00	1,046.12	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 23	32
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER	₹		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190723	4/06/12	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	7.00		102.06	I	
190724	4/06/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	42.00		612.36	I	
				CUSTOMER	49.00	0.00	714.42		
				CATEGORY	49.00	0.00	714.42		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	233
SALES JRN	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDE	S PEDIATRIC
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIE	COSI NO	COSTOMER NAME	KEPEKENCE	1100105	IAX ANI	AMOUNT TIP	SORFIOS
190725	4/06/12	800000	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	4
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190726	4/06/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	4.00		58.32 I	
190727	4/06/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	39.00		568.62 I	
190728	4/06/12	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	25.25		368.15 I	
				CUSTOMER	68.25	0.00	995.09	
				CATEGORY	68.25	0.00	995.09	

			YSIDE CITYWIDE				-	- 23	
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REH		
			2	SALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190729	4/06/12	000008	VISITING NURSE SERVICE	RAMOS, JENNIFER	5.00		72.90	I	
190730	4/06/12	800000	VISITING NURSE SERVICE	RAMOS, JENNIFER	15.50		226.00	I	
				CUSTOMER	20.50	0.00	298.90		
				CATEGORY	20.50	0.00	298.90		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 236)
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190731	4/06/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96 I	
190732	4/06/12	800000	VISITING NURSE SERVICE	RANDAZZO, ROSAL	20.00		291.60 I	
				CUSTOMER	32.00	0.00	466.56	
				CATEGORY	32.00	0.00	466.56	

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 237	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL HEA	ALTH
			5	SALES REGISTER			BILL WEEK ENDING	1/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190733	4/06/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	2.50		36.45 I	
				CATEGORY	2.50	0.00	36.45	

RUN DATE		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	250
SALES UKN.	L # 0270	LOC 001		SALES REGISTER			BILL WEEK ENDI	· · -
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
190734	4/06/12	000008	VISITING NURSE SERVICE	REINA, JOSE	16.00		233.28	I
190735 190736	4/06/12 4/06/12	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RICCA, MARIE RICCA, MARIE	4.00 18.00		58.32 262.45	I I
				CUSTOMER	38.00	0.00	554.05	
				CATEGORY	38.00	0.00	554.05	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 - 2	39
SALES JRN	IL # UZ/6	LOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190737	4/06/12	800000	VISITING NURSE SERVICE	RICHINS, MARY	4.00		58.32 I	
				CATEGORY	4.00	0.00	 58.32	

ı	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	40	
ı	SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
ı				S	SALES REGISTER			BILL WEEK ENDING	4/13/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	190738	4/06/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, OL	16.00		233.28 I		
ı										
ı						16.00				
ı					CATEGORY	16.00	0.00	233.28		

RUN DATE 0 SALES JRNL		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 - 241 LTC NURSING HOMEW/C BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	8.00 48.00		116.64 I 699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	 56.00	0.00	 816.48	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 24 VCP CHOICE LHCSA	:2
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190741	4/06/12	800000	VISITING NURSE SERVICE	•	20.00		291.60 I	
190742	4/06/12	800000	VISITING NURSE SERVICE	RIVERA, ERNESTO	20.00		291.60 I 	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	W/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190743	4/06/12	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2 ADU ADULT	44
SALES UKINI	L # 0270	HOC 001		SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190744 190745	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, ~-	4.00 24.00		58.32 I 349.92 I	
				CUSTOMER	28.00	0.00	408.24	
				CATEGORY	28.00	0.00	408.24	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER	ł		PAGE 1 - 245 LTC NURSING HOMEW/O W BILL WEEK ENDING 4/	VALLS (LT /13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
190746 190747	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		36.50 4.00		532.18 I 58.32 I	
				CUSTOMER	40.50	0.00	590.50	·
				CATEGORY	40.50	0.00	 590.50	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 246 VCP CHOICE LHCSA BILL WEEK ENDING 4	/13/12
				NEGIOIEK			BILL WEEK ENDING 4	/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
190748 190749	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	7.00 42.00		102.06 I 612.36 I	
				CUSTOMER	49.00	0.00	714.42	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	247
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190750	4/06/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY S A L E S R E G I	STER		PAGE 1 ADU ADULT BILL WEEK ENI	- 248 DING	8 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190751	3/23/12	800000	VISITING NURSE SERVICE	RODDA, ADIL	3.75		54.68	I	
				~					
				CATEG	ORY 3.75	0.00	54.68		

Ŧ

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	249
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
190752	3/02/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	5.00		72.90	I
190753	4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	10.00		145.80	I
190754	4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	6.00		87.48	I
190755	4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	18.00		262.44	I
				CUSTOMER	39.00	0.00	568.62	
				CATEGORY	39.00	0.00	568.62	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 25	50
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190756	4/06/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, MARC	12.00		174.96	I	
190757	4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	71.00		1,035.18	I	
				CUSTOMER	83.00	0.00	1,210.14		
				CODIONER	03.00	0.00	1,210.11		
				CATEGORY	83.00	0.00	1,210.14		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	EW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190758	4/06/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	24.25		353.57 I	
				CATEGORY	24.25	0.00	 353.57	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 25 VCP CHOICE LHCSA	52
			Ş	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190759	4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	7.00		102.06 I	
190760	4/06/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	21.00 		306.18 I	
				CUSTOMER	28.00	0.00	408.24	
				CATEGORY	28.00	0.00	408.24	

RUN DATE 04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 253
SALES JRNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENDING 4/13/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190761 4/06/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	5.00		72.90 I
190762 4/06/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	38.00		554.04 I
			CUSTOMER	43.00	0.00	626.94
			CATEGORY	43.00	0.00	626.94

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	55
SALES JRN	r∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	
			S	ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190765	4/06/12	800000	VISITING NURSE SERVICE	ROLON, JUANITA	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

			YSIDE CITYWIDE				PAGE 1 - 2	56
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190766	4/06/12	000008	VISITING NURSE SERVICE	ROMERO, HERNAN	6.00		87.48 I	
190767	4/06/12	800000	VISITING NURSE SERVICE	ROMERO, HERNAN	27.75		404.60 I	
				CUSTOMER	33.75	0.00	492.08	
				CATEGORY	33.75	0.00	492.08	

			YSIDE CITYWIDE	DEC NY NY			PAGE 1 - 257	
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 4/13/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
190768 190769	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROMERO, SANTHY ROMERO, SANTHY	8.00 48.00		116.64 I 699.84 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 25	58
SALES JRN	L # 0276	LOC 001		-	NY			LTC NURSING		•
			2	SALES RI	EGISTE	R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190770	4/06/12	000008	VISITING NURSE SERVICE	ROMO,	FLOR	8.00		116.64	I	
190771	4/06/12	800000	VISITING NURSE SERVICE	ROMO,	FLOR	48.00		699.84	I	
190772	4/06/12	800000	VISITING NURSE SERVICE	ROSA,	ANA	25.00		364.50	I	
					CUSTOMER	81.00	0.00	1,180.98		
					CATEGORY	81.00	0.00	1,180.98		

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 ADU ADULT	- 25	9
DALLO OIGI	L # 0270	100 001		-	EGISTE	R R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190773 190774	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		LUZ E LUZ E	8.00 48.00		116.64 699.84	I I	
					CUSTOMER	56.00	0.00	816.48		
					CATEGORY	56.00	0.00	816.48		

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	50
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190775	4/06/12	000008	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28	I	
190776	4/06/12	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	5.75		83.84	I	
190777	4/06/12	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	30.00		437.40	I	
190778	4/06/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	25.00		364.50	I	
				CUSTOMER	76.75	0.00	1,119.02		
				CATEGORY	76.75	0.00	1,119.02		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	61 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190779	4/06/12	800000	VISITING NURSE SERVICE	RUBIN, EVGENY	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 262 VCP CHOICE LHCSA	
SALES URN	IL # 0276	LOC UUI		REGNY NY SALES REGISTER				4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190780 190781	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RUEDA, INES RUEDA, INES	6.00 40.00		87.48 I 583.20 I	
150701	1/00/12	000000	VIDITING NORDE BERVICE	CUSTOMER	46.00	0.00	670.68	
				COSTONER	40.00	0.00	070.00	
				CATEGORY	46.00	0.00	670.68	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	263
SALES JRN	L # 0276	LOC 001		REG NY NY			LTC NURSING HOME	·
			i	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190782	4/06/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	6.50		94.77 I	
				CATEGORY	6.50	0.00	94.77	

			YSIDE CITYWIDE				-	264
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	1 4/12/10
				SALES REGISTER			BILL WEEK ENDING	G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190783	4/06/12	000008	VISITING NURSE SERVICE	RUSSO, MONICA	10.00		145.80 I	
190784	4/06/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	60.00		874.80 I	
				CUSTOMER	70.00	0.00	1,020.60	
							•	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	55
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190785	4/06/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	8.25		120.29	I	
190786	3/23/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	11.00		160.38	I	
190787	4/06/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	11.00		160.38	I	
190788	4/06/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	66.00		962.28	I	
				CUSTOMER	96.25	0.00	1,403.33		
				CATEGORY	96.25	0.00	1,403.33		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 26	56
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190789	4/06/12	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	6.00		87.48	I	
190790	4/06/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	30.00		437.40	I	
				CUSTOMER	36.00	0.00	524.88		
				CATEGORY	36.00	0.00	524.88		

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190791	4/06/12	000008	VISITING NURSE SERVICE	SALVUCCI, YOLAN	12.00		174.96 I	
190792	4/06/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	16.00		233.28 I	
190793	4/06/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	7.00		102.06 I	
190794	4/06/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	42.00		612.36 I	
				CUSTOMER	77.00	0.00	1,122.66	
				CATEGORY	77.00	0.00	1,122.66	

ı	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 26	58
١	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190795	4/06/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
١					CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	269 SA
511225 0141	_ 02.0	200 001		ALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190796 190797	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SANCHEZ, NILSA SANCHEZ, NILSA	3.00 23.75		43.74 346.28	<u> </u>
190797	4/00/12	000008	VISITING NORSE SERVICE	SANCHEZ, NILSA			340.20	
				CUSTOMER	26.75	0.00	390.02	
				CATEGORY	26.75	0.00	390.02	

- 1				YSIDE CITYWIDE				PAGE 1 - 2	270	
ı	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
ı				S	SALES REGISTER			BILL WEEK ENDING	4/13/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
	190798	4/06/12	800000	VISITING NURSE SERVICE	SCALA, CATHERIN	5.00		72.90 I		
ı										
ı					CATEGORY	5.00	0.00	72.90		
ı					CALEGORI	5.00	0.00	72.90		

-	JN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE REG NY NY PAGE 1 - 271 ALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY VCP CHOICE LHCSA										
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		4 /12 /10		
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
190799	4/06/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	8.00		116.64	I			
190800	4/06/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	48.50		707.13	I			
190801	3/16/12	000008	VISITING NURSE SERVICE	SEGOVIA, BEATRI	6.00		87.48	I			
190802	4/06/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	1.00		14.58	I			
190803	4/06/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	30.00		437.40	I			
				CUSTOMER	93.50	0.00	1,363.23				
				CATEGORY	93.50	0.00	1,363.23				

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 27	72
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGIS	TER		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190804	4/06/12	000008	VISITING NURSE SERVICE	SEO, INJA	1.00		14.58	I	
190805	4/06/12	800000	VISITING NURSE SERVICE	·	30.00		437.40	I	
				CUSTOME	31.00	0.00	451.98		
				CATEGOR	Y 31.00	0.00	451.98		

UN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE ALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	PAGE 1 - 273 VCP CHOICE LHCSA
SALES ORNE # 02/0 LOC 001 SONNISIDE CITIWIDE REGINI NI	BILL WEEK ENDING 4/13/12
SALLS KEGISIEK	DIDD WEEK ENDING 1/15/12
NVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT	AMOUNT TYP SURPLUS
90806 4/06/12 000008 VISITING NURSE SERVICE SERAFIN, WALTER 8.00	116.64 I
90807 4/06/12 000008 VISITING NURSE SERVICE SERAFIN, WALTER 48.00	699.84 I
90808 4/06/12 000008 VISITING NURSE SERVICE SERRANO, AGUEDA 8.00	116.64 I
90809 4/06/12 000008 VISITING NURSE SERVICE SERRANO, AGUEDA 47.00	685.26 I
90810 4/06/12 000008 VISITING NURSE SERVICE SHANNON, ELNORA 7.00	102.06 I
90811 4/06/12 000008 VISITING NURSE SERVICE SHANNON, ELNORA 28.00	408.24 I
CUSTOMER 146.00 0.00	2,128.68
CATEGORY 146.00 0.00	2,128.68

			YSIDE CITYWIDE				PAGE 1 -	274
SALES JRN	L # U2/6	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	G 4/13/12
							5122 W221 211511	1,10,11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190812 190813	3/30/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	16.75 29.75		244.22 I 433.76 I	
				CUSTOMER	46.50	0.00	677.98	
				CATEGORY	46.50	0.00	677.98	

				REG NY NY LES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190814	4/06/12	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 27	'6
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190815	4/06/12	000008	VISITING NURSE SERVICE	SILLS, JAMES	6.00		87.48	I	
190816	4/06/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	36.00		524.88	I	
				CUSTOMER	42.00	0.00	612.36		
				CATEGORY	42.00	0.00	612.36		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	277
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190817	4/06/12	000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40 I	
190818	4/06/12	800000	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70 I	
				CUSTOMER	45.00	0.00	656.10	
				0001011111		0.00	113.120	
					45.00			
				CATEGORY	45.00	0.00	656.10	

			NYSIDE CITYWIDE	556 to 100			PAGE 1 -	
SALES JR	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190819	4/06/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

ı	RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 279	
١	SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				\$	SALES REGISTER			BILL WEEK ENDING	4/13/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	190820	4/06/12	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	8.00		116.64 I	
١					CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 280 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190821	4/06/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	34.00		495.72 I
				CATEGORY	34.00	0.00	495.72

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	1
SALES JRN	r∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190822	4/06/12	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	282 G 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190823 190824	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STALZER, STEPHA STAMATIADES, ME	12.00 11.75		174.96 I 171.32 I	
				CUSTOMER	23.75	0.00	346.28	
				CATEGORY	23.75	0.00	346.28	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	3
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190825	4/06/12	000008	VISITING NURSE SERVICE	STAMBOULIDIS, V	8.00		116.64 I	
190826	4/06/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	47.25		688.91 I	
				CUSTOMER	55.25	0.00	805.55	
				CATEGORY	55.25	0.00	805.55	

RUN DATE 04/11/12 SALES JRNL # 0276		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HOA HOSPICE ADUL BILL WEEK ENDING	T
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190827 4/06/12 190828 4/06/12		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	3.00 18.00		43.74 I 262.44 I	
			CUSTOMER	21.00	0.00	306.18	
			CATEGORY	21.00	0.00	306.18	

RUN DATE (SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 285 ADU ADULT	
TNIZOTORU	DAME	GUGE NO		SALES REGISTER	HOHDG	may amm		/13/12
INVOICE#	DATE 4/06/12	CUST NO 000008	CUSTOMER NAME VISITING NURSE SERVICE	REFERENCE STENOS, MOSHOUL	HOURS 4.00	TAX AMT	AMOUNT TYP SU	JRPLUS
150025	1/00/12	000000	VISITING NORSE SERVICE	SIENOS, MOSMOUL				
				CATEGORY	4.00	0.00	58.32	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	286
SALES OWN	L # 0270	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
190830	4/06/12	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN:			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 287	
			5	SALES REGISTER			BILL WEEK ENDI	ING 4/13/12	2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	S
190831	4/06/12	800000	VISITING NURSE SERVICE	STERLING, MARGA	5.00		72.90	I	
				CATEGORY	5.00	0.00	72.90		-

RUN DATE (04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 28	38
SALES JRNI	և # 0276	LOC 001	SUNNYSIDE CITYWID	REG NY NY			VCP CHOICE L	HCSA	
				SALES REGISTE	R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190832	4/06/12	000008	VISITING NURSE SERV	ICE STICKELL, BLANC	6.00		87.48	I	
190833	4/06/12	800000	VISITING NURSE SERV	ICE STICKELL, BLANC	24.50		357.21	I	
190834	4/06/12	800000	VISITING NURSE SERV	ICE STROBL, ALFRED	6.00		87.48	I	
190835	4/06/12	800000	VISITING NURSE SER	ICE STROBL, ALFRED	30.00		437.40	I	
				CUSTOMER	66.50	0.00	969.57		
				CATEGORY	66.50	0.00	969.57		

RUN DATE 04/11/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190836 4/06/ 190837 4/06/		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	4.00 16.00		58.32 I 233.28 I	[[
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 -	290
SALES JRN	L # U276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	A /13 /10
			S	ALES REGISTER			BILL WEEK ENDIN	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
190838	4/06/12	800000	VISITING NURSE SERVICE	SULLIVAN, MADAL	15.00		218.70	I
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 29	91
SALES OIL	1 # 0270	ПОС 001		SALES REGISTER			BILL WEEK EN		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190839 190840	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TABOADA, ELIZAB TABOADA, ELIZAB	8.00 66.00		116.64 962.30	I	
				CUSTOMER	74.00	0.00	1,078.94		
				CATEGORY	74.00	0.00	1,078.94		

RUN DATE 0	4/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 292	
SALES JRNL	# 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	1
			:	SALES REGISTER			BILL WEEK ENDING 4/13/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
190841	4/06/12	000008	VISITING NURSE SERVICE	TADDEO, LENA	8.00		116.64 I	
190842	4/06/12	800000	VISITING NURSE SERVICE	TADDEO, LENA	47.00		685.26 I	
190843	4/06/12	800000	VISITING NURSE SERVICE	TAVERAS ARIAS,	12.00		174.96 I	
				CUSTOMER	67.00	0.00	976.86	
				CATEGORY	67.00	0.00	976.86	

	11/12 - SUP SUNN					PAGE 1	- 293	3
SALES JRNL #	0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TNG	4/12/10
		2	SALES REGISTER			BILL WEEK END	ING	4/13/12
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190844 4/	06/12 000008	VISITING NURSE SERVICE	TAWADROUS, ANWA	6.00		87.48	I	
190845 4/	06/12 000008	VISITING NURSE SERVICE	TAWADROUS, ANWA	3.00		43.74	I	
			CUSTOMER	9.00	0.00	131.22		
			COSTOMER	9.00	0.00	131.22		
			CATEGORY	9.00	0.00	131.22		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REGNY NY ALES REGISTER			PAGE 1 - 294 VCP CHOICE LHCSA BILL WEEK ENDING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
190846	4/06/12	800000	VISITING NURSE SERVICE	TEJADA, BALDOME	20.00		291.60 I
				CATEGORY	20.00	0.00	291.60

RUN DATE 04/11/12 SALES JRNL # 0276		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	95 4/13/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190847 4/06/12 190848 4/06/12 190849 4/06/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TERZIAN, ASDGHI	9.00 8.00 40.00		131.22 I 116.64 I 583.20 I	
			CUSTOMER	57.00	0.00	831.06	
			CATEGORY	57.00	0.00	831.06	

RUN DATE	04/11/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	296
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	<u>.</u>
			Ş	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190850	4/06/12	800000	VISITING NURSE SERVICE	TERZIAN, ASDGHI	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE	DDG 1997			PAGE 1 - 2	
SALES	JRNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AMH ADULT MENTAL BILL WEEK ENDING	
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190851	4/06/12	800000	VISITING NURSE SERVICE	THEN, MARIA	11.75		171.32 I	
				CATEGORY	11.75	0.00	 171.32	

			YSIDE CITYWIDE				-	298
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	4/13/12
				SALES REGISIER			PILL MEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190852	4/06/12	000008	VISITING NURSE SERVICE	THOMPSON, WILLI	3.25		47.39 I	
				CATEGORY	3.25	0.00	47.39	

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 29	9
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190853	4/06/12	800000	VISITING NURSE SERVICE	TINOCO, INES	7.00		102.06	I	
190854	4/06/12	800000	VISITING NURSE SERVICE	TINOCO, INES	35.00		510.30	I	
190855	4/06/12	800000	VISITING NURSE SERVICE	TORO VEGA, LUZV	20.00		291.60	I	
190856	4/06/12	800000	VISITING NURSE SERVICE	TORO, PURA	12.00		174.96	I	
190857	4/06/12	800000	VISITING NURSE SERVICE	TORO, PURA	72.00		1,049.76	I	
				CUSTOMER	146.00	0.00	2,128.68		
				CATEGORY	146.00	0.00	2,128.68		

RUN DATE SALES JRN		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 30 ADU ADULT	0
				ALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190858	4/06/12	800000	VISITING NURSE SERVICE	TORRES, EMELINA	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 30	1
511225 0141	_ 02/0	200 001		SALES REGISTER			BILL WEEK END		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190859 190860	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TORRES, LUZ M TORRES, LUZ M	10.00 60.00		145.80 874.80	I T	
130000	1,00,12		VIDITING NONDE BENVIOL	CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

			YSIDE CITYWIDE					- 30	
SALES JRN	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	.		LTC NURSING BILL WEEK EN		O WALLS (LT 4/13/12
				SALES REGISIEF	C		DILL MEEV EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
100061	1 10 5 11 0						07.40	_	
190861 190862	4/06/12	800000	VISITING NURSE SERVICE		6.00		87.48	Ţ	
190862	4/06/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	36.00		524.88		
				CUSTOMER	42.00	0.00	612.36		
				CATEGORY	42.00	0.00	612.36		

	ATE 04/11/12 JRNL # 0276		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	303
DILLED	01412 0270	200 001		SALES REGISTER			BILL WEEK ENDING	G 4/13/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
19086	3 4/06/12	800000	VISITING NURSE SERVICE	TOUMA, MATTA	34.50		503.02 I	
				CATEGORY	34.50	0.00	503.02	

RUN DATE SALES JRN	- , ,	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 30	4
	_ "			LES REGISTER			BILL WEEK ENI		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190864	3/30/12	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	20.00		291.60	I	
190865	4/06/12	800000	VISITING NURSE SERVICE	TRUJILLO, AMPAR	20.00		291.60	I	
190866	4/06/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	8.00		116.64	I	
190867	4/06/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	48.00		699.84	I	
190868	4/06/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	8.00		116.64	I	
190869	4/06/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	48.00		699.84	I	
190870	4/06/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	0.83		145.22	I	
190871	4/06/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	5.00		874.80	I	
				CUSTOMER	157.83	0.00	3,236.18		
				CATEGORY	 157.83	0.00	3,236.18		

RUN DATE 04 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 30 LTC NURSING HOMEW/ BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/06/12 1/06/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	5.00 30.00		72.90 I 437.40 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

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 - 306 ADU ADULT BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190874	4/06/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
DALLS OW	11 # 0270	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190875 190876	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENCIANO-ROJ, VALENCIANO-ROJ,	3.75 40.00		54.68 I 583.20 I	
				CUSTOMER	43.75	0.00	637.88	
				CATEGORY	43.75	0.00	637.88	

RUN	DATE 04	/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	08
SALE	S JRNL	# 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVC	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1908	377 4	/06/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I	
					CATEGORY	8.00	0.00	116.64	

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30	09
SALES JRN	r∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW,	O WALLS (LT
			S	ALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190878	4/06/12	000008	VISITING NURSE SERVICE	VAROL, ELMAS	5.75		83.84	I	
190879	4/06/12	800000	VISITING NURSE SERVICE	VAROL, MUSTAFA	6.00		87.48	I	
190880	4/06/12	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	4.00		58.32	I	
190881	4/06/12	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	24.00		349.92	I	
190882	4/06/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	3.00		43.74	I	
190883	4/06/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	15.00		218.70	I	
190884	4/06/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	5.00		72.90	I	
190885	4/06/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	35.00		510.30	I	
				CUSTOMER	97.75	0.00	1,425.20		
				CATEGORY	97.75	0.00	1,425.20		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	310
SALES OWN	11 # 0270	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190886 190887	4/06/12 4/06/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ ~ ,	4.00 18.00		58.32 I 262.44 I	
				CUSTOMER	22.00	0.00	320.76	
				CATEGORY	22.00	0.00	320.76	

RUN DATE 0 SALES JRNL		SUP SUNN LOC 001		REG NY NY			LTC NURSING		O WALLS (LT
				SALES REGISTER			BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	4/06/12	800000	VISITING NURSE SERVICE		7.00		102.06	I	
190889	4/06/12	800000	VISITING NURSE SERVICE	VENTURA, ROSA	42.00		612.36		
				CUSTOMER	49.00	0.00	714.42		
				CATEGORY	49.00	0.00	714.42		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 312	2
SALES JRN	ı∟ # 0276	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190890	4/06/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.75		594.14 I	
				CATEGORY	40.75	0.00	594.14	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	313
SALES JRN	L # 0276	LOC 001		REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190891	4/06/12	800000	VISITING NURSE SERVICE	VIDAL, ALFREDO	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 - 3 HOA HOSPICE ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190892 190893	4/06/12 4/06/12	000008 000008	VISITING NURSE SERVICE	VIGORITO, ANN	10.00		145.80 I 145.80 I	
190893	4/06/12	000008	VISITING NURSE SERVICE	VIGORITO, ANN	10.00		145.80 1	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 - 315	
SALES JRNI	L # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	0 / 1 0
			2	SALES REGISTER			BILL WEEK ENDING 4/1	3/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
190894	4/06/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	16
SALES JRI	NL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190895	4/06/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	04/11/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 317	7
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/C) WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190896	4/06/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE SALES JRN	- , ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 31	8
SALES UKN	L # UZ/6	TOC 001		LES REGISTER	2		BILL WEEK ENI		4/13/12
									-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190897	3/30/12	000008	VISITING NURSE SERVICE	VIVACOUA, EMMA	10.00		145.80	I	
190898	4/06/12	000008	VISITING NURSE SERVICE	VIVACOUA, EMMA	10.00		145.80	Ī	
190899	4/06/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	51.00		743.58	I	
190900	3/16/12	000008	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
190901	3/23/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
190902	3/30/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
190903	4/06/12	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	5.00		72.90	I	
190904	4/06/12	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	25.00		364.50	I	
				CUSTOMER	110.00	0.00	1,603.80		
				CATEGORY	110.00	0.00	1,603.80		

			YSIDE CITYWIDE				PAGE 1 - 319	
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	/12/10
			S	SALES REGISTER			BILL WEEK ENDING 4	/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
190905	4/06/12	000008	VISITING NURSE SERVICE	WEISBUCH, WILMA	2.00		29.16 I	
190906	4/06/12	800000	VISITING NURSE SERVICE	WROBLEWSKI, HED	1.00		14.58 I	
				CUSTOMER	3.00	0.00	43.74	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	20
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190907	4/06/12	800000	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	21
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190908	4/06/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	322
	- "			SALES REGISTER			BILL WEEK ENDIN	NG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
190909 190910	4/06/12 3/30/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ZAMBRANO, CRUZM ZAMBRANO, VICTO	28.00 3.00		408.24 I	[-
150510	3/30/12	000000	VIDITING NORDE BERVICE	CUSTOMER	31.00	0.00	451.98	
				COSTOMER	31.00	0.00	431.90	
				CATEGORY	31.00	0.00	451.98	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3 HOA HOSPICE ADULT	
DALLS UNI	L # 0270	100 001		SALES REGISTER			BILL WEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
190911	4/06/12	800000	VISITING NURSE SERVICE	ZAMOJCIN, DOROT	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 324 SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 4/13/12 ACERNO, CLAIRE
ACERNO, CLAIRE
ALI, AMRUNISSA
ALI, AMRUNISSA
AMABILE, ANTOIN
AMABILE, ANTOIN
AMABILE, ANTOIN
AMABILE, ANTOIN
AMABILE, ANTOIN
AMABILE, ANTOIN
ANTOIN
ANTOIN
BEGUM, JAMILA
BUCARO, CONCETT
BEGUM, JAMILA
CEPEDA, TOMASA
COLEMAN, REGINA
COLEMAN, ALICIA
DIAZ, CARMEN
DIAZ, CARMEN
DIAZ, CARMEN
COLEMAN, LOIS
CERMAN, LOIS
CE REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 190912 4/06/12 355.74 I 000010 GUILDNET 190913 4/06/12 290.40 I 000010 GUILDNET 4/06/12 190914 000010 GUILDNET 190915 4/06/12 000010 GUILDNET 190916 3/30/12 GUILDNET 000010 GUILDNET 190917 4/06/12 000010 4/06/12 GUILDNET 190918 000010 190919 4/06/12 000010 GUILDNET 190920 4/06/12 000010 GUILDNET 190921 4/06/12 000010 GUILDNET 190922 4/06/12 000010 GUILDNET 190923 GUILDNET 4/06/12 000010 190924 4/06/12 000010 GUILDNET 190925 4/06/12 000010 GUILDNET 190926 4/06/12 000010 GUILDNET 190927 4/06/12 000010 GUILDNET 190928 4/06/12 000010 GUILDNET 190929 4/06/12 000010 GUILDNET 190930 4/06/12 000010 GUILDNET 190931 4/06/12 000010 GUILDNET 190932 4/06/12 GUILDNET 000010 190933 GUILDNET 4/06/12 000010 190934 GUILDNET 4/06/12 000010 190935 4/06/12 000010 GUILDNET 190936 3/23/12 000010 GUILDNET 190937 2/10/12 000010 GUILDNET 190938 4/06/12 000010 GUILDNET 190939 4/06/12 000010 GUILDNET 190940 4/06/12 000010 GUILDNET 190941 4/06/12 000010 GUILDNET 190942 4/06/12 000010 GUILDNET 190943 4/06/12 000010 GUILDNET 190944 4/06/12 GUILDNET 000010 190945 4/06/12 000010 GUILDNET 190946 4/06/12 000010 GUILDNET 190947 4/06/12 000010 GUILDNET 190948 4/06/12 000010 GUILDNET 190949 4/06/12 000010 GUILDNET 190950 4/06/12 000010 GUILDNET 190951 000010 GUILDNET 4/06/12 190952 4/06/12 000010 GUILDNET 190953 000010 GUILDNET 3/30/12 000010 GUILDNET 190954 4/06/12 190955 3/09/12 000010 GUILDNET 190956 4/06/12 000010 GUILDNET 190957 4/06/12 000010 GUILDNET 190958 4/06/12 000010 GUILDNET 190959 4/06/12 000010 GUILDNET 4/06/12 000010 GUILDNET 190960

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 2	- 32	25
SALES JRN	IL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		
				SALES REGISTER	?		BILL WEEK END	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190961	4/06/12	000010	GUILDNET	PENA, WALESKA	8.00		106.24	I	
190962	4/06/12	000010	GUILDNET	PENA, WALESKA	48.00		696.96	I	
190963	4/06/12	000010	GUILDNET	PEREZ, MARIA	24.00		348.48	I	
190964	4/06/12	000010	GUILDNET	PICHARDO, MARIA	54.00		772.92	I	
190965	4/06/12	000010	GUILDNET	PINILLA, VICTOR	35.75		512.89	I	
190966	4/06/12	000010	GUILDNET	PROANO, ALICIA	21.00		319.20	I	
190967	4/06/12	000010	GUILDNET	PROANO, BRUNO	4.00		53.12	I	
190968	4/06/12	000010	GUILDNET	PROANO, BRUNO	29.00		450.08	I	
190969	4/06/12	000010	GUILDNET	PRYCE, CLYDIA	16.00		222.40	I	
190970	4/06/12	000010	GUILDNET	RESTULA, VINCEN	20.00		290.40	I	
190971	4/06/12	000010	GUILDNET	RIVAS, GERTRUDI	12.00		174.24	I	
190972	4/06/12	000010	GUILDNET	RODRIGUEZ, HOLG	54.00		772.92	I	
190973	4/06/12	000010	GUILDNET	ROJAS, ANGEL	15.00		232.80	I	
190974	4/06/12	000010	GUILDNET	ROJAS, HAYDEE	20.00		310.40	I	
190975	4/06/12	000010	GUILDNET	RUBIANO, MARIA	20.00		290.40	I	
190976	4/06/12	000010	GUILDNET	SALJANIN, DILJA	61.00		875.80	I	
190977	4/06/12	000010	GUILDNET	SANCHEZ, ELIZAB	42.75		616.08	I	
190978	4/06/12	000010	GUILDNET	SHELTON, AGUEDA	21.00		304.92	I	
190979	4/06/12	000010	GUILDNET	SOMRAJ, UMILLA	12.00		174.24	I	
190980	4/06/12	000010	GUILDNET	TOROSSIAN, PARI	4.00		53.12	I	
190981	4/06/12	000010	GUILDNET	TOROSSIAN, PARI	24.00		348.48	I	
190982	4/06/12	000010	GUILDNET	VLAHOS, MARIE	30.00		423.20	I	
190983	4/06/12	000010	GUILDNET	VLAHOS, MARIE	28.00		406.56	I	
190984	4/06/12	000010	GUILDNET	WEISZ, KLARA	4.00		58.08	I	
190985	4/06/12	000010	GUILDNET	WEST, BALDWIN	20.00		290.40	I	
190986	4/06/12	000010	GUILDNET	WHITE, GLORIA	5.00		72.60	I	
190987	4/06/12	000010	GUILDNET	WHITLEY, MYRNA	20.00		290.40	I	
190988	4/06/12	000010	GUILDNET	YI, CARLOS	24.00		343.52	I	
190989	4/06/12	000010	GUILDNET	YIANTSELIS, VIR	7.00		1,312.32	I	
190990	4/06/12	000010	GUILDNET	ZARE, GLORIA	68.50		979.74	I	
190991	3/30/12	000010	GUILDNET	ZUMAETA, FANNY	67.00		951.76	I	
				REFERENCE PENA, WALESKA PENA, WALESKA PEREZ, MARIA PICHARDO, MARIA PINILLA, VICTOR PROANO, ALICIA PROANO, BRUNO PROANO, BRUNO PRYCE, CLYDIA RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, HAYDEE RUBIANO, MARIA SALJANIN, DILJA SANCHEZ, ELIZAB SHELTON, AGUEDA SOMRAJ, UMILLA TOROSSIAN, PARI TOROSSIAN, PARI TOROSSIAN, PARI VLAHOS, MARIE VLAHOS, MARIE VLAHOS, MARIE WEISZ, KLARA WEST, BALDWIN WHITE, GLORIA WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIR ZARE, GLORIA ZUMAETA, FANNY CUSTOMER	2,262.25	0.00	37,615.30		
				CATEGORY	2,262.25	0.00	37,615.30 37,615.30		

RUN DATE	E 04/11/12 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	- 32	26
SALES JE	RNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH F	IRST	
				SALES REGISTER			BILL WEEK ENI	DING	4/13/12
INVOICE;	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
190992	4/06/12	000122	HEALTH FIRST	BEGUM, MANWARA	28.00		472.64	I	
190993	4/06/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	48.00		810.24	I	
190994	11/04/11	000122	HEALTH FIRST	BOCHENEC, JOLAN	252.00		4,253.76	I	
190995	4/06/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	10.00		168.80	I	
190996	4/06/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
190997	4/06/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
190998	4/06/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
190999	4/06/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
191000	4/06/12	000122	HEALTH FIRST	DORNELLAS, STEL	24.00		405.12	I	
191001	4/06/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	28.00		472.64	I	
191002	4/06/12	000122	HEALTH FIRST	ESTEVES, JOSE	63.00		1,063.44	I	
191003	4/06/12	000122	HEALTH FIRST	FERGERSON, TINA	35.00		590.80	I	
191004	4/06/12	000122	HEALTH FIRST	FERRERA, FRANCI	15.00		253.20	I	
191005	4/06/12	000122	HEALTH FIRST	FONTANES, PEDRO	49.00		827.12	I	
191006	4/06/12	000122	HEALTH FIRST	FRANCISCO, RICH	55.00		928.40	I	
191007	4/06/12	000122	HEALTH FIRST	FRIAS, BARBARA	12.00		202.56	I	
191008	4/06/12	000122	HEALTH FIRST	HENRY, BRENDA	12.00		202.56	Ī	
191009	4/06/12	000122	HEALTH FIRST	HERRING, CHARLE	12.00		202.56	Ī	
191010	4/06/12	000122	HEALTH FIRST	KAUR. HARBANS	49.00		827.12	T	
191011	4/06/12	000122	HEALTH FIRST	LARA TOMASA	24 00		405 12	T	
191012	4/06/12	000122	HEALTH FIRST	LAZALA GLADYS	7 00		1 417 92	Ť	
191013	4/06/12	000122	HEALTH FIRST	I.ODEZ-RAMIREZ	77.00		1 299 76	T	
191014	4/06/12	000122	HEALTH FIRST	MACARENA SAHAR	45 00		759 60	Ť	
191015	4/06/12	000122	HEALTH FIRST	MARTIN ARIANA	4 00		67.52	T	
191016	4/06/12	000122	UEALTH FIRST	ΜΛΡΤΤΝ ΛΡΙΛΝΛ	4 00		67.52	T	
191017	4/06/12	000122	UEALIN FIRST	OPTI7 TIII A	25 00		422 00		
191017	4/06/12	000122	UPALTH FIRST	PODETCHEZ MARC	20.00		337 60		
191019	4/06/12	000122	UEALIN FIRST	DIIT7 TD CAMILET.	14 00		236.32		
191020	4/06/12	000122	DEVLLA ELDCA	CATAZAD TIIZ MA	16.00		270.32		
191020	4/06/12	000122	DEVILD EIDOL	CALAZAR, LUZ MA	40.00		270.00 675.20		
191021	4/06/12	000122	HEALTH FIRST	CALIUIANA VOLAN	40.00		675.20		
191022	4/06/12	000122	UEVILLI EIDOL	COLUEY DATELOT	25 00		422.00		
191023	4/06/12	000122	HEVILLI EIDOL	SPIVEI, PAIRICI	45.00 10 00		202 04	_ _	
191024	4/06/12	000122	UPWILL LIKOI	SI KUMAINE, CLA	18.UU		303.84		
191025	4/06/12 8/05/11	000122 000122	UPWILL LIKOI	SUKIEL, GERTRUD	∠ŏ.UU		4/2.04		
191026	8/05/11 9/30/11	000122	DEALIR FIRST	VEGA, GLUKIA	497.UU		5,U13.36	_ _	
		000122	HEALIH FIRSI	VEGA, GLORIA	147.00		2,481.30		
191028 191029	11/04/11 12/30/11	000122 000122	DEALIH FIKST	VEGA, GLUKIA	∠93.UU		4,945.84	_ _	
		000122	HEALTH FIRST	VEGA, GLUKIA	40.00		4,928.96	_ _	
191030	3/02/12	000122	HEALTH FIRST	VEGA, GLORIA	49.00		827.12	<u>+</u>	
191031	4/06/12	000122	HEALTH FIRST	VEGA, GLOKIA	40.00		6/5.20	Τ_	
191032	4/06/12	000122	HEALTH FIRST	WILLIAMS, RODNE	18.00		303.84	Τ	
				REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CHARITAR, RAMKA CORTES DE GALIN DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA HERRING, CHARLE KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA MARTIN, ARIANA ORTIZ, TULA RODRIGUEZ, MARG RUIZ, TULA RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VEGA, GLORIA VEGA	2,363.00	0.00	41,187.20		_

CATEGORY 2,363.00 0.00 41,187.20

RUN DATE	04/11/12	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE					PAGE 1	- 32	27
SALES JRN	ı∟ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG :	NY NY			NHP NEIGHBORE	HOOD I	IEALTH
				SALE	S REGISTER			BILL WEEK ENI	DING	4/13/12
INVOICE#	DATE	CIICT NO	CUSTOMER NAME		DEFEDENCE	HOLLDG	ጥላል ላለጥ	7 M∩TINT	TVD	SURPLUS
INVOICE#	DAIL	COSI NO	COSTOMER NAME		REFERENCE	HOURS	IAX AMI	AMOUNT	IIP	SURPLUS
191033	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	AHMED, UMARA	53.00		894.64	I	
191034	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	ARDITTO, PATRIC	30.00		506.40	I	
191035	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
191036	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
191037	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
191038	3/23/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	FLORES, MARITZA	20.00		337.60	I	
191039	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	FLORES, MARITZA	60.00		1,012.80	I	
191040	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	JONES, CYNTHIA	45.00		759.60	I	
191041	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	KHALIL, RASHAN	29.00		489.52	I	
191042	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	KHAN, FARUQUE	30.00		506.40	I	
191043	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	KROLL, KATHERIN	28.00		472.64	I	
191044	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
191045	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	MOSKOWITZ, RONA	35.50		599.24	I	
191046	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	OCASIO, VIRGINI	21.00		354.48	I	
191047	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
191048	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	SALVATO, MARY	56.00		945.28	I	
191049	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	SCOTT, MICHAEL	39.75		670.98	I	
191050	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
191051	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	WELLS, WYNORIA	12.00		202.56	I	
191052	4/06/12	000120	NEIGHBORHOOD HEALTH P	PROVIDERS	WILSON, SHERYL	26.00		438.88	I	
			NEIGHBORHOOD HEALTH POLIGHBORHOOD HEALTH POLIGHBORH		CUSTOMER	691.25	0.00	11,668.30		
					CATEGORY		0.00	11,668.30		

			YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 -	328
SALES JE	RNL # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHOLI	C/FIDELIS
				SALES REGISTER			BILL WEEK ENDI	NG 4/13/12
INVOICE#	† DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
191053	3/30/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	72.00		1,214.64	I
191054	4/06/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	40.00		674.80	I
191055	12/23/11	000126	NYS CATHOLIC/FIDELIS	CONNELLY, GEORG	1.00		90.00	I
191056	4/06/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45	I
191057	4/06/12	000126	NYS CATHOLIC/FIDELIS	GONZALEZ, ANA	1.00		90.00	I
191058	4/06/12	000126	NYS CATHOLIC/FIDELIS	KULESOVA, NINA	1.00		90.00	I
191059	4/06/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE BERGES, MARITZA CONNELLY, GEORG GIL, ALICIA M GONZALEZ, ANA KULESOVA, NINA LITMAN, GAIL	25.00		421.75	I
191060	4/06/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1.417.08	I
191061	4/06/12	000126	NYS CATHOLIC/FIDELIS	MULLOKONDOVA, S	11.00		185.57	I
191062	12/02/11	000126	NYS CATHOLIC/FIDELIS	OLIVAPUIG, CARM	1.00		80.00	I
191063	4/06/12	000126	NYS CATHOLIC/FIDELIS		54.00		910.98	I
191064	11/11/11	000126	NYS CATHOLIC/FIDELIS		1.00		80.00	I
191065	4/06/12	000126	NYS CATHOLIC/FIDELIS	PURNELL, ROSE	28.00		472.36	I
191066	4/06/12	000126	NYS CATHOLIC/FIDELIS		40.00		674.80	I
191067	11/11/11	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY MICH	1.00		80.00	I
191068	4/06/12	000126	NYS CATHOLIC/FIDELIS		40.00		674.80	I
191069	4/06/12	000126	NYS CATHOLIC/FIDELIS	SAPLITZKI BORI	1 00		90.00	Ī
191070	4/06/12	000126		SZE BECKY	33 00		556 71	Ī
191071	4/06/12	000126	NYS CATHOLIC/FIDELIS NYS CATHOLIC/FIDELIS	VARGAS RACHEL	62 00		1 045 94	I
101071	1/00/12	000120	NIS CHIMODIC, HIDDED					
				CUSTOMER	531.00	0.00	9,439.88	
				CATEGORY	531.00	0.00	9,439.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - UHC UNITED HEA BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
191072 191073 191074	4/06/12 4/06/12 4/06/12	000128 000128 000128	UNITED HEALTH CARE UNITED HEALTH CARE UNITED HEALTH CARE	MUSHAYEV, BORIS SAFOS, PATRA YUSUPOV, PULAT	41.00 56.00 28.00		703.56 960.96 480.48	I I
				CUSTOMER	125.00	0.00	2,145.00	
				CATEGORY	125.00	0.00	2,145.00	

RUN DATE SALES JRN	- , ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 EHP EMBLEM H	- 33	0
Brilles orav	1 1 0270	100 001	BOWNIBIDE CITIMIDE	SALES REGISTE	E R		BILL WEEK EN		4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191075	4/06/12	000114	EMBLEM HEALTH	COPE, WILLIE	84.00		1,176.00	I	
191076	4/06/12	000114	EMBLEM HEALTH	COPELAND, ELISE	24.00		342.00	I	
191077	4/06/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00	I	
191078	4/06/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	35.00		490.00	I	
191079	4/06/12	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,176.00	I	
191080	4/06/12	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		168.00	I	
191081	4/06/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	48.00		672.00	I	
				CUSTOMER	307.00	0.00	4,304.00		
				CATEGORY	307.00	0.00	4,304.00		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 33	31
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			HIP HEALTH II	NSURAN	ICE PLAN
				SALE	S REGISTER			BILL WEEK EN	DING	4/13/12
TATTOTOT	DAME	CIICE NO	CLICHOMED NAME		DEEDENGE	HOHDG	masz amm	AMOTINE	mxD.	GIIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191082	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	AHMAD, AMATUL	14.00		236.32	I	
191083	4/06/12	000136	HEALTH INSURANCE PLAN		BORLAZA, FRANCI	48.00		810.24	Ī	
191084	4/06/12	000136	HEALTH INSURANCE PLAN		CIPRIAN, JACQUE	8.00		135.04	Ī	
191085	4/06/12	000136	HEALTH INSURANCE PLAN		DE JESUS, TIBUR	63.00		1,063.44	Ī	
191086	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	52.00		877.76	I	
191087	4/06/12	000136	HEALTH INSURANCE PLAN		LOYOLA, MARIA	50.00		844.00	I	
191088	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	34.50		582.36	I	
191089	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	SHAH, HANSIKABE	5.00		84.40	I	
191090	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	12.00		202.56	I	
191091	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	16.00		270.08	I	
191092	4/06/12	000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	12.00		202.56	I	
					CUSTOMER	314.50	0.00	5,308.76		
					CATEGORY	314.50	0.00	5,308.76		

RUN DATE	04/11/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 33	32
SALES JRN	ъ # 0276	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HPS HEALTH PI	JUS	
				SALES REGISTER			BILL WEEK ENI	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191093	4/06/12	000138	HEALTH PLUS PHSP, INC	DENNISON, KELVI	20.00		340.00	I	
191094	4/06/12	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	30.00		510.00	I	
191095	4/06/12	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	25.00		425.00	I	
191096	4/06/12	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	18.00		306.00	I	
				CUSTOMER	93.00	0.00	1,581.00		
				CATEGORY	93.00	0.00	1,581.00		

RUN DATE	04/11/12 -	- SUP SUNN	IYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3	33
SALES UKIN	ш # 02/6	TOC 001	SUMMISIDE CITIWIDE				MET METER ENDING	4/13/12
				SALES REGISIER			BILL MEEK ENDING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
191097	4/06/12	000130	METROPLUS HEALTH	ABBAS, SENOWARA	84.00		1,440.60 I	
191098	4/06/12	000130	METROPLUS HEALTH	ANDERSON, BETH	42.00		720.30 I	
191099	4/06/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20 I	
191100	3/30/12	000130	METROPLUS HEALTH	BEDOYA, MONICA	42.00		720.30 I	
191101	2/03/12	000130	METROPLUS HEALTH	BESANT, NAOMI	6.00		102.90 I	
191102	4/06/12	000130	METROPLUS HEALTH	BRACERO, HELEN	56.00		960.40 I	
191103	4/06/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS	72.00		1,234.80 I	
191104	4/06/12	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25 I	
191105	4/06/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	10.00		171.50 I	
191106	4/06/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	57.00		977.55 I	
191107	4/06/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	133.00		2,280.95 I	
191108	4/06/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00 I	
191109	3/30/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	12.00		205.80 I	
191110	4/06/12	000130	METROPLUS HEALTH	GALAS, TERESA	35.00		600.25 I	
191111	4/06/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00 I	
191112	4/06/12	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65 I	
191113	4/06/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA	56.00		960.40 I	
191114	4/06/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	24.00		411.60 I	
191115	4/06/12	000130	METROPLUS HEALTH	RYALS, CHARLES	12.00		205.80 I	
191116	3/23/12	000130	METROPLUS HEALTH	SANTORO, MATTHE	90.00		1,543.50 I	
191117	4/06/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20 I	
191118	4/06/12	000130	METROPLUS HEALTH	VALLE, BLASINA	16.00		274.40 I	
191119	4/06/12	000130	METROPLUS HEALTH	VICEDO, FREDELI	6.00		102.90 I	
				ABBAS, SENOWARA ANDERSON, BETH ARIAS, NORA BEDOYA, MONICA BESANT, NAOMI BRACERO, HELEN BRIGGS, LOUIS CHAPMAN, ESTREL CORDERO, ROSEND CORDERO, ROSEND DAVIS, ANGIE DEWANJEE, MIRA DURHAM, CYNTHIA GALAS, TERESA MURDOCK, GERTRU PERSAD, USHA PUCHUELA, MARIA RAMPERSAID, ALI RYALS, CHARLES SANTORO, MATTHE SHUMON, NUK-FNU VALLE, BLASINA VICEDO, FREDELI	995.00	0.00	17,064.25	
						0.00	17,064.25	

RUN DATE (YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E				PAGE 1 WEL WELCARE C BILL WEEK END		34 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191120 191121 191122	4/06/12 3/30/12 4/06/12	000124 000124 000124	WELCARE OF NEW YORK, WELCARE OF NEW YORK, WELCARE OF NEW YORK,	INC.	GENAO, DANIELA MARTINEZ, MARIA RAMIREZ, ALIDA	54.75 65.75 62.75		941.70 1,130.90 1,079.30	I I I	
					CUSTOMER	183.25	0.00	3,151.90		
					CATEGORY	183.25	0.00	3,151.90		

			YSIDE CITYWIDE						- 335
SALES JRN	L # 0276	LOC 001		REG N				NPS NY PRESBY	
				SALES	REGISTER			BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
									_
191123	4/06/12	000134	NY-PRESBYTERIAN SYSTEM	I SELECT	KARASSAVIDIS, A	35.00		600.60	I
					CATEGORY	35.00	0.00	600.60	

RUN DATE 04/11/ SALES JRNL # 02		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - AMG AMERIGROUP BILL WEEK ENDING	336 4/13/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
191124 4/06/ 191125 4/06/ 191126 4/06/ 191127 4/06/	12 000132 12 000132	AMERIGROUP AMERIGROUP AMERIGROUP AMERIGROUP	FERNANDEZ, NORK GUERRA, LORRAIN HAWKINS S, MA PRUITT, JOHNNY	42.00 70.00 65.30 4.00		708.54 I 1,180.90 I 1,101.61 I 67.52 I	
			CUSTOMER	181.30	0.00	3,058.57	
			CATEGORY	181.30	0.00	3,058.57	

	04/11/12 - L # 0276		YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			PAGE 1 PAR PRIVATE	- 33	37
SALES UKN	L # 0270	LOC UUI	SOUNTSIDE CITIVIDE REG S A L E				BILL WEEK END	OING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191128 191129 191130 191131 191132 191133 191134	4/06/12 4/06/12 4/06/12 4/06/12 4/06/12 4/06/12	000002 000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES	BURY, GLADYS GRECH, JANE MARINOS, IRENE MAZZA, ROLAND MORA, MARIA MORA, PAULA ROJO, MANUEL			58.00 79.75 58.00 58.00 87.00 43.50 58.00	I I I I I	
191134	4/00/12	000002	SUMNISIDE COMMUNITI SERVICES	CUSTOMER	30.50	0.00	442.25		
191135	4/06/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I	
191136 191137	4/06/12 4/06/12	000049 000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE MORSHELINA, NAS	25.00 12.00		344.75 165.48	I	
				CUSTOMER	37.00	0.00	510.23		
191138 191139	4/06/12 4/06/12	000069 000069	AMY L. WELTMAN AMY L. WELTMAN	LUSKIND, FRANCE LUSKIND, FRANCE	1.00 6.00		204.00 1,134.00	I	
				CUSTOMER	7.00	0.00	1,338.00		
191140	4/06/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	102.50	0.00	2,724.48		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 CAS CHILDREN BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191141 191142 191143 191144 191145 191146 191147	4/06/12 4/06/12 4/06/12 4/06/12 4/06/12 4/06/12 4/06/12	000088 000088 000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI JOHNSON, CAMRYN JOHNSON, CAMRYN SALAS, HELENA SALAS, HELENA	25.00 6.00 6.00 3.75 17.00 4.00 24.00		387.50 93.00 93.00 58.13 263.50 62.00 372.00	I I I I I I	
				CUSTOMER	85.75	0.00	1,329.13		
				CATEGORY	85.75	0.00	1,329.13		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY S A L E S	NY REGISTER			PAGE 1 - PAR PRIVATE BILL WEEK ENDIN	339 IG 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
191148	4/06/12	000098	MILDRED PANSE	P	ANSE, MILDRED	20.00		310.00	<u>.</u> -
					CATEGORY	20.00	0.00	310.00	

FE 04/11/12 - SUP SUNNYSIDE CITYWIDE JRNL # 0276 LOC 001 SUNNYSIDE CITYWI				PAGE 1 - 340 ELD ELDERSERVEHEALTH	
E# DATE CUST NO CUSTOMER NAME	SALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDING 4/13/12 AMOUNT TYP SURPLUS	
4/06/12 000101 ELDERSERVEHEALTH	BEAN, ELMIRA	25.00	TAX ANI	356.25 I	,
	CATEGORY	25.00		 356.25	_

RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY								- 341
Brilles orde	1 0270	100 001	SOUNTEDE CITIVIDE	SALES REGISTER			PAR PRIVATE BILL WEEK END	ING 4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
191150 191151	4/06/12 4/06/12	000143 000143	ETTORE COPPOLA ETTORE COPPOLA	COPPOLA, ETTORE COPPOLA, ETTORE	5.00 15.00		85.00 232.50	I
				CUSTOMER	20.00	0.00	317.50	
191152 191153	4/06/12 4/06/12	000145 000145	LARRY EISENBERG LARRY EISENBERG	BERGER, TESS BERGER, TESS	9.00 44.00		153.00 695.50	I I
				CUSTOMER	53.00	0.00	848.50	
				CATEGORY	73.00	0.00	1,166.00	

RUN DATE 04/ SALES JRNL #	/11/12 - SUP SUNN ‡ 0276 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 CCM COMPREHEN BILL WEEK END	SIVE CARE MGMT
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
191155 4/	/06/12 000150 /06/12 000150 /06/12 000150	COMPREHENSIVE CARE MANAGE COMPREHENSIVE CARE MANAGE COMPREHENSIVE CARE MANAGE	EMENT ROSARIO, CELEST	20.00 6.00 29.00		282.00 84.60 408.90	I I I
			CUSTOMER	55.00	0.00	775.50	
			CATEGORY	55.00	0.00	775.50	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 PAR PRIVATE BILL WEEK EN	- 3	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT		SURPLUS
191157	4/06/12	000151	MICHAEL SIANO	SIANO, ANDREW	16.00		216.00	I	
191158	4/06/12	000153	PATRICIA RUECKHER	RUECKHER, PATRI	15.00		232.50	I	
191159 191160 191161	3/30/12 4/06/12 4/06/12	000155 000155 000155	ROSEMARY JIBAJA ROSEMARY JIBAJA ROSEMARY JIBAJA	JIBAJA, ROSEMAR JIBAJA, ROSEMAR JIBAJA, ROSEMAR	12.00 24.00 144.00		186.00 408.00 2,268.00	I I I	
				CUSTOMER	180.00	0.00	2,862.00		
191162 191163	4/06/12 4/06/12	002215 002215	KEITH SALMON KEITH SALMON	LAWRANCE, LILLA LAWRANCE, LILLA	4.00 16.00		68.00 254.00	I I	
				CUSTOMER	20.00	0.00	322.00		
191164	4/06/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
191165	4/06/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I	
191166	4/06/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00		337.50	I	
191167 191168	4/06/12 4/06/12	006337 006337	STEPHEN EDEL STEPHEN EDEL	EDEL, CANDACE EDEL, CANDACE	8.00 73.00		136.00 1,143.50	I I	
				CUSTOMER	81.00	0.00	1,279.50		
191169 191170	4/06/12 4/06/12	007521 007521	DOROTHY GILBERT DOROTHY GILBERT	GILBERT, DOROTH GILBERT, DOROTH	5.00 30.00		85.00 465.00	I I	
				CUSTOMER	35.00	0.00	550.00		
191171	4/06/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I	
191172	4/06/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I	
191173 191174	4/06/12 4/06/12	007883 007883	ABBAMONTE, RUTH ABBAMONTE, RUTH	ABBAMONTE, RUTH ABBAMONTE, RUTH	2.00		34.00 65.00	I I	
				CUSTOMER	6.00	0.00	99.00		
191175 191176	4/06/12 4/06/12	009498 009498	LOUIS LE NOACH LOUIS LE NOACH	LENOACH, LOUIS LENOACH, LOUIS	3.00		51.00 97.50	I I	
				CUSTOMER	9.00	0.00	148.50		
191177	4/06/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	9.00		139.50	I	
191178	4/06/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	6.00		93.00	I	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NY NY			PAGE 2 PAR PRIVATE	- 3	44
SALES UKN	ш # 0270	LOC 001	S A L E		R		BILL WEEK EN	DING	4/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
191179 191180	4/06/12 4/06/12	009752 009752	PETER CAPORASO PETER CAPORASO	CAPORASO, VINCE CAPORASO, VINCE	12.00 12.00		204.00 204.00	I I	
				CUSTOMER	24.00	0.00	408.00		
191181	4/06/12	009788	ARIADNI GLYPTIS	GLYPTIS, ARIADN	3.00		46.50	I	
191182	4/06/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	3.75		58.13	I	
191183	4/06/12	009857	ALZHEIMER'S ASSOCIATION, NYC	MARTIN, RUTH	8.00		124.00	I	
191184	4/06/12	009932	JOSEPH SCANDARIATO	SCANDARIATOR, J	5.50		85.26	I	
191185	4/06/12	010007	DOROTHY TUCCI	TUCCI, DOROTHY	6.00		97.50	I	
191186	4/06/12	010008	LOUIS TUCCI	TUCCI, LOUIS	6.00		97.50	I	
191187	4/06/12	010195	ROBERT MURAYAMA-GREENBAUN	GREENBAUN, MASA	6.00		93.00	I	
				- CATEGORY	513.25	0.00	8,063.89		
				LOCATION	23,003.42	0.00	359,155.76		
				COMPANY	23,003.42	0.00	359,155.76		

RUN DATE 04/11/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 345
SALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

ALES JRNL # 0276 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
S A L E S R E G I S T E R BILL WEEK ENDING 4/13/12

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

THIS PAGE INTENTIONALLY BLANK