RUN DATE 06/13/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 6/15/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP CUSTOMER NAME

REFERENCE

BANKS, ANASTAZJ

32.00

SENIOR HEALTH PARTNERS

BROOKS, NATALIE

4.00

SENIOR HEALTH PARTNERS

BROOKS, NATALIE

22.00

SENIOR HEALTH PARTNERS

CARRILLO, MARIA

SENIOR HEALTH PARTNERS

COLON, RAYMUNDA

SENIOR HEALTH PARTNERS

GHILIOTTY, FLOR

SENIOR HEALTH PARTNERS

GRAFSTEIN, LILL

7.00

SENIOR HEALTH PARTNERS

GRAFSTEIN, LILL

7.00

SENIOR HEALTH PARTNERS

GUTIERREZ, LUCI

16.00

SENIOR HEALTH PARTNERS

GUTIERREZ, LUCI

24.00

SENIOR HEALTH PARTNERS

HARIDIN, KHAMAT

33.00

SENIOR HEALTH PARTNERS

HARIDIN, RAMDIA

135.00

SENIOR HEALTH PARTNERS

HARIDIN, RAMDIA

135.00

SENIOR HEALTH PARTNERS

HERNANDEZ, FRAN

30.00

SENIOR HEALTH PARTNERS

HERNANDEZ, FRAN

30.00

SENIOR HEALTH PARTNERS

HERNANDEZ, FRAN

30.00

SENIOR HEALTH PARTNERS

MOROCHO, MANUEL

18.00

SENIOR HEALTH PARTNERS

SENIOR HEALTH PARTNERS

SIMON, LUPE

4.00

SENIOR HEALTH PARTNERS

SIMON, LUPE

8.00

SENIOR HEALTH PARTNERS

SIMON, LUPE

8.00

SENIOR HEALTH PARTNERS

SIMON, LUPE

8.00

SENIOR HEALTH PARTNERS

VASQUEZ, CORNEL

8.00

SENIOR HEALTH PARTNERS

VASQUEZ, CORNEL

8.00

SENIOR HEALTH PARTNERS

VASQUEZ, CORNEL

8.00

SENIOR HEALTH PARTNERS

VIDOT-LINARES,

5.00

SENIOR HEALTH PARTNERS

VIDOT-LINARES,

30.00

SENIOR HEALTH PARTNERS

VIDOT-LINARES,

30.00 SURPLUS 456.00 I 198006 6/08/12 000082 198007 6/01/12 000082 57.00 I 313.50 I 198008 6/08/12 000082 198009 6/08/12 000082 399.00 198010 6/08/12 000082 498.75 114.00 198011 6/08/12 000082 198012 6/08/12 000082 57.00 198013 6/08/12 000082 384.75 198014 6/08/12 000082 1,400.00 198015 6/01/12 000082 228.00 198016 6/01/12 000082 342.00 198017 6/08/12 000082 470.25 198018 6/08/12 000082 1,923.75 198019 6/08/12 000082 427.50 198020 6/08/12 000082 57.00 198021 6/08/12 256.50 000082 198022 6/08/12 285.00 000082 198023 6/08/12 000082 356.25 198024 57.00 6/01/12 000082 198025 6/08/12 000082 114.00 198026 6/08/12 000082 570.00 198027 6/08/12 000082 114.00 198028 5/25/12 000082 21.38 198029 6/08/12 000082 427.50 198030 6/08/12 000082 171.00 198031 6/08/12 000082 57.00 I \_\_\_\_\_ -----CUSTOMER 579.50 0.00 9,558.13

CATEGORY 579.50 0.00

9,558.13

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	2
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			S	SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198032	6/08/12	000008	VISITING NURSE SERVICE	ABINANTI, IRENE	56.00		816.48	I	
198033	6/08/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

			YSIDE CITYWIDE				PAGE 1 -	3
SALES JRN	L # 0285	LOC 001		REG NY NY			ADU ADULT	6/15/10
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198034	6/08/12	800000	VISITING NURSE SERVICE	ACOSTA, ALBERTO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1	_	4
SALES JRN	⊥ # UZ85	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGIST	E R		VCP CHOICE LE BILL WEEK ENI		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198035	6/08/12	000008	VISITING NURSE SERVI	E ADAMES, OLGA	25.00		364.50	I	
198036	6/08/12	000008	VISITING NURSE SERVIO	E ADAMES, RICARDO	35.00		510.30	I	
198037	6/08/12	800000	VISITING NURSE SERVIO	E ADAMS, MYRIAM	64.50		940.42	I	
198038	6/08/12	000008	VISITING NURSE SERVIO	E ADUN, JEANETTE	55.50		809.19	I	
198039	6/08/12	800000	VISITING NURSE SERVI	E AFZAL, AMIR	4.00		58.32	I	
				CUSTOMER	184.00	0.00	2,682.73		
				CATEGORY	184.00	0.00	2,682.73		

RUN DATE ( SALES JRNI		SUP SUNN LOC 001		REG NY NY			PAGE 1 - ADU ADULT	5
	D.100	G11GE 110		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198040	6/08/12	000008	VISITING NURSE SERVICE	AGUILAR, RAFAEL	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	6
SALES JRI	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198041	6/08/12	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		656.10 I	
				CATEGORY	45.00	0.00		

	06/13/12 - NL # 0285			REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	7 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198042	6/08/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE 06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8
SALES JRNL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK END	OING 6/15/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
198043 6/01/12	000008	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I
198044 6/08/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	35.00		510.30	I
			CUSTOMER	40.00	0.00	583.20	
			 CATEGORY	40.00	0.00	583.20	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	9
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S A	ALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198045	6/08/12	800000	VISITING NURSE SERVICE	ALFEREZ, GLORIA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	10
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198046	6/08/12	800000	VISITING NURSE SERVICE	ALVAREZ, NAZARE	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1: VCP CHOICE LHCSA	1
DALLS OW	11 # 0203	HOC 001		SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198047 198048	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ANANIA, GLYGERI ANDINO, ESTEBAN	20.00		291.60 I 320.76 I	
				CUSTOMER	42.00	0.00	612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 12
Bridde Grav	L    0203	100 001		SALES REGISTER			BILL WEEK END	ING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
198049 198050	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	83.50 56.00		1,217.44 816.48	I I
				CUSTOMER	139.50	0.00	2,033.92	
				CATEGORY	139.50	0.00	2,033.92	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	13
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A.
			:	SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	P SURPLUS
198051	6/08/12	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

			YSIDE CITYWIDE					14
SALES JRN	L # 0285	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198052	6/08/12	800000	VISITING NURSE SERVICE	ANGULO, ELCY	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198053	6/08/12	800000	VISITING NURSE SERVICE	ANSELMI, PETER	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

RUN I	DATE 06/13/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	16
SALE	S JRNL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1980	6/08/12	800000	VISITING NURSE SERVICE	ANUT, ALICE	61.00		889.38 I	
				CATEGORY	61.00	0.00	 889.38	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	17
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198055	6/08/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	18 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198056	6/08/12	800000	VISITING NURSE SERVICE	APPELL, LAWRENC	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	19	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	SA	
				SALES REGISTER			BILL WEEK ENDIN	NG 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS	
198057	6/08/12	000008	VISITING NURSE SERVICE	ARIAS, MAGDALEN	42.50		619.65	I	
				CATEGORY	42.50	0.00	619.65		

			YSIDE CITYWIDE					- 2	20
SALES JRN	IL # 0285	LOC 001		REG NY NY			ADU ADULT		6 / 1 5 / 1 0
			2	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198058	6/08/12	000008	VISITING NURSE SERVICE	ASADOURIAN, COR	23.00		335.34	I	
198059	6/08/12	800000	VISITING NURSE SERVICE	ASH, MARIE	12.00		174.96	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 LTC NURSING	_	21 'O WALLS (LT
			\$	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198060 198061	6/01/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ASHLEY, CLYDE ASHLEY, CLYDE	7.00 55.00		102.06 801.90	I	
130001	0,00,12	00000	VIDITING NORDE BERVICE	CUSTOMER	62.00	0.00	903.96		
				COSTOMER	02.00	0.00	203.20		
				CATEGORY	62.00	0.00	903.96		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	22
SALES JRN	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198062	6/08/12	800000	VISITING NURSE SERVICE	AVILA, ENIDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	23
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198063	6/01/12	000008	VISITING NURSE SERVICE	AZAD, ABUL	4.00		58.32	I	
198064	6/08/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	20.00		291.60	I	
				CUSTOMER	24.00	0.00	349.92		
				COSTONER	24.00	0.00	347.72		
				CATEGORY	24.00	0.00	349.92		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	24
			\$	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198065	6/08/12	800000	VISITING NURSE SERVICE	BADILLO, JOVITA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
				SALES REGISTER			BILL WEEK ENDING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
198066	6/08/12	800000	VISITING NURSE SERVICE	E BAEZ, JUAN	28.00		408.24 I
							400 04
				CATEGORY	28.00	0.00	408.24

RUN DATE 06 SALES JRNL		UP SUNNY OC 001	SIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	OMEW/O WALLS (LT
INVOICE#	DATE C	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP SURPLUS
198068 6 198069 6	5/08/12 0 5/08/12 0	80000 80000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BALLAS, VIOLA BAQUERIZO, ANNA BARDEANU, VICTO BATTLE, JEANETT	30.00 56.00 44.75 49.25		437.40 816.48 652.46 718.07	I I I
				CUSTOMER	180.00	0.00	2,624.41	
				CATEGORY	180.00	0.00	2,624.41	

			YSIDE CITYWIDE					27
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198071	6/08/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	6.00		87.48 I	
				 CATEGORY	6.00	0.00		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		28
SALLS UKN	ш # 0205	TOC 001		SALES REGISTER			BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198072 198073	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		151.00 6.00		2,201.58 87.48	I	
				CUSTOMER	157.00	0.00	2,289.06		
				CATEGORY	157.00	0.00	2,289.06		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	29
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDII	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198074	6/01/12	000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	10.00		145.80	I
198075	6/08/12	800000	VISITING NURSE SERVICE	BETHUNE, HARRYD	24.75		360.86	I
198076	6/08/12	800000	VISITING NURSE SERVICE	BHAWNANI, BISHU	30.00		437.40	I
				CUSTOMER	64.75	0.00	944.06	
				CATEGORY	64.75	0.00	944.06	

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	30	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A	
			S	SALES REGISTER			BILL WEEK ENDIN	G 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
198077	6/01/12	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	4.00		58.32 I		
				CATEGORY	4.00	0.00	58.32		

RUN DATE 06/1 SALES JRNL #	13/12 - SUP SUNN 0285 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	31
BALLS GIAVE #	0203 100 001		SALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	08/12 000008 25/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BHULLA, JIWAN BIANCO HOPKINS,	14.00 4.00		204.12 58.32	I I
198080 6/0	08/12 000008	VISITING NURSE SERVICE	BIANCO HOPKINS,	16.00		233.28	I 
			CUSTOMER	34.00	0.00	495.72	
			CATEGORY	34.00	0.00	495.72	

- 1		06/13/12 - L # 0285		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOME	32 w/o wat.t.g /t.t
	BILLED CITY	L    0205	100 001		SALES REGISTER			BILL WEEK ENDING	•
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198081	6/08/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
ı					CATEGORY	40.00	0.00	583.20	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33
SALES JRN	ъ # 0285	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198082	6/08/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	21.50		313.47 I	
				CATEGORY	21.50	0.00	313.47	

			YSIDE CITYWIDE	DEG NV NV			-	34
SALES JRN	L # U285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198083 198084	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- · · ·	16.00 41.75		233.28 I 608.72 I	
				CUSTOMER	57.75	0.00	842.00	
				CATEGORY	57.75	0.00	842.00	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	35
SALES JRN	1L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198085	6/08/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE				PAGE 1 -	36
SALES JRN	IL # 0285	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOME BILL WEEK ENDING	•
			_				DILL WELK ENDING	0/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198086	6/08/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

			YSIDE CITYWIDE	DDG 1997			-	37
SALES JRN	L # 0285	TOG 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198087	6/08/12	800000	VISITING NURSE SERVICE	BOOKAS, ODYSEAS	22.00		320.76 I	
				CATEGORY	22.00	0.00	320.76	

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	38
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL H	IEALTH
			Ş	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198088	6/08/12	800000	VISITING NURSE SERVICE	BORSARI, ANTOIN	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

			YSIDE CITYWIDE				PAGE 1 -	39
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				SALES KEGISIEK			BILL MEEK ENDING	3 0/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
198089	6/08/12	800000	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE (	06/13/12 -	SUP SUNN	IYSIDE CITYWIDE				PAGE 1 -	40
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	EW/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
198090	6/08/12	800000	VISITING NURSE SERVICE	E BOYADJIAN, ZARO	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SALES JRN	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
				SALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198091	6/08/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	44.25		645.17 I	
				CATEGORY	44.25	0.00	645.17	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 42	
SALES JRN	ъ # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
198092	6/08/12	800000	VISITING NURSE SERVICE	BROWN, BETTY	12.75		185.90 I	
				CATEGORY	12.75	0.00	185.90	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	43	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A	
			5	SALES REGISTER			BILL WEEK ENDIN	G 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
198093	6/08/12	800000	VISITING NURSE SERVICE	BURGOS, RAFAELA	3.00		43.74 I		
				CATEGORY	3.00	0.00	43.74		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198094	6/08/12	000008	VISITING NURSE SERVICE	BURNS, MARGARET	32.00		466.56 I	
				CATEGORY	32.00	0.00	466.56	

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 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198095	6/08/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	46
SALES JRN	L # 0285	LOC 001		REG NY NY			LAD NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
198096	6/08/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	47
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			5	SALES RE	GISTER		BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERE	NCE HOURS	TAX AMT	AMOUNT T	YP SURPLUS
INVOICE	DAIL	CODI NO	CODIONER NAME	KEI EKE.	NCE HOORS	IAM ANI	AMOUNT	II BOILI HOB
198097	6/08/12	800000	VISITING NURSE SERVICE	CABA, P	URA 8.00		116.64	I
				C.	ATEGORY 8.00	0.00	116.64	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT		48
INVOICE#	DATE	CUST NO	CUSTOMER NAME	ALES REGISTER REFERENCE	HOURS	TAX AMT	BILL WEEK ENDI	ING	6/15/12 SURPLUS
198098	6/08/12	000008	VISITING NURSE SERVICE	CALABRO, JOSEPH	69.00		1,006.02		
				CATEGORY	69.00	0.00	1,006.02		

			LOC 001		REGNY NY SALES REGISTER			PAGE VCP CHOICE I BILL WEEK EI	LHCSA	
IN	VOICE#	DATE	CUST NO	-	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
19	8099	6/08/12	800000	VISITING NURSE SERVICE	CALDERON, FRANC	44.00		641.52	I	
					CATEGORY	44.00	0.00	641.52		

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 HOA HOSPICE A BILL WEEK END	DULT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
198100	6/08/12	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54	I
				CATEGORY	63.00	0.00	918.54	

			YSIDE CITYWIDE				PAGE 1 -	51
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198101	6/08/12	800000	VISITING NURSE SERVICE	CAMARGO, BELISA	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	52
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIL	COSI NO	COSTOMER NAME	KELEKENCE	CAUUN	IAA AMI	AMOUNI IIP	SURPLUS
198102	6/08/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198103	6/08/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE					PAGE	1 -	54	
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY S A L E S R	NY EGISTEI	5		ADU ADULT BILL WEEK I	ENDING	6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUN	TYP	SURPLUS	
198104	6/08/12	800000	VISITING NURSE SERVICE	CANO,	GLORIA	15.00		218.70	) I		
					CATEGORY	15.00	0.00	218.70	)		

RUN DATE (	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	55
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			\$	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198105	6/08/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,224.72	I	
				CATEGORY	84.00	0.00	1,224.72		

			YSIDE CITYWIDE	DDG 1997			PAGE 1 -	56
SALES JRN	L # 0285	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198106	6/08/12	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
				CAMPRODY.				
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 -	57
SALES JRN	L # U285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198107 198108	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARDOSO, ORLAND CARDOZA, ANAIDA	56.00 30.00		816.48 I 437.40 I	
	0,00,12		VIDITING NONDE DERVIOE	CUSTOMER	86.00	0.00	1,253.88	
				CATEGORY	86.00	0.00	1,253.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE		8
				SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198109 198110	5/18/12	800000	VISITING NURSE SERVICE		6.00		87.48	I	
198110	6/08/12	000008	VISITING NURSE SERVICE	CARRALERO, ROSA	42.00		612.36		
				CUSTOMER	48.00	0.00	699.84		
				CATEGORY	48.00	0.00	699.84		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	59
011220 0141	_    0203	200 001		ALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198111	6/08/12	800000	VISITING NURSE SERVICE	CARRENO, CRISTI	21.25		309.83 I	
				CATEGORY	21.25	0.00	309.83	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 60	
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198112	6/08/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE					61
SALES JRN	NL # 0285	LOC 001		REG NY NY			VCP CHOICE LHC	
				SALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198113	6/08/12	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60	I
				CATEGORY	20.00	0.00	291.60	

 RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 6 ADU ADULT	62
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198114	6/08/12	800000	VISITING NURSE SERVICE	CELIO, MARION	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	63
SALES JRN	ъ # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			S	SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198115	6/08/12	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	64	
ı	SALES JRN	L # 0285	LOC 001		REG NY NY			LTC NURSING HOMEW		
ı				:	SALES REGISTER			BILL WEEK ENDING	6/15/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	198116	6/08/12	000008	VISITING NURSE SERVICE	CHAPPLE, VICKIE	17.50		255.16 I		
ı					CATEGORY	17.50	0.00	255.16		

SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG N	Y NY					
I DIMED CITIED IN COOK TOO TOO IN TOO IN				VCP CHOICE	LHCSA	
SALES	REGISTER			BILL WEEK E	NDING	6/15/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198117 6/08/12 000008 VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40	I	
	CATEGORY	30.00	0.00	437.40		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	66
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				ME W/O WALLS LT
			5	SALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198118	6/08/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	1.00		14.58	I
				CATEGORY	1.00	0.00	14.58	

ı	RUN DATE (	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	67
ı	SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	Ĺ
ı				:	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198119	6/08/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	57.50		838.35 I	
					CATEGORY	57.50	0.00	838.35	

ı	RUN DATE (	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	68
ı	SALES JRNI	L # 0285	LOC 001		REG NY NY			LTC NURSING HOMEW	•
ı				:	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198120	6/08/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	35.00		510.30 I	
					CATEGORY	35.00	0.00	510.30	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	69
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			5	SALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198121	6/08/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

- 1				YSIDE CITYWIDE				PAGE 1 - 70	
	SALES JRN.	L # 0285	TOC 001		REGNY NY SALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 6/15/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
	198122	6/08/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40 I	
					CATEGORY	30.00	0.00	437.40	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 7	71
SALES JRN	L # 0285	LOC 001		REG NY NY			VCP CHOICE L		
			:	SALES REGISTE	R		BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198123	6/08/12	800000	VISITING NURSE SERVICE	CHOUDHURY, SHAM	55.25		805.55	I	
198124	6/08/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
198125	6/08/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	29.75		433.76	I	
				CUSTOMER	125.00	0.00	1,822.51		
				CATEGORY	125.00	0.00	1,822.51		

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198126	6/08/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	56.00		816.48 I	
				CATEGORY	56.00	0.00	 816.48	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	73
	- "			SALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198127	6/08/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		58.32 I	
				CATEGORY	4.00	0.00	 58.32	
				CALEGORI	4.00	0.00	30.34	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	D		PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
				SALES KEGISIE	K		BILL WEEK END.	ING 0/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
198128	6/08/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I
198129	6/08/12	800000	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I
198130	6/08/12	000008	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I
198131	6/01/12	800000	VISITING NURSE SERVICE	COLON, ISABEL	4.00		58.32	I
198132	6/08/12	800000	VISITING NURSE SERVICE	COLON, ISABEL	26.00		379.09	I
				CUSTOMER	107.00	0.00	1,560.07	
				CATEGORY	107.00	0.00	1,560.07	

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	75
SALES JF	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	
			2	SALES REGISTER	2		BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198133	6/08/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				CATEGORY	168.00	0.00	2,449.44	

RUN DA	TE 06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES	JRNL # 0285	LOC 001		REG NY NY			LTC NURSING HOME	•
			\$	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198134	6/08/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	77
SALES JRN	rL # 0285	LOC 001		REG NY NY			VCP CHOICE LHCS	
			:	SALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198135	6/08/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE				PAGE 1 -	78
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	
				SALES REGISTER			BILL WEEK ENDIN	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198136	6/01/12	000008	VISITING NURSE SERVICE	COSTA, ARSENE	9.50		138.51	Ι
198137	6/08/12	800000	VISITING NURSE SERVICE	COSTA, ARSENE	40.00		583.20	[
				CUSTOMER	49.50	0.00	721.71	
				COSTONER	40.50	0.00	721.71	
				CATEGORY	49.50	0.00	721.71	

	06/13/12 - NL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	79
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198138	6/08/12	800000	VISITING NURSE SERVICE	COVALIU, SIMION	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	80
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL	
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198139	6/08/12	800000	VISITING NURSE SERVICE	COX, PETRA	19.00		277.02 I	
				CATEGORY	19.00	0.00	 277.02	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 8: ADU ADULT	1
SALES UKN	ш # 0205	LOC UUI		SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198140 198141	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00 9.75		43.74 I 142.16 I	
				CUSTOMER	12.75	0.00	185.90	
				CATEGORY	12.75	0.00	185.90	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	82
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	198142	6/08/12	800000	VISITING NURSE SERVICE	CRUZ, HECTOR	38.75		564.98 I	
ı									
ı									
ı					CATEGORY	38.75	0.00	564.98	

			YSIDE CITYWIDE					83
SALES JRNI	և # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198143	6/08/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	19.75		287.96 I	
				CATEGORY	19.75	0.00	287.96	

RUN DATE 06/ SALES JRNL #	13/12 - SUP SUNN : 0285 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING H BILL WEEK END	HOMEW/O WALLS (LT
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
	08/12 000008 08/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	24.00 56.00		349.92 816.48	I I
			CUSTOMER	80.00	0.00	1,166.40	
			CATEGORY	80.00	0.00	1,166.40	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LI		35
			\$	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198146 198147	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	DAVIS, LOUELLEN DEBAZALAR, ANTO	42.00 18.00		612.36 262.44	I	
198148	6/08/12	000008	VISITING NURSE SERVICE	DEJESUS, FELIX	20.00		291.60	Ī	
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	86
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	BALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198149	6/08/12	800000	VISITING NURSE SERVICE	DEL CARPIO, FEL	31.75		462.92 I	
				CATEGORY	31.75	0.00	462.92	

RUN DATE SALES JRN	/	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		87
011220 0141	.2    0200	200 001		SALES REGISTE	R		BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198150	6/08/12	000008	VISITING NURSE SERVICE	E DELOSSANTOS, MA	30.00		437.40	I	
198151	6/08/12	800000	VISITING NURSE SERVIO	E DELPOZO, MIGUEL	28.00		408.24	I	
198152	6/08/12	800000	VISITING NURSE SERVIO	E DELUCA, ANTIONE	27.50		400.95	I	
198153	6/08/12	800000	VISITING NURSE SERVIO	E DEY, KRISHNA	3.00		43.74	I	
198154	6/08/12	800000	VISITING NURSE SERVIO	E DEZUMARAN, REBE	43.50		634.25	I	
198155	6/08/12	000008	VISITING NURSE SERVIO	E DIAZ, MARIA	34.75		506.66	I	
198156	6/08/12	800000	VISITING NURSE SERVIO	E DIAZ, OLGA	38.00		554.04	I	
				CUSTOMER	204.75	0.00	2,985.28		
				 CATEGORY	204.75	0.00	2,985.28		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	_	88
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			ADU ADULT		
				SALES R	EGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198157	6/08/12	000008	VISITING NURSE SERVICE	DIAZ,	ROSA	30.00		437.40	I	
					CATEGORY	30.00	0.00	437.40		

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		89
SALES URN	ш # 0205	TOC 001		SALES REGISTE	R		BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198158	6/08/12	000008	VISITING NURSE SERVICE	DIAZ, ROSA	12.00		174.96	I	
198159	6/08/12	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	72.00		1,049.76	I	
198160	5/18/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	6.00		87.48	I	
198161	6/08/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	35.50		517.60	I	
198162	6/08/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60	I	
				CUSTOMER	145.50	0.00	2,121.40		
				CATEGORY	145.50	0.00	2,121.40		

RUN DATE 06 SALES JRNL		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198164	6/01/12 6/08/12 6/08/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DOMINICK, GINA	6.00 18.75 33.00		87.48 I 273.38 I 481.14 I	
				CUSTOMER	57.75	0.00	842.00	
				CATEGORY	57.75	0.00	842.00	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	91
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198166	6/08/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	92
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
			i	SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198167	6/08/12	800000	VISITING NURSE SERVICE	ECHEGARAY, MARI	39.00		568.62	I	
				CATEGORY	39.00	0.00	568.62		

			YSIDE CITYWIDE				PAGE 1 -	93
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198168	6/08/12	800000	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	94
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
				SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198169	6/08/12	800000	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 95	
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE F	PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING 6/	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
198170	6/08/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

-	06/13/12 - L # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	
	- "			SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
198171	6/08/12	800000	VISITING NURSE SERVICE	ESPEJO, FLORENC	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	97
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198172	6/08/12	800000	VISITING NURSE SERVICE	ESPIN, CESAR	63.00		918.54 I	
				CATEGORY	63.00	0.00	918.54	

			YSIDE CITYWIDE				PAGE 1 - 98	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	/15 /10
				SALES REGISTER			BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
198173	6/08/12	000008	VISITING NURSE SERVICE	ESPINAL, JOSE	9.00		131.22 I	
198174	6/08/12	800000	VISITING NURSE SERVICE	EVERETT, SHIRLE	21.00		306.18 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

RUN DATE 06/1: SALES JRNL #		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	99
SALES URNL #	J285 LOC 001		SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	3/12 000008 3/12 000008	VISITING NURSE SERVICE	FADEN, ROBIN FAMBIATOU, PARA	69.25 12.00		1,009.67 I 174.96 I	
198170 0700	3/12 000008	VISITING NORSE SERVICE	·				
			CUSTOMER	81.25	0.00	1,184.63	
			CATEGORY	81.25	0.00	1,184.63	

			YSIDE CITYWIDE				PAGE 1 - 10	10
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			2	SALES REGISTE	3		BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198177	6/08/12	800000	VISITING NURSE SERVICE	FARO, JOSEPH	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE (	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 101	
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTE	R		BILL WEEK ENDING 6,	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	JRPLUS
100170	6 (00 (10	000000			14.05		000 00 -	
198178	6/08/12	000008	VISITING NURSE SERVICE	FAY, JULIA	14.25		207.77 I	
				CAMPEGODY/	14 05	0.00	207 77	
				CATEGORY	14.25	0.00	207.77	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	A
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198179	6/08/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10	)3
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198180	6/08/12	000008	VISITING NURSE SERVICE	FERNANDEZ, JORG	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN				REG NY NY LES REGISTER			PAGE 1 - 104 VCP CHOICE LHCSA BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198181	6/08/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	05
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198182	6/08/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 106	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198183	6/08/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	46.75		681.62 I	
				CATEGORY	46.75	0.00	681.62	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	07
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198184	6/08/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	 87.48	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 10	)8
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198185	6/08/12	800000	VISITING NURSE SERVICE	FOLLETTO, ROSIN	34.00		495.72	I	
198186	6/08/12	800000	VISITING NURSE SERVICE	FONG, ALEFINA	12.00		174.96	I	
198187	6/08/12	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		510.30	I	
							1 100 00		
				CUSTOMER	81.00	0.00	1,180.98		
				CATEGORY	81.00	0.00	1,180.98		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 109	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	SALES REGISTER			BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198188	6/08/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	110
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
1								
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198189	6/08/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	46.00		670.68 I	
				CATEGORY	46.00	0.00	670.68	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198190 198191	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		35.00 35.00		510.30 I 510.30 I	
				CUSTOMER	70.00	0.00	1,020.60	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 11 HCSA	.2
	_    0200	200 001		SALES REGISTER			BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198192	6/08/12	000008	VISITING NURSE SERVICE	GAID, ASILA	35.00		510.30	I	
198193	6/01/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	7.00		102.06	I	
198194	6/08/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	31.00		451.98	I	
				CUSTOMER	73.00	0.00	1,064.34		
				CATEGORY	73.00	0.00	1,064.34		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI		3 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP	SURPLUS
198195	6/08/12	800000	VISITING NURSE SERVICE	GALLAGHER, MARY	2.00		29.16	I	
				CATEGORY	2.00	0.00	29.16		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1:	L4
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198196	6/08/12	000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	36.00		524.88 I	
198197	6/08/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22 I	
				CUSTOMER	45.00	0.00	656.10	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 115
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				OMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	ING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
198198	6/08/12	000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	40.00		583.20	I
198199	6/01/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32	I
198200	6/08/12	800000	VISITING NURSE SERVICE	GARAY, ANGELES	12.00		174.96	I
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE SALES JRN		LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198201	6/08/12	800000	VISITING NURSE SERVICE	GARCIA, CONCEPC	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 117 HOA HOSPICE ADULT BILL WEEK ENDING 6/	15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		JRPLUS
198202	6/08/12	800000	VISITING NURSE SERVICE	GARCIA, JESUS	20.00		291.60 I	
				CATEGORY	20.00	0.00	 291.60	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 118
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	DING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
198203	6/08/12	000008	VISITING NURSE SERVICE	GARCIA, OLGA	30.00		437.40	I
198204	6/08/12	800000	VISITING NURSE SERVICE	GEBHARDT, DOROT	40.00		583.20	I
				CUSTOMER	70.00	0.00	1,020.60	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 11	L9
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198205	6/08/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 12	0
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
10000	C / O O / T O				40 50		505 10 -	
198206	6/08/12	000008	VISITING NURSE SERVICE	GIORGIO, WILLIA	48.50		707.13 I	
				CAMPICODY	40 50	0.00	707 12	
				CATEGORY	48.50	0.00	707.13	

			YSIDE CITYWIDE				PAGE 1		21
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LE		6/15/12
				SALES REGISIER			DITT MEEV FINI	JING	0/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198207	6/08/12	000008	VISITING NURSE SERVICE		56.00		816.48	I	
198208	6/08/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	25.00		364.50	Ι	
				CUSTOMER	81.00	0.00	1,180.98		
				CODIONEIC	01.00	0.00	1,100.50		
				CATEGORY	81.00	0.00	1,180.98		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 122
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	OING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
198209	6/01/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	7.00		102.06	I
198210	6/08/12	800000	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I
198211	6/08/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	33.00		481.14	I
				CUSTOMER	75.00	0.00	1,093.50	
				CATEGORY	75.00	0.00	1,093.50	

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 123 ADU ADULT	
				SALES REGISTER				15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		RPLUS
198212	6/08/12	800000	VISITING NURSE SERVICE	GOMEZ-VIDAL, AL	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 124 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198213	6/08/12	800000	VISITING NURSE SERVICE	GONGORA, MARUJA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE				PAGE 1 - 125	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	/15 /10
			2	SALES REGISTER			BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
198214	6/08/12	800000	VISITING NURSE SERVICE	GONZALEZ, CARLO	9.00		131.22 I	
198215	6/08/12	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	18.00		262.44 I	
198216	6/08/12	800000	VISITING NURSE SERVICE	GONZALEZ, ELBA	41.25		601.43 I	
				CUSTOMER	68.25	0.00	995.09	
				CATEGORY	68.25	0.00	995.09	

RUN DATE SALES JRN		LOC 001		REGNY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198217	6/08/12	800000	VISITING NURSE SERVICE	GOVERDOVSKIY, N	18.00		262.44 I	
				CATEGORY	18.00	0.00	262.44	

			YSIDE CITYWIDE				PAGE 1 -	127
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			·	SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198218	6/08/12	000008	VISITING NURSE SERVICE	GOYES, ELBA	28.00		408.24 I	
198219	6/08/12	800000	VISITING NURSE SERVICE	GRAVER, EDNA	39.25		572.27 I	
				CUSTOMER	67.25	0.00	980.51	
				CODICIENT	07.23	0.00	500.51	
				CATEGORY	67.25	0.00	980.51	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	128
	- "			ALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198220	6/08/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	129
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AID	S ADULT POPUL
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100001	C 100 110				40.00		F1.4.40 -	
198221	6/08/12	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	49.00		714.42 I	
				CA EECODY	40.00	0.00	714 40	
				CATEGORY	49.00	0.00	714.42	

			YSIDE CITYWIDE				-	130
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	C /1 F /1 O
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
198222	6/08/12	000008	VISITING NURSE SERVICE	GUTHRIE, LORETH	9.00		131.22 I	
198223	6/08/12	800000	VISITING NURSE SERVICE	GUTIERREZ, ANGE	83.75		1,221.08 I	
				CUSTOMER	92.75	0.00	1,352.30	
							,	
				CATEGORY	92.75	0.00	1,352.30	

RUN DATE SALES JRN		LOC 001		REG NY NY ALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	V/O WALLS (LT
INVOICE#	DATE	CUST NO		REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198224	6/08/12	000008	VISITING NURSE SERVICE	GUTIERREZ, JOSE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE	222			PAGE 1 - 13	32
SALES JRN	L # U285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/15/12
							BIBE WEEK ENDING	0/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198225	6/08/12	000008	VISITING NURSE SERVICE	HENAO, VICTORIA	24.00		349.92 I	
198226	6/08/12	000008	VISITING NURSE SERVICE	HENDY, BERNICE	29.00		422.82 I	
				CUSTOMER	53.00	0.00	772.74	
				CATEGORY	53.00	0.00	772.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	133
SALES UKIN	L # 0265	LOC UUI		REGNY NY SALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198227 198228	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ - ,	56.00 50.00		816.48 I 729.00 I	
170220	0/00/12	000000	VISITING MORSE SERVICE	,				
				CUSTOMER	106.00	0.00	1,545.48	
				CATEGORY	106.00	0.00	1,545.48	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	134
SALES JRN	1L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	BALES REGISTER			BILL WEEK ENDIN	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198229	6/08/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE (		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING 1 BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198230 198231 198232	6/08/12 6/08/12 6/08/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HERRERA, HORACI	30.00 18.00 40.00		437.40 262.44 583.20	I I I	
				CUSTOMER	88.00	0.00	1,283.04		
				CATEGORY	88.00	0.00	1,283.04		

			YSIDE CITYWIDE				PAGE 1 - 1	L36
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198233	6/08/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE (			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 137 ADU ADULT BILL WEEK ENDING 6/15	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	LUS
198234	6/08/12	800000	VISITING NURSE SERVICE	ICIANO, ALFREDO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	222			PAGE 1 - 138	
SALES JRN	L # 0285	LOC 001		REGNY NY SALES REGISTER			LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198235	6/08/12	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10 I	
				CAMPRODY.	45.00			
				CATEGORY	45.00	0.00	656.10	

RUN DATE 06 SALES JRNL			REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198237 6	5/25/12 00000 5/08/12 00000 5/08/12 00000	08 VISITING NURSE SERVICE	INSERRA, CATHER	7.00 21.00 30.00		102.06 I 306.18 I 437.40 I	
			CUSTOMER	58.00	0.00	845.64	
			CATEGORY	58.00	0.00	845.64	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	140
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
T1770 T GT	53.00	GTTGT 170	anamanan mana		******		3.401PTE EVID	G11D D7 11G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198239	6/08/12	000008	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	36.25		528.53 I	
170237	0/00/12	000000	VISITING NORSE SERVICE	OAKHIISCII, EHIZ	30.23		320.33	
				CATEGORY	36.25	0.00	528.53	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	11
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198240	6/08/12	000008	VISITING NURSE SERVICE	JARA DEURUCHIM,	10.00		145.80	I	
198241	6/08/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	12.00		174.96	I	
198242	6/08/12	800000	VISITING NURSE SERVICE	JEWAT, LUCILLE	75.25		1,097.15	I	
198243	6/08/12	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	24.00		349.92	I	
				CUSTOMER	121.25	0.00	1,767.83		
				CATEGORY	 121.25	0.00	1,767.83		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 HOA HOSPICE A	- 14	2
			S	SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198244 198245	6/01/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	JIANNARAS, ANNA JIANNARAS, ANNA	10.00 70.00		145.80 1,020.60	I T	
	0,00,12		VIDITING NONDE BENVIOL	CUSTOMER	80.00	0.00	1,166.40		
				CODIONER	00.00	0.00	1,100.10		
				CATEGORY	80.00	0.00	1,166.40		<del></del>

RUN DATE (	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	43
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
			\$	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198246	5/25/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	1.00		14.58 I	
198247	6/08/12	000008	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	26.50		386.37 I	
				CUSTOMER	27.50	0.00	400.95	
							400.05	
1				CATEGORY	27.50	0.00	400.95	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	144
SALES URN	L # UZO5	LOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198248 198249	6/01/12 6/01/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	5.00 5.00		72.90 I 72.90 I	
198250	6/08/12	000008	VISITING NURSE SERVICE	•	20.00		291.60 I	
				CUSTOMER	30.00	0.00	437.40	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDI	- 145 ING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS	
198251	6/08/12	800000	VISITING NURSE SERVICE	JOHNSON, DOROTH	4.00		58.32	I	
				CATEGORY	4.00	0.00	58.32		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	146 SA
				SALES REGISTER			BILL WEEK ENDIN	IG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198252	6/01/12	800000	VISITING NURSE SERVICE	,	16.00		233.28	-
198253	6/01/12	000008	VISITING NURSE SERVICE	JOHNSON, FANNY	4.00		58.32 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 14	17
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198254	6/08/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	20.00		291.60	I	
198255	6/08/12	800000	VISITING NURSE SERVICE	JORRIN, NILIO	39.00		568.62	I	
				CUSTOMER	59.00	0.00	860.22		
				000-01-21					
				CATEGORY	59.00	0.00	860.22		

RUN DATE 0 SALES JRNL			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			5	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	6/08/12	800000	VISITING NURSE SERVICE	KAUR, SARD	1.00		14.58	I	
	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SHARAN KEARNEY, LORRAI	52.00 20.00		758.16 291.60	I	
				CUSTOMER	73.00	0.00	1,064.34		
				CATEGORY	73.00	0.00	1,064.34		

			YSIDE CITYWIDE				PAGE 1 - 149	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ONL	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198259	6/08/12	800000	VISITING NURSE SERVICE	KEHOE, ELIZABET	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

			YSIDE CITYWIDE				PAGE 1 - 1	
SALES JRN	L # 0285	LOC 001		REGNY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	6/15/12
							DIDD WEEK ENDING	0/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198260	6/08/12	800000	VISITING NURSE SERVICE	KHAN, MARGARET	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

			YSIDE CITYWIDE				PAGE 1	- 15	51
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		c (1 = (1 o
			i	SALES REGISTER			BILL WEEK ENI	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198261	6/08/12	000008	VISITING NURSE SERVICE	KILIMLIAN, PEPR	40.00		583.20	I	
198262	6/08/12	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	56.00		816.48	I	
				CUSTOMER	96.00	0.00	1,399.68		
				CATEGORY	96.00	0.00	1,399.68		

	06/13/12 - JL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 15 ADU ADULT BILL WEEK ENDING	2 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198263	6/08/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	153
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
				SALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198264	6/08/12	000008	VISITING NURSE SERVICE	E LARA-MORA, BELE	47.00		685.26	I
				CATEGORY	47.00	0.00	685.26	

	06/13/12 - RNL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 154 ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#		CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
198265	6/08/12	000008	VISITING NURSE SERVICE	LASAK, MICHAEL CATEGORY	9.00		131.22 I 131.22	

			YSIDE CITYWIDE					- 15	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING		,
			2	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198266	6/08/12	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	20.00		291.60	I	
198267	6/08/12	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	19.50		284.32	I	
				CUSTOMER	39.50	0.00	575.92		
				COSTOMER	39.30	0.00	373.92		
				CATEGORY	39.50	0.00	575.92		

RUN DATE 06/13/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	156
			SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198268 6/08/ 198269 6/08/		VISITING NURSE SERVICE VISITING NURSE SERVICE	LERNER, SEYMOUR LERNER, SEYMOUR	2.75 3.75		40.10 I 54.68 I	
			CUSTOMER	6.50	0.00	94.78	
			CATEGORY	6.50	0.00	94.78	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 157
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
			5	SALES REGISTER			BILL WEEK END	ING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
198270	6/08/12	000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	55.50		809.19	I
198271	6/08/12	800000	VISITING NURSE SERVICE	LIRIANO, FRANCI	70.00		1,020.60	I
198272	6/08/12	000008	VISITING NURSE SERVICE	LITSAS, MARTHA	24.00		349.93	I
				CUSTOMER	149.50	0.00	2,179.72	
				CATEGORY	149.50	0.00	2,179.72	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - 1 ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198273	6/08/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	35.00		510.31 I	
				CATEGORY	35.00	0.00	 510.31	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	59
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198274	6/08/12	000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	56.00		816.48	I	
198275	6/08/12	800000	VISITING NURSE SERVICE	LOGAN, ADELE	42.00		612.36	I	
				CUSTOMER	98.00	0.00	1,428.84		
				CATEGORY	98.00	0.00	1,428.84		

SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER	VCP CHOICE LHCSA
SALES REGISTER	
	BILL WEEK ENDING 6/15/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX A	MT AMOUNT TYP SURPLUS
198276 6/08/12 000008 VISITING NURSE SERVICE LONDONO, AMIRA 70.00	1,020.60 I
CATEGORY 70.00 0.	 00

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	161
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198277	6/08/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	52
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198278	6/08/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	34.50		503.01 I	
198279	6/08/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	12.00		174.96 I	
				CUSTOMER	46.50	0.00	677.97	
				CATEGORY	46.50	0.00	677.97	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	3
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198280	6/08/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 06/1 SALES JRNL #	13/12 - SUP SUNN 0285 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 16	54
		\$	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	08/12 000008 08/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		69.50 3.00		1,013.32 43.74	I	
190202 070	00/12 000000	VISITING NORSE SERVICE						
			CUSTOMER	72.50	0.00	1,057.06		
			CATEGORY	72.50	0.00	1,057.06		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - CCL CONGREGATE C	165 ARE DROGRAM
DALLO OIGV	L # 0203	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198283 198284	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LUCES, LETICIA LYMN, ANGIE	19.25 25.00		280.68 I 364.50 I	
				CUSTOMER	44.25	0.00	645.18	
				CATEGORY	44.25	0.00	645.18	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 166	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198285	6/08/12	800000	VISITING NURSE SERVICE	E MACCHIA, CATHY	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				PAGE 1 - 1	.67
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB C	
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198286	6/08/12	800000	VISITING NURSE SERVICE	MADDALENA, CECE	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	8
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAP	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198287	6/08/12	800000	VISITING NURSE SERVICE	MAGILLIGAN, LOR	32.75		477.50 I	
				CATEGORY	32.75	0.00	477.50	

			YSIDE CITYWIDE	DEC NY NY				- 16	59
SALES JRN	L # U285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE BILL WEEK ENI		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198288	6/08/12	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	84.00		1,224.72	I	
198289 198290	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	MANGAN, JOHN MANNINO, FRANCE	20.00 16.90		291.60 406.78	I	
				CUSTOMER	120.90	0.00	1,923.10		
				CATEGORY	120.90	0.00	1,923.10		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	0
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198291	6/08/12	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	48.00		699.84	I	
198292	6/01/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	4.00		58.32	I	
198293	6/08/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	24.00		349.92	I	
				CUSTOMER	76.00	0.00	1,108.08		
				CATEGORY	76.00	0.00	1,108.08		

			YSIDE CITYWIDE				11102 1	- 17	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA		
				SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198294	6/08/12	800000	VISITING NURSE SERVICE	MARGOLIS, GERTR	3.00		43.74	I	
198295	6/08/12	000008	VISITING NURSE SERVICE	MARINO, ANN	24.00		349.92	I	
				GLIGHOMED	07.00	0.00	393.66		
				CUSTOMER	27.00	0.00	393.00		
				CATEGORY	27.00	0.00	393.66		

			YSIDE CITYWIDE				PAGE 1		'2
SALES JRNL	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		6 (15 (10
				SALES REGISTER			BILL WEEK END	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198296	6/08/12	000008	VISITING NURSE SERVICE	MARKS, ANN	56.00		816.48	I	
198297	6/08/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50	I	
				CUSTOMER	81.00	0.00	1,180.98		
							,		
				CATEGODY	81.00	0.00	1,180.98		
1				CATEGORY	01.00	0.00	1,180.98		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 173	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	ALES REGISTER			BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198298	6/08/12	800000	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
198299 198300	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	7.75 12.00		113.00 I 174.96 I	- - - -
				CUSTOMER	19.75	0.00	287.96	
				CATEGORY	19.75	0.00	287.96	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 175 ADU ADULT	
Bribbo orav	1 11 0203	100 001		SALES REGISTER			BILL WEEK ENDING 6/15	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	LUS
198301 198302	6/01/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	6.00 30.00		87.48 I 437.40 I	
				CUSTOMER	36.00	0.00	524.88	
				CATEGORY	36.00	0.00	524.88	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 17 HCSA	76
				SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198303 198304	6/01/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	• -	6.00 15.00		87.48 218.70	I	
190304	0/00/12	000008	VISITING NURSE SERVICE	MARIINEZ, CAMIL	15.00		210.70		
				CUSTOMER	21.00	0.00	306.18		
				CATEGORY	21.00	0.00	306.18		

			YSIDE CITYWIDE				PAGE 1 - 177	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
				SALES REGISTER			BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
198305	6/08/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

			YSIDE CITYWIDE				-	- 17	78
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LI		6/15/12
			Š	SALES REGISIER			DILL MEEK EN	DING	0/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
10000	C 100 110				10.00		0.50 4.4	_	
198306	6/08/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	18.00		262.44	Τ_	
198307	6/08/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	41.25		601.43	I	
198308	6/08/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	83.25		1,213.79	I	
				CITCHONED	140 50	0.00	2 077 66		
				CUSTOMER	142.50	0.00	2,077.66		
				CATEGORY	142.50	0.00	2,077.66		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 179 LTC NURSING HOMEW/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
198309	6/08/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSAL	38.00		554.04 I
				CATEGORY	38.00	0.00	554.04

			YSIDE CITYWIDE				PAGE 1 - 1	80
SALES JRN	ь # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	6 /1 5 /1 0
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198310	6/08/12	000008	VISITING NURSE SERVICE	MATOS, ROSA	49.50		721.71 I	
				CATEGORY	49.50	0.00	721.71	

			YSIDE CITYWIDE				PAGE 1 - 181	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198311	6/08/12	000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00		918.54 I	
198312	6/08/12	800000	VISITING NURSE SERVICE	MCBRAYER, SYLVI	168.00		2,449.44 I	
				CUSTOMER	231.00	0.00	3,367.98	
				CATEGORY	231.00	0.00	3,367.98	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	182	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A	
ı				5	SALES REGISTER			BILL WEEK ENDING	G 6/15/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
ı										
ı	198313	6/08/12	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48 I		
ı										
ı										
ı					CATEGORY	56.00	0.00	816.48		

RUN DATE SALES JRN	- 183
	ING 6/15/12
INVOICE#	TYP SURPLUS
198314	I

RUN DATE 06/13/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 184 VCP CHOICE LHCSA BILL WEEK ENDING	6/15/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198315 6/08/ 198316 6/08/		VISITING NURSE SERVICE VISITING NURSE SERVICE	MEJIA, DINORAH MEJIA, MARINA	8.00 20.00		116.64 I 291.60 I	
			CUSTOMER	28.00	0.00	408.24	
			CATEGORY	28.00	0.00	408.24	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.85	
SALES JRN	L # 0285	LOC 001		REG NY NY			LTC NURSING HOME	•	
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
198317	6/08/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	37.25		543.11 I		
				CATEGORY	37.25	0.00	543.11		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	186 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198318	6/08/12	800000	VISITING NURSE SERVICE	MENDEZ, ADA	31.00		451.98 I	
				CATEGORY	31.00	0.00	451.98	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 187	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/	O WALLS LT
ı				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	198319	6/08/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	12.00		174.96 I	
ı									
ı									
ı					CATEGORY	12.00	0.00	174.96	

	06/13/12 - NL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	
SALES UKI	NL # UZ65	TOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
198320	6/08/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	77.00		1,122.67 I	
				CATEGORY	77.00	0.00	1,122.67	

RUN DATE 06/13/1 SALES JRNL # 028		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEF	₹		PAGE 1 - 18 LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198321 6/01/1 198322 6/08/1		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	4.00 39.00		58.32 I 568.62 I	
			CUSTOMER	43.00	0.00	626.94	
			CATEGORY	43.00	0.00	626.94	

			YSIDE CITYWIDE				PAGE 1 - 1	90
SALES JRN	L # 0285	LOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/15/12
							DIED WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198323	6/08/12	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

		6/13/12 - # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 191 ADU ADULT	
	.25 014.2	. 11 0203	200 001		SALES REGISTER			BILL WEEK ENDING 6/1	5/12
INV	OICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
198	324	6/08/12	800000	VISITING NURSE SERVICE	MILEO, MARY	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE O			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 192 VCP CHOICE LHCSA BILL WEEK ENDING 6	5/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
198326	6/08/12 6/08/12 6/08/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MONSERRAT, DORI MONTES, MARTA MORAITIS, AGATH	5.75 30.00 30.00		83.84 I 437.40 I 437.40 I	
				CUSTOMER	65.75	0.00	958.64	
				CATEGORY	65.75	0.00	958.64	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198328	6/08/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

-			YSIDE CITYWIDE	DEC MY MY			-	- 194	
SALES JRN	L # U285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			ADU ADULT BILL WEEK END	ING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
198329	5/18/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	8.50		123.93	I	
198330	6/08/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	54.75		798.26	I	
198331	6/08/12	000008	VISITING NURSE SERVICE	MOURAS, ANNA	10.00		145.80	I	
198332	6/08/12	800000	VISITING NURSE SERVICE	MUSSALLI, NAIM	4.00		58.32	I	
				CUSTOMER	77.25	0.00	1,126.31		
				CATEGORY	77.25	0.00	1,126.31		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	5
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198333	6/08/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 196	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	5/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198334	6/08/12	000008	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE 06/ SALES JRNL #	/13/12 - SUP SUNN # 0285 LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 19	7
DIEZZ GIGIZ II	, 0200 200		ALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
,	/08/12 000008	VISITING NURSE SERVICE	NEAL, GWENDOLYN	15.00		218.70	I	
,	/08/12 000008	VISITING NURSE SERVICE	NELLINI, MARY	42.75		623.30	I	
198337 6/	/08/12 000008	VISITING NURSE SERVICE	NICKELL, JEAN	9.00		131.22		
			CUSTOMER	66.75	0.00	973.22		
			CATEGORY	66.75	0.00	973.22		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 19	8
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
TATTOTOTOT	DAME	GIIGE NO	CHCEOMED NAME	DEFEDENCE	HOHDG	max anm	AMOUNIE END	GIID DI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198338	6/08/12	000008	VISITING NURSE SERVICE	NIDO, MICHAEL	48.75		710.78 I	
170330	0/00/12	000000	VIBITING NORDE BERVICE	NIDO, MICHAEL	10.75		710.70	
				CATEGORY	48.75	0.00	710.78	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	99
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				5	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198339	6/08/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	62.50		911.26 I	
					CATEGORY	62.50	0.00	911.26	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 200 VCP CHOICE LHCSA BILL WEEK ENDING 6/	15/12
				SALES KEGISIEK			BILL WEEK ENDING 0/	15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
198340 198341	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	NIEVES, NANCY NINO, CARMEN	36.00 20.50		524.88 I 298.89 I	
				CUSTOMER	56.50	0.00	823.77	
				CATEGORY	56.50	0.00	823.77	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	1
SALES JRN	rL # 0285	LOC 001		REG NY NY			LTC NURSING	HOMEW/	•
			S	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198342	6/08/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	20.00		291.60	I	
198343	6/08/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	28.00		408.24	I	
				CUSTOMER	48.00	0.00	699.84		
				CODIONER	10.00	0.00	0,0,01		
				CATEGORY	48.00	0.00	699.84		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	2
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	SALES REGISTER			BILL WEEK END	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198344	6/08/12	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
198345	6/08/12	800000	VISITING NURSE SERVICE	OCHOA, LUIS	43.00		626.94	I	
				CUSTOMER	92.00	0.00	1,341.36		
				CATEGORY	92.00	0.00	1,341.36		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	203
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198346	6/08/12	800000	VISITING NURSE SERVICE	OLVERA, ROSALIA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		)4
	_    0200	200 001		SALES REGISTER			BILL WEEK END		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198347	6/08/12	000008	VISITING NURSE SERVICE	ORTEGA, CARLOS	16.00		233.28	I	
198348	6/08/12	800000	VISITING NURSE SERVICE	OSPINA, ANA	8.00		116.64	I	
198349	6/08/12	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	13.25		193.19	I	
				CUSTOMER	37.25	0.00	543.11		
				CATEGORY	37.25	0.00	543.11		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	205
				SALES REGISTER			BILL WEEK ENDING	G 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
198350	6/08/12	800000	VISITING NURSE SERVICE	PAOLONI, MARY	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	206
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	ALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198351	6/08/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	50.00		729.00	I
198352	6/08/12	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48	I
198353	6/08/12	800000	VISITING NURSE SERVICE	PAPP, TEREZIA	1.00		14.58	I
198354	6/08/12	800000	VISITING NURSE SERVICE	PARETTI, MARIE	54.00		787.32	I
				CUSTOMER	111.00	0.00	1,618.38	
				CATEGORY	111.00	0.00	1,618.38	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEN BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198355	6/01/12	800000	VISITING NURSE SERVICE	PARK, SUNG	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

RUN DATE 06 SALES JRNL		UP SUNNY OC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		6/15/12
INVOICE#	DATE CU	UST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198357 6	5/08/12 00	80000	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PENA, VICTORIA PENAGOS, MARIA PEREZ MONSER, C	30.00 25.00 35.00		437.40 364.50 510.30	I I I	
				CUSTOMER	90.00	0.00	1,312.20		
				CATEGORY	90.00	0.00	1,312.20		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 20	19
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTE	?		BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198359	6/01/12	000008	VISITING NURSE SERVICE	PEREZ, DOMINGA	6.00		87.48	I	
198360	6/08/12	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	40.75		594.14	I	
					46 85		601 60		
				CUSTOMER	46.75	0.00	681.62		
				CATEGORY	46.75	0.00	681.62		

			YSIDE CITYWIDE				PAGE 1 -		
SALES JRN	L # 0285	LOC 001		REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
198361	6/08/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	24.75		360.86 I		
				CATEGORY	24.75	0.00	360.86		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	211 IG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198362	6/08/12	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		437.40	<u>.</u> -
				CATEGORY	30.00	0.00	437.40	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	212	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME		
				\$	SALES REGISTER			BILL WEEK ENDING	6/15/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	198363	6/08/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	34.75		506.66 I		
ı										
ı					CATEGORY	34.75	0.00	506.66		

RUN DATE SALES JRN			IYSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REG NY NY ALES REGISTER			PAGE 1 - 213 VCP CHOICE LHCSA BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198364	6/08/12	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 214 ADU ADULT BILL WEEK ENDING	4 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198365	6/08/12	800000	VISITING NURSE SERVICE	PIRES, ARMANDA	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 21	.5
511225 5141	_	200 001		SALES REGISTER			BILL WEEK END		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198366	6/08/12	800000	VISITING NURSE SERVICE	- ,	5.50		80.20	I	
198367	6/08/12	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	35.00		510.30	т	
				CUSTOMER	40.50	0.00	590.50		
				CATEGORY	40.50	0.00	590.50		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198368	6/08/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	12.00		174.96 I	
				CATEGORY	12.00	0.00		

			YSIDE CITYWIDE				-	217
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198369	6/08/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	24.00		349.92 I	
198370	6/08/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88 I	
				CUSTOMER	60.00	0.00	874.80	
				CATEGORY	60.00	0.00	874.80	

RUN DATE SALES JRN			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S 2	REG NY NY ALES REGISTER			PAGE 1 - 218 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
198371	6/08/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I
				CATEGORY	40.00	0.00	583.20

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 21 ADU ADULT BILL WEEK ENDING	9 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198372	6/08/12	800000	VISITING NURSE SERVICE	PREVOST, IRENE	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATI	E 06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	220
SALES J	RNL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198373	6/08/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	15.50		225.99 I	
1				CATEGORY	15.50	0.00	225.99	

			YSIDE CITYWIDE				PAGE 1 - 2:	
SALES	3 JRNL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAI	
			\$	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19837	74 6/08/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	40.00		583.21 I	
				CATEGORY	40.00	0.00	583.21	

RUN DATE SALES JRN				REG NY NY SALES REGISTER				- 222 DMEW/O WALLS (LT ING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198375	6/08/12	800000	VISITING NURSE SERVICE	QUIZHPI, MARIA	48.50		707.14	I
				CATEGORY	48.50	0.00	707.14	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 223	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PEDIATRIC	
ı					SALES REGISTER			BILL WEEK ENDING 6/15/12	
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
ı									
ı	198376	6/08/12	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	41.00		597.78 I	
ı									
ı					CATEGORY	41.00	0.00	597.78	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	224	
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	•	
				:	SALES REGISTER			BILL WEEK ENDING	6/15/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	198377	6/08/12	800000	VISITING NURSE SERVICE	RAMIREZ, JUANA	54.00		787.32 I		
					CATEGORY	54.00	0.00	787.32		

RUN DATE SALES JRN		- SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		5
SALES ON	H 0203	100 001		ALES REGISTER			BILL WEEK END		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198378	6/08/12	000008	VISITING NURSE SERVICE	RAMPHAL, INDRIA	12.00		174.96	I	
198379	6/08/12	800000	VISITING NURSE SERVICE	RANDAZZO, ROSAL	16.00		233.28	I	
198380	6/08/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I	
198381	6/08/12	800000	VISITING NURSE SERVICE	REINA, JOSE	19.75		287.96	I	
198382	6/08/12	800000	VISITING NURSE SERVICE	RICCA, MARIE	10.75		156.74	I	
198383	6/08/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	20.00		291.60	I	
				CUSTOMER	84.50	0.00	1,232.02		
				CATEGORY	84.50	0.00	1,232.02		

RUN DATE	06/13/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 2	226
SALES JRN	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198384	6/08/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, RO	55.50		809.20 I	
				CATEGORY	55.50	0.00	809.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 227 VCP CHOICE LHCSA	
			Ş	SALES REGISTER			BILL WEEK ENDING 6/	15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
198385 198386	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	20.00		291.60 I 291.60 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		- SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMI BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198387	6/08/12	800000	VISITING NURSE SERVICE	RIVERA, GRACIEL	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 - 229 ADU ADULT	
DALLO OIGN.	L π 0203	10C 001		SALES REGISTER			BILL WEEK ENDING 6/15	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURE	PLUS
198388	6/08/12	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	19.50		284.32 I	
				CATEGORY	19.50	0.00	284.32	

RUN DATE 06 SALES JRNL	3/13/12 - SUP SUN # 0285 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 230 LTC NURSING HOMEW/O W BILL WEEK ENDING 6	WALLS (LT /15/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	URPLUS
	5/08/12 000008 5/08/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	35.75 11.75		521.24 I 171.32 I	
			CUSTOMER	47.50	0.00	692.56	
			CATEGORY	47.50	0.00	 692.56	

			YSIDE CITYWIDE					231
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				SALES REGISIER			BILL MEEK ENDING	0/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198391	6/08/12	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	232
SALES JR	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198392	6/08/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE				PAGE 1 -	233
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			:	SALES REGISTER			BILL WEEK ENDI	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198393	6/08/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, FERM	25.00		364.50	I
198394	6/08/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, IRMA	42.00		612.36	Ι
				CUSTOMER	67.00	0.00	976.86	
				CATEGORY	67.00	0.00	976.86	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	4
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198395	6/08/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, MARC	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198396	6/08/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	25.00		364.50 I	
				CATEGORY	25.00	0.00	364.50	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	236
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100000	C 100 110				40.00			
198397	6/08/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	48.00		699.84 I	
				CA HECODY	40.00	0.00	600.04	
				CATEGORY	48.00	0.00	699.84	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	7
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100000	6 (00 (10	000000		DODDIGHT DOOM	20 55		580 56 T	
198398	6/08/12	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	39.75		579.56 I	
				CATEGORY	39.75	0.00	579.56	
				CAIEGORI	39.75	0.00	5/9.50	

RUN DAT	E 06/13/12	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 2	38
SALES J	RNL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198399	6/08/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, YLMA	55.50		809.19 I	
				CATEGORY	55.50	0.00	809.19	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	239
SALES JRN	L # 0285	LOC 001		REG NY NY			LTC NURSING HOME	•
			i	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198400	6/08/12	800000	VISITING NURSE SERVICE	ROLON, JUANITA	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	40
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198401	6/01/12	000008	VISITING NURSE SERVICE	ROMERO, SANTHY	8.00		116.64 I	
198402	6/08/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	56.00		816.48 I	
				CUSTOMER	64.00	0.00	933.12	
				CATEGORY	64.00	0.00	933.12	

			YSIDE CITYWIDE						- 24	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	-	NY EGISTE	R		LTC NURSING BILL WEEK EN		6/15/12
			·							-,,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198403	6/08/12	000008	VISITING NURSE SERVICE	ROMO.	FLOR	56.00		816.48	I	
198404	6/08/12	000008	VISITING NURSE SERVICE	,		32.00		466.56	Ī	
					CUSTOMER		0.00	1,283.04		
					COLIGINA	22.00	3.00	1,203.01		
								1 002 04		
					CATEGORY	88.00	0.00	1,283.04		

RUN DATE (	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE	1 – 24	:2	
SALES JRNI	և # 0285	LOC 001	SUNNYSIDE CITYWIDE		NY			ADU ADULT			
			S	BALES R	EGISTE	R		BILL WEEK E	NDING	6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
100405	5 / O O / T O							010 04	_		
198405	6/08/12	800000	VISITING NURSE SERVICE	ROSA,	LUZ E	55.75		812.84	Τ		
							0.00	010 04			
					CATEGORY	55.75	0.00	812.84			

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 243	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	ALES REGISTER			BILL WEEK END	ING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	URPLUS
198406	6/08/12	000008	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28	I	
198407	6/08/12	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	36.00		524.88	I	
198408	6/08/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	15.00		218.70	I	
198409	6/08/12	000008	VISITING NURSE SERVICE	ROSARIOBREU, EM	25.00		364.50	I	
				CUSTOMER	92.00	0.00	1,341.36		
				CATEGORY	92.00	0.00	1,341.36		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 24	4
	_    0200	200 001		SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198410	6/08/12	000008	VISITING NURSE SERVICE	RUBIN, EVGENY	19.75		287.96	I	
198411 198412	5/25/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RUECKHER, PATRI RUECKHER, PATRI	3.00 15.00		43.74 218.70	I I	
130112	0,00,12		VIDITING NONDE DENVIOE	,					
				CUSTOMER	37.75	0.00	550.40		
				CATEGORY	37.75	0.00	550.40		

			YSIDE CITYWIDE				PAGE 1 - :	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198413	6/08/12	800000	VISITING NURSE SERVICE	RUEDA, INES	46.00		670.68 I	
				CATEGORY	46.00	0.00	670.68	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 246	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
			S	SALES REGISTER			BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198414	6/08/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE ( SALES JRNI			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 247 ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		SURPLUS
198415	6/08/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 248	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100416	6 (00 (10	000000		G11117DD1 G7711	00 75		422 56 7	
198416	6/08/12	000008	VISITING NURSE SERVICE	SAAVEDRA, STELL	29.75		433.76 I	
				CATEGORY	29.75	0.00	433.76	
				CATEGORI	20.15	0.00	133.70	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
198417	6/08/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	15.00		218.70 I	
198418	6/08/12	000008	VISITING NURSE SERVICE	SALADIN, MARIA	66.00		962.28 I	
				CUSTOMER	81.00	0.00	1,180.98	
				 CATEGORY	81.00	0.00	1,180.98	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 25	0
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198419	6/08/12	800000	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE					- 25	51
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		C / T E / T O
			:	SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	TRUOMA	TYP	SURPLUS
198420	6/08/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	20.00		291.60	I	
198421	6/08/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	49.00		714.42	I	
				CUSTOMER	69.00	0.00	1,006.02		
				CATEGORY	69.00	0.00	1,006.02		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 252	2
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198422	6/08/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	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 - 2 ADU ADULT	253
SALES UKN	ш # 0205	TOC 001		SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198423 198424	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	32.50 4.00		473.85 I 58.32 I	
				CUSTOMER	36.50	0.00	532.17	
				CATEGORY	36.50	0.00	532.17	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 25	54
SALES OWN	H 0203	100 001	SOUNTSIDE CITIWIDE	SALES REGIST	E R		BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198425	6/08/12	000008	VISITING NURSE SERV	CE SCOTT, CATHERIN	56.00		816.48	I	
198426	6/08/12	000008	VISITING NURSE SERV	CE SEGOVIA, BEATRI	36.00		524.88	I	
198427	6/08/12	800000	VISITING NURSE SERV	CE SERAFIN, WALTER	55.25		805.56	I	
198428	6/08/12	800000	VISITING NURSE SERV	CE SERRANO, AGUEDA	56.00		816.48	I	
198429	6/08/12	800000	VISITING NURSE SERV	CE SHANNON, ELNORA	35.00		510.30	I	
198430	6/01/12	000008	VISITING NURSE SERV	CE SHARMA, DEROPDI	5.00		72.90	I	
198431	6/08/12	800000	VISITING NURSE SERV	CE SHARMA, DEROPDI	24.00		349.92	I	
				CUSTOMER	267.25	0.00	3,896.52		
				CATEGORY	267.25	0.00	3,896.52		

			YSIDE CITYWIDE				PAGE 1 - 255	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198432	6/08/12	000008	VISITING NURSE SERVICE	SHUBERT, ANN	2.00		29.16 I	
198433	6/08/12	800000	VISITING NURSE SERVICE	SIANO, ANDREW	3.00		43.74 I	
				CUSTOMER	5.00	0.00	72.90	
				CATEGORY	5.00	0.00	72.90	

	06/13/12 - L # 0285	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 256 VCP CHOICE LHCSA	
SALES URN	ш # 0205	TOC 001		SALES REGISTER			BILL WEEK ENDING 6/15/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	JS
198434 198435	6/01/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	10.00 10.00		145.80 I 145.80 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	 291.60	

ı	RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	57
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				5	SALES REGISTER			BILL WEEK ENDING	6/15/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	198436	6/08/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36 I	
ı									
ı						40.00			
ı					CATEGORY	42.00	0.00	612.36	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 258	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198437	6/08/12	000008	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40 I	
198438	6/08/12	800000	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70 I	
				CUSTOMER	45.00	0.00	656.10	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	259
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
198439	5/04/12	000008	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90 I	
198440	5/18/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	5.00		72.90 I	
198441	6/08/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	15.00		218.70 I	
				CUSTOMER	25.00	0.00	364.50	
				CATEGORY	25.00	0.00	364.50	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	60
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198442	6/08/12	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

RUN DATE SALES JRN			YYSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REGNY NY ALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	CW/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198443	6/08/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 - 262	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_
			2	SALES REGISTER			BILL WEEK ENDING 6/15/1	.2
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	IS
198444	6/08/12	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	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	- 26	53
511225 01411	_	200 001		SALES REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198445 198446	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		20.00 8.50		291.60 123.94	I I	
				CUSTOMER	28.50	0.00	415.54		
				CATEGORY	28.50	0.00	415.54		

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	264
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198447	6/08/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

- 1				YSIDE CITYWIDE				PAGE 1 - 26	55
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
ı				5	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198448	6/08/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
ı					CATEGORY	21.00	0.00	306.18	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	266 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198449	6/08/12	800000	VISITING NURSE SERVICE	STENOS, MOSHOUL	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHC BILL WEEK ENDI	SA
								, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
198450	6/08/12	000008	VISITING NURSE SERVICE	STERGIOU, GLORI	17.00		247.86	I
198451	6/08/12	000008	VISITING NURSE SERVICE	,	32.75		477.50	I
198452	6/08/12	000008	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88	I
				CUSTOMER	85.75	0.00	1,250.24	
				CATEGORY	85.75	0.00	1,250.24	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	268
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198453	6/08/12	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	59
BALLED OIGN	L # 0205	100 001		SALES REGISTER			BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198454	6/08/12	000008	VISITING NURSE SERVICE		4.00		58.32	I	
198455 198456	5/25/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- •	8.00 71.00		116.64 1,035.20	I	
				CUSTOMER	83.00	0.00	1,210.16		
				CATEGORY	83.00	0.00	1,210.16		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 270 LTC NURSING HOMEW/O BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198457 198458	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- •	55.50 16.00		809.19 I 233.28 I	
				CUSTOMER	71.50	0.00	1,042.47	
				CATEGORY	71.50	0.00	1,042.47	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	271 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198459	6/08/12	800000	VISITING NURSE SERVICE	TAVERAS, BERNAR	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWI	IDE REG NY	Z NY			PAGE 1 VCP CHOICE L	- 27	72
Brilles orde	1 1 0203	100 001	SOMITOIDE CITIVI	SALES	REGISTER			BILL WEEK EN		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198460	6/08/12	000008	VISITING NURSE SE	ERVICE I	TEJADA, BALDOME	20.00		291.60	I	
198461	6/08/12	800000	VISITING NURSE SE	ERVICE I	TERZIAN, ASDGHI	42.00		612.36	I	
198462	6/08/12	000008	VISITING NURSE SE	ERVICE I	TINOCO, INES	27.25		397.31	I	
198463	6/08/12	000008	VISITING NURSE SE	ERVICE I	TORO VEGA, LUZV	28.00		408.24	I	
198464	6/08/12	000008	VISITING NURSE SE	ERVICE I	ORO, PURA	78.50		1,144.53	I	
198465	6/08/12	000008	VISITING NURSE SE	ERVICE I	TORRES, EMELINA	40.00		583.20	I	
198466	6/08/12	800000	VISITING NURSE SE	ERVICE T	TORRES, LUZ M	81.75		1,191.92	I	
					CUSTOMER	317.50	0.00	4,629.16		
					CATEGORY	317.50	0.00	4,629.16		

RU	N DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	273
SA	LES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19	8467	6/08/12	800000	VISITING NURSE SERVICE	TORRES, MARGOT	42.00		612.36 I	
					CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN				REGNY NY SALES REGISTER			PAGE 1 - 274 ADU ADULT BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
198468	6/08/12	000008	VISITING NURSE SERVICE	TOUMA, MATTA	34.75		506.66 I	
				CATEGORY	34.75	0.00	506.66	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	275
SALES JRN	L # 0285	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198469	6/08/12	800000	VISITING NURSE SERVICE	TRUJILLO, AMPAR	19.00		277.02 I	
				CATEGORY	19.00	0.00	 277.02	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 276 ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198470	6/08/12	800000	VISITING NURSE SERVICE	TRUONG, TINH	10.25		149.45 I	
				CATEGORY	10.25	0.00	149.45	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 2	77
SALES JRN	L # U285	TOC 001		REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198471	6/08/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2'	78
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME V	W/O WALLS LT
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198472	6/08/12	800000	VISITING NURSE SERVICE	TSUAI, PING	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	279
SALES JRN	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198473	6/08/12	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	61.00		889.38 I	
				CATEGORY	61.00	0.00	889.38	

	ATE 06/13/12 - JRNL # 0285		IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : ADU ADULT	280
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOIC	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198474	6/08/12	800000	VISITING NURSE SERVICE	UGURLUYAN, KARA	7.00		1,224.72 I	
				CATEGORY	7.00	0.00	1,224.72	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 281 LTC NURSING HOMEW/O WALLS BILL WEEK ENDING 6/15/1	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
198475 198476	6/01/12 6/08/12	000008 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	220			PAGE 1 - 282	
SALES JRN	L # 0285	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AUR ADULT REHAB ONL BILL WEEK ENDING	Y 6/15/12
							DIED WEEK ENDING	0/13/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198477	6/08/12	800000	VISITING NURSE SERVICE	VACCA, MARIA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

				YSIDE CITYWIDE				PAGE 1 -	
SALE	ES JRNL	# 0285	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
				, and a second s	SALES REGISTER			BILL MEEK ENDING	0/15/12
INVO	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1984	178	6/08/12	000008	VISITING NURSE SERVICE	VALENCIA, ESTHE	18.50		269.73 I	
					CATEGORY	18.50	0.00	269.73	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	4
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198479	6/08/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 28	5
			S	SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198480 198481	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENTIN, ALEJA VARELAS, ANNA	16.25 15.00		236.93 218.70	I I	
	.,,			CUSTOMER	31.25	0.00	455.63		
				CATEGORY	31.25	0.00	455.63		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 286 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
198482 198483	6/08/12 6/08/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		5.75 6.00		83.84 I 87.48 I
				CUSTOMER	11.75	0.00	171.32
				CATEGORY	11.75	0.00	171.32

			YSIDE CITYWIDE				PAGE 1 - 2	87
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198484	6/08/12	800000	VISITING NURSE SERVICE	VASQUEZ, ARTURO	41.75		608.72 I	
				CATEGORY	41.75	0.00	608.72	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 288	8
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H		•
			:	SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
198485	6/08/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	9.00		131.22	I	
198486	6/08/12	800000	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	10.00		145.80	I	
198487	6/08/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	21.00		306.18	I	
198488	6/08/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	34.00		495.72	I	
				CUSTOMER	74.00	0.00	1,078.92		
				CATEGORY	74.00	0.00	1,078.92		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	289
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198489	6/08/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198490	6/08/12	800000	VISITING NURSE SERVICE	VELOZ, EMILIO	8.75		127.58 I	
				CATEGORY	8.75	0.00	127.58	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0285	LOC 001		REG NY NY			LTC NURSING HOME	
			2	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198491	6/08/12	000008	VISITING NURSE SERVICE	VENTURA, ROSA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 292	2
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198492	6/08/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	42.00		612.36 I	
1				CATEGORY	42.00	0.00	612.36	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 293	3
SALES JRN	L # 0285	LOC 001		REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198493	6/08/12	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CATEGORY	20.00	0.00	 291.60	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 294	1
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198494	6/01/12	000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	7.50		109.35 I	
198495	6/08/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	30.00		437.40 I	
				CUSTOMER	37.50	0.00	546.75	
				CATEGORY	37.50	0.00	546.75	

			YSIDE CITYWIDE				PAGE 1 - 295	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	
				SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198496	6/08/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

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
198497	6/08/12	800000	VISITING NURSE SERVICE	VITERI, NELLY	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

RUN DATE	06/13/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	297
SALES JRN	L # 0285	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198498	6/08/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	24.00		349.92 I	
				CATEGORY	24.00	0.00		

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 298	3
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
١				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198499	6/08/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	69.25		1,009.67 I	
					CATEGORY	69.25	0.00	1,009.67	

			YSIDE CITYWIDE				PAGE 1 - 299	
SALES JR	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	/15/10
			2	SALES REGISTER			BILL WEEK ENDING 6	/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
198500	6/08/12	000008	VISITING NURSE SERVICE	VLAHOS, MARIE	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 - VCP CHOICE LHCS	300 A
Brilling Grav	1 0203	100 001		ALES REGISTER			BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198501 198502	6/08/12 6/08/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VOLASTRO, JOHN WEINHAUS, SUSAN	3.00 5.00		43.74 I 72.90 I	
				CUSTOMER	8.00	0.00	116.64	
				CATEGORY	8.00	0.00	 116.64	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK EN	- 30	01 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198503 198504 198505	6/08/12 6/08/12 6/08/12	800000 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	WERKMEISTER, JO WHITE, PATRICK WOODS, JEWEL	16.00 50.00 15.00		233.28 729.00 218.70	I I I	
				CUSTOMER	81.00	0.00	1,180.98		
				CATEGORY	81.00	0.00	1,180.98		

			YSIDE CITYWIDE				PAGE 1 - 302	
SALES JRNI	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	E / E O
			2	SALES REGISTER			BILL WEEK ENDING 6/1	5/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
198506	6/08/12	000008	VISITING NURSE SERVICE	YAGHDJIAN, SIRA	17.75		258.80 I	
				CATEGORY	17.75	0.00	258.80	

ı	RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 3	03
ı	SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	6/15/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	198507	6/08/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
ı					CATEGORY	12.00	0.00	174.96	

RUN DATE 06/13/3 SALES JRNL # 02		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	301
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	
198508 6/08/3 198509 6/08/3 198510 6/08/3	12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	YIANNITSIS, LEO	6.00 9.00 40.00		87.48 1 131.22 1 583.20 1	I I I
			CUSTOMER	55.00	0.00	801.90	
			CATEGORY	55.00	0.00	801.90	

			YSIDE CITYWIDE				PAGE 1 - 30	05
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			VCP CHOICE LHCSA BILL WEEK ENDING	6/15/12
			•	SALES REGISIER			BILL MEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198511	6/08/12	000008	VISITING NURSE SERVICE	ZAMBRANO, VICTO	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	06/13/12 - JL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 3 AUR ADULT REHAB O BILL WEEK ENDING	NLY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198512	6/08/12	800000	VISITING NURSE SERVICE	ZAVALA OBANDO,	19.00		277.02 I	
				CATEGORY	19.00	0.00		

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	7
SALES JR	NL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL H	EALTH
			:	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
100510	C 100 110						07.40	
198513	6/08/12	800000	VISITING NURSE SERVICE	ZELLE, EVE	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 06/13/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 308 SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 6/15/12 REFERENCE HOURS TAX AMT AMOUNT

ACERNO, CLAIRE 25.00 363.00

ALI, ANGUNISSA 24.00 348.48

AMABILE, ANTOIN 7.00 1,321.04

AYALA, ENRIQUE 52.00 755.00

BEGUM, JAMILA 71.00 1,030.92

BICCARO, CONCETT 45.00 653.40

CARSWELL LUELL 70.00 1,016.40

CARSWELL LUELL 70.00 450.12

COLAMIT, JEAN 56.00 453.12

COLAMIT, JEAN 56.00 450.12

COLAMIT, JEAN 56.00 450.12

COLAMIT, JEAN 56.00 450.12

DIAZ, CARMEN 31.00 450.12

DIAZ, CARMEN 31.00 450.12

DIAZ, CARMEN 31.00 450.12

DIAZ, CARMEN 30.00 435.60

DONOSO, MARGARE 24.00 348.40

EARLINGTON, ALB 41.00 558.32

ECKMAN, LOIS 7.00 1,321.04

ESPINOZA, MARIA 45.00 653.40

EXPOSITO, ALFON 32.00 464.64

FERICIANO, JOAN 38.00 551.76

FERNANDEZ, ANA 28.00 466.56

FERRARA, ANN 42.00 609.84

FERRO, JOSEPHIN 70.00 1,016.40

GOMEZ, YOLANDA 7.75 112.53

GREENSPAN, ALIC 35.00 508.20

HUSTIU, SILVIA 6.00 87.12

JUMENEZ, EUGENI 67.00 972.84

MARTINEZ, EUGENI 67.00 972. INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS 198514 6/08/12 363.00 I 000010 GUILDNET 6/08/12 348.48 I 198515 000010 GUILDNET 1,321.04 I 755.04 I 1,030.92 I 198516 6/08/12 000010 GUILDNET 198517 6/08/12 000010 GUILDNET 6/08/12 GUILDNET 198518 000010 GUILDNET 198519 6/08/12 000010 198520 6/08/12 000010 GUILDNET 198521 6/08/12 000010 GUILDNET 198522 6/08/12 000010 GUILDNET 198523 6/08/12 000010 GUILDNET 198524 6/08/12 000010 GUILDNET GUILDNET 198525 6/08/12 000010 198526 6/08/12 000010 GUILDNET 198527 6/08/12 000010 GUILDNET 198528 6/08/12 000010 GUILDNET 198529 6/08/12 000010 GUILDNET 198530 6/08/12 000010 GUILDNET 198531 6/08/12 000010 GUILDNET 198532 6/01/12 000010 GUILDNET 198533 6/08/12 000010 GUILDNET 198534 GUILDNET 6/08/12 000010 198535 GUILDNET 6/08/12 000010 198536 6/08/12 000010 GUILDNET 198537 6/08/12 000010 GUILDNET 198538 6/08/12 000010 GUILDNET 198539 6/08/12 000010 GUILDNET 198540 5/25/12 000010 GUILDNET 198541 6/08/12 000010 GUILDNET 198542 6/08/12 000010 GUILDNET 198543 6/08/12 000010 GUILDNET 198544 6/08/12 000010 GUILDNET 198545 6/08/12 000010 GUILDNET 198546 6/08/12 000010 GUILDNET 198547 6/08/12 000010 GUILDNET 198548 6/08/12 000010 GUILDNET 6/08/12 198549 000010 GUILDNET 198550 6/08/12 000010 GUILDNET 198551 6/08/12 000010 GUILDNET 198552 6/08/12 000010 GUILDNET 198553 000010 GUILDNET 6/08/12 198554 6/08/12 000010 GUILDNET 198555 6/08/12 000010 GUILDNET 198556 6/08/12 000010 GUILDNET 198557 6/08/12 000010 GUILDNET 198558 6/08/12 000010 GUILDNET 198559 6/08/12 000010 GUILDNET 198560 6/08/12 000010 GUILDNET

198561

198562

6/08/12

000010

6/08/12 000010 GUILDNET

GUILDNET

	06/13/12 - IL # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 2 - GUI GUILDNET	- 30	)9
				SALES REGISTE	R		BILL WEEK ENDI	NG	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME					TYP	SURPLUS
198563	6/08/12	000010	GUILDNET	PRADO, NANCY	8.00		116.16	I	
198564	6/08/12	000010	GUILDNET	PROANO, ALICIA	21.00		325.92	I	
198565	6/08/12	000010	GUILDNET	PROANO, BRUNO	33.00		512.16	I	
198566	6/08/12	000010	GUILDNET	PRYCE, CLYDIA	16.00		232.32	I	
198567	6/08/12	000010	GUILDNET	RAMOS, ESTHER	18.00		261.36	I	
198568	6/08/12	000010	GUILDNET	RESTULA, VINCEN	20.00		290.40	I	
198569	6/08/12	000010	GUILDNET	RIVAS, GERTRUDI	20.00		290.40	I	
198570	6/08/12	000010	GUILDNET	RODRIGUEZ, FABI	28.00		406.56	I	
198571	6/08/12	000010	GUILDNET	RODRIGUEZ, HOLG	63.00		914.76	I	
198572	6/08/12	000010	GUILDNET	ROJAS, ANGEL	15.00		232.80	I	
198573	6/08/12	000010	GUILDNET	ROJAS, HAYDEE	20.00		310.40	I	
198574	6/08/12	000010	GUILDNET	RUBIANO, MARIA	20.00		290.40	I	
198575	6/08/12	000010	GUILDNET	SALJANIN, DILJA	61.00		885.72	I	
198576	6/01/12	000010	GUILDNET	SANCHEZ, ELIZAB	50.00		726.00	I	
198577	6/08/12	000010	GUILDNET	SCHILLIS, SAUL	8.00		116.16	I	
198578	6/08/12	000010	GUILDNET	SHELTON, AGUEDA	35.00		508.20	I	
198579	6/08/12	000010	GUILDNET	SOMRAJ, UMILLA	12.00		174.24	I	
198580	6/08/12	000010	GUILDNET	TOROSSIAN, PARI	28.00		406.56	I	
198581	6/08/12	000010	GUILDNET	VILLACRES, LUZ	8.00		116.16	I	
198582	6/08/12	000010	GUILDNET	VLAHOS, MARIE	50.00		726.00	I	
198583	6/08/12	000010	GUILDNET	WEISZ, KLARA	8.00		116.16	I	
198584	6/08/12	000010	GUILDNET	WEST, BALDWIN	20.00		290.40	I	
198585	6/08/12	000010	GUILDNET	WHITE, GLORIA	5.00		72.60	I	
198586	6/08/12	000010	GUILDNET	WHITLEY, MYRNA	20.00		290.40	I	
198587	6/08/12	000010	GUILDNET	YI, CARLOS	20.00		290.40	I	
198588	6/08/12	000010	GUILDNET	YIANTSELIS, VIR	7.00		1,321.04	I	
198589	6/08/12	000010	GUILDNET	ZARE, GLORIA	49.00		781.96	I	
198590	6/08/12	000010	GUILDNET	ZUMAETA, FANNY	63.75		925.65	I	
				PRADO, NANCY PROANO, ALICIA PROANO, BRUNO PRYCE, CLYDIA RAMOS, ESTHER RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, FABI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, HAYDEE RUBIANO, MARIA SALJANIN, DILJA SANCHEZ, ELIZAB SCHILLIS, SAUL SHELTON, AGUEDA SOMRAJ, UMILLA TOROSSIAN, PARI VILLACRES, LUZ VLAHOS, MARIE WEISZ, KLARA WEST, BALDWIN WHITE, GLORIA WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIR ZARE, GLORIA ZUMAETA, FANNY	2,512.25	0.00	40,443.03		
				 CATEGORY		0.00	40,443.03		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1	– 31	10
SALES UKN	⊥ # 0205	TOC 001	SUNNISIDE CITIWIDE	SALES REGISTER	3		BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198591	6/08/12	000122	HEALTH FIRST	BEGUM, MANWARA	24.00		405.12	I	
198592	6/08/12	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
198593	6/08/12	000122	HEALTH FIRST	BOCHENEC, JOLAN	42.00		708.96	I	
198594	6/08/12	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
198595	6/08/12	000122	HEALTH FIRST	CARRION, MARIA	48.00		810.24	I	
198596	6/08/12	000122	HEALTH FIRST	CEBALLOS, ANA	40.00		675.20	I	
198597	6/08/12	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
198598	6/08/12	000122	HEALTH FIRST	CORTES DE GALIN	30.00		506.40	I	
198599	6/08/12	000122	HEALTH FIRST	ESPAILLAT, AMPA	24.00		405.12	I	
198600	6/08/12	000122	HEALTH FIRST	ESTEVES, JOSE	42.00		708.96	I	
198601	6/08/12	000122	HEALTH FIRST	FERGERSON, TINA	31.00		523.28	I	
198602	6/01/12	000122	HEALTH FIRST	FERRERA, FRANCI	23.00		388.24	I	
198603	6/08/12	000122	HEALTH FIRST	FONTANES, PEDRO	49.00		827.12	I	
198604	6/08/12	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
198605	6/08/12	000122	HEALTH FIRST	FRIAS, BARBARA	8.00		135.04	I	
198606	6/08/12	000122	HEALTH FIRST	HENRY, BRENDA	4.00		67.52	I	
198607	6/08/12	000122	HEALTH FIRST	HENRY, BRENDA	4.00		67.52	I	
198608	6/08/12	000122	HEALTH FIRST	HERRING, CHARLE	4.00		67.52	Ī	
198609	6/08/12	000122	HEALTH FIRST	KAUR, HARBANS	49.00		827.12	I	
198610	6/08/12	000122	HEALTH FIRST	LARA, TOMASA	28.00		472.64	I	
198611	6/08/12	000122	HEALTH FIRST	LAZALA, GLADYS	49.00		827.12	I	
198612	6/08/12	000122	HEALTH FIRST	LOPEZ-RAMIREZ.	77.00		1,299.76	I	
198613	6/08/12	000122	HEALTH FIRST	MACARENA. SAHAR	63.00		1.063.44	Ī	
198614	6/08/12	000122	HEALTH FIRST	MARTIN. ARIANA	12.00		202.56	Ī	
198615	6/08/12	000122	HEALTH FIRST	RIVERA, CHRISTO	21.00		354.48	Ī	
198616	6/08/12	000122	HEALTH FIRST	RIVERA EDDIE	9 00		151 92	Ī	
198617	6/08/12	000122	HEALTH FIRST	RODRIGUEZ. MARG	20.00		337.60	Ī	
198618	6/08/12	000122	HEALTH FIRST	RIITZ TR SAMIIEL	17 00		286 96	Ī	
198619	6/08/12	000122	HEALTH FIRST	SALAZAR LUZ MA	56 00		945 28	Ī	
198620	6/08/12	000122	HEALTH FIRST	SALHIIANA VOLAN	40 00		675 20	Ī	
198621	6/08/12	000122	HEALTH FIRST	STERIOTHIT, TOETH	19.00		320 72	Ī	
198622	6/08/12	000122	UEALTH FIRST	OT DOMATHE CLA	69 00		1 164 72	Ī	
198623	6/08/12	000122	HEALIN FIRST	GIDIFI GEPTRID	28 00		472 64	I	
198624	6/08/12	000122	HEVILL EIVOI	VECA CLODIA	40.00		474.04 675 20	I	
198625	6/08/12	000122	DEVILD EIDGE	WILLIAMS DODNE	10.00		202 24	I	
190025	0/00/12	000122	HEALIH FIRSI	WILLIAMS, RODNE	10.00		303.04		
				REFERENCE  BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA HERRY, BRENDA HERRING, CHARLE KAUR, HARBANS LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD VEGA, GLORIA WILLIAMS, RODNE  CUSTOMER	1,170.00	0.00	19,749.60		
				CATEGORY	1,170.00	0.00	19,749.60		

RUN DATE SALES JRN				_			PAGE 1 NHP NEIGHBORF	- 31 HOOD H	HEALTH
			S A L	ES REGISTER	ξ		BILL MEEK ENI	)ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME			TAX AMT		TYP	SURPLUS
198626	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS AHMED, UMARA RS ARDITTO, PATRIC RS CHUKWUJIORAH, T RS DIAZ, CARMEN RS FERNANDEZ, MARI RS FLORES, MARITZA RS HAMPTON, PRISCI JONES, CYNTHIA RS KHALIL, RASHAN RS KHAN, FARHOUE	56.00		945.28	I	
198627	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS ARDITTO, PATRIC	30.00		506.40	I	
198628	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS CHUKWUJIORAH, T	43.00		725.84	I	
198629	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS DIAZ, CARMEN	20.00		337.60	I	
198630	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS FERNANDEZ, MARI	12.00		202.56	I	
198631	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS FLORES, MARITZA	70.00		1,181.60	I	
198632	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS HAMPTON, PRISCI	26.00		438.88	I	
198633	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS JONES, CYNTHIA	45.00		759.60	I	
198634	6/01/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS KHALIL, RASHAN	65.00		1,097.20	I	
198635	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS KHAN, FARUQUE	84.00		1,417.92	I	
198636	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS KROLL, KATHERIN	35.00		590.80	I	
198637	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS MORALES FERNAD	42.00		708.96	I	
198638	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS MOSKOWITZ, RONA	6.00		101.28	I	
198639	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS OCASIO, VIRGINI	22.00		371.36	I	
198640	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS RODRIGUEZ, JESS	25.00		422.00	I	
198641	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS RODRIGUEZ, MARI	12.00		202.56	I	
198642	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS SALVATO, MARY	8.00		135.04	I	
198643	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS SHEPPARD, ERMA	69.00		1,164.72	I	
198644	6/08/12	000120	NEIGHBORHOOD HEALTH PROVIDER	RS WILSON, SHERYL	32.00		540.16	I	
				RS KHAN, FARUQUE RS KROLL, KATHERIN RS MORALES FERNAD RS MOSKOWITZ, RONA RS OCASIO, VIRGINI RS RODRIGUEZ, JESS RS RODRIGUEZ, MARI RS SALVATO, MARY RS SHEPPARD, ERMA WILSON, SHERYL  CUSTOMER	702.00	0.00	11,849.76		
				COSTOMER	702.00	0.00	11,049.70		
				CATEGORY	702.00	0.00	11,849.76		

RUN DATE SALES JRN	, - ,	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 3 FID NY CATHOLIC/E	B12
Brilles orde	1 11 0203	100 001	SOMMISTED CITIVIDE	SALES REGISTER			BILL WEEK ENDING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198645	6/08/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63 I	
198646	6/08/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	38.00		641.06 I	
198647	6/08/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45 I	
198648	6/08/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.08 I	
198649	6/08/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81 I	
198650	6/08/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	40.00		674.80 I	
198651	6/08/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	31.00		522.97 I	
198652	6/08/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81 I	
				CUSTOMER	403.00	0.00	6,798.61	
				 CATEGORY	403.00	0.00	6,798.61	

RUN DATE 06/13/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 313 SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY UHC UNITED HEALTH											
SALES URN	L # UZ65	LOC 001	SUNNISIDE CITIWIDE	SALES REGISTER			BILL WEEK EN		6/15/12		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS		
198653	6/08/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20	I			
198654	6/08/12	000128	UNITED HEALTH CARE	MILLAN, ARMIDA	53.00		909.48	I			
198655	6/08/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	15.00		257.40	I			
198656	6/08/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	52.00		892.32	I			
198657	6/08/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48	I			
				CUSTOMER	218.00	0.00	3,740.88				
				CATEGORY	218.00	0.00	3,740.88				

RUN DATE	06/13/12 -		YSIDE CITYWIDE				PAGE 1 -	314
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			EHP EMBLEM HEAI	JTH
				SALES REGISTER			BILL WEEK ENDIN	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198658	6/08/12	000114	EMBLEM HEALTH	CAMPBELL, CAROL	21.00		294.00	I.
198659	6/08/12	000114	EMBLEM HEALTH	COPE, WILLIE	83.75		1,172.50	[
198660	6/08/12	000114	EMBLEM HEALTH	GAFFNEY, FREDER	20.00		280.00	[
198661	6/08/12	000114	EMBLEM HEALTH	HENRIQUEZ, TERE	20.00		280.00	[
198662	6/08/12	000114	EMBLEM HEALTH	JACKSON, FRANCE	35.00		490.00	[
198663	6/08/12	000114	EMBLEM HEALTH	KEATON, CATHERI	84.00		1,176.00	[
198664	6/08/12	000114	EMBLEM HEALTH	REYNOLDS, HARRI	12.00		168.00	[
198665	6/08/12	000114	EMBLEM HEALTH	WESTFIELD, BREN	56.00		784.00	[
				CUSTOMER	331.75	0.00	4,644.50	
				CATEGORY	331.75	0.00	4,644.50	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 31	L5
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			HIP HEALTH I	NSURAI	NCE PLAN
				SALE	S REGISTER			BILL WEEK EN	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198666	6/08/12	000136	HEALTH INSURANCE PLAN	OF NV	AHMAD, AMATUL	8.00		135.04	т	
198667		000136			•				± +	
	6/08/12		HEALTH INSURANCE PLAN		CIPRIAN, JACQUE	16.00		270.08	Τ.	
198668	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	36.00		607.68	Ι	
198669	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	63.00		1,063.44	I	
198670	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	30.00		506.40	I	
198671	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	35.00		590.80	I	
198672	5/04/12	000136	HEALTH INSURANCE PLAN	OF NY	PARADISE, ANITA	56.00		945.28	I	
198673	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	SHAH, HANSIKABE	5.00		84.40	I	
198674	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	12.00		202.56	I	
198675	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	20.00		337.60	I	
198676	6/08/12	000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	16.00		270.08	I	
					CUSTOMER	297.00	0.00	5,013.36		
					CATEGORY	297.00	0.00	5,013.36		

RUN DATE	06/13/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 31	.6
SALES JRN	rL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HPS HEALTH PI	JUS	
				SALES REGISTER			BILL WEEK END	ING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198677	6/08/12	000138	HEALTH PLUS PHSP, INC	DENNISON, KELVI	28.00		476.00	I	
198678	6/08/12	000138	HEALTH PLUS PHSP, INC	ESPERSON, CLAUD	16.00		272.00	I	
198679	6/08/12	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	24.00		408.00	I	
198680	6/08/12	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	25.00		425.00	I	
198681	6/08/12	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	18.00		306.00	I	
				CUSTOMER	111.00	0.00	1,887.00		
				CATEGORY	111.00	0.00	1,887.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - MPH METROPLUS HE	
				REG NY NY SALES REGISTER	1		BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198682	6/08/12	000130	METROPLUS HEALTH	ANDERSON, BETH	26.00		445.90 I	
198683	6/08/12	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20 I	
198684	6/08/12	000130	METROPLUS HEALTH	BEDOYA, MONICA			240.10 I	
198685	6/08/12	000130	METROPLUS HEALTH	BRACERO, HELEN	56.00		960.40 I	
198686	6/08/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS			703.15 I	
198687	6/08/12	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50 I	
198688	6/08/12	000130	METROPLUS HEALTH	DAVIS, ANGIE			2,280.95 I	
198689	6/08/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA			274.40 I	
198690	6/08/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA			137.20 I	
198691	6/08/12	000130	METROPLUS HEALTH	GALAS, TERESA			600.25 I	
198692	6/08/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU			548.80 I	
198693	6/08/12	000130	METROPLUS HEALTH	PERSAD, USHA			1,200.50 I	
198694	6/08/12	000130	METROPLUS HEALTH	PUCHUELA, MARIA			960.40 I	
198695	6/08/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI			411.60 I	
198696	6/08/12	000130	METROPLUS HEALTH	RYALS, CHARLES			205.80 I	
198697	6/01/12	000130	METROPLUS HEALTH	SANTORO, MATTHE			926.10 I	
198698	6/08/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	24.00		411.60 I	
198699	6/01/12	000130	METROPLUS HEALTH	VALLE, BLASINA	61.00		1,046.15 I	
				CUSTOMER	800.00	0.00	13,720.00	
				CATEGORY	800.00	0.00	13,720.00	

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 31	.8
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			WEL WELCARE O	F NY	
				SALE	S REGISTEF	?		BILL WEEK END	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198700	6/08/12	000124	WELCARE OF NEW YORK,	INC.	GENAO, DANIELA	55.00		946.00	I	
198701	6/08/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH	42.00		722.40	I	
198702	6/08/12	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	42.00		722.40	I	
198703	6/08/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	63.00		1,083.60	I	
					CUSTOMER	202.00	0.00	3,474.40		
					CATEGORY	202.00	0.00	3,474.40		

RUN DATE	06/13/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	319
SALES JRN	IL # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG I	NY NY			NPS NY PRESBYTI	ERIAN SELECT
				SALES	S REGISTER			BILL WEEK ENDIR	NG 6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
198704	6/08/12	000134	NY-PRESBYTERIAN SYSTEM	M SELECT	KARASSAVIDES, A	35.00		600.60	Ι
					CATEGORY	35.00	0.00	600.60	

RUN DATE (		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMG AMERIGROU		10
DALLO CIUVI	L # 0203	100 001	SOUNTSIDE CITIVIDE	SALES REGISTE	R		BILL WEEK ENI		6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198705 198706 198707	6/01/12 6/08/12 6/08/12	000132 000132 000132	AMERIGROUP AMERIGROUP AMERIGROUP	FERNANDEZ, NORK GUERRA, LORRAIN HAWKINS S, MA	47.00 60.00 10.00		792.89 1,012.20 168.70	I I I	
				CUSTOMER	117.00	0.00	1,973.79		
				CATEGORY	117.00	0.00	1,973.79		

		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NTV NTV			PAGE 1 PAR PRIVATE	- 32	21
SALES URN	ш # 0205	TOC 001	S A L E	NY NY S R E G I S T E R			BILL WEEK ENI	OING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		HOURS			TYP	SURPLUS
198708 198709 198710 198711 198712 198713 198714 198715 198716	6/08/12 6/08/12 5/18/12 5/25/12 6/01/12 6/08/12 6/08/12 6/08/12	000002 000002 000002 000002 000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES	GRECH, JANE KOZHUSHICO, ROZ MANIACE, AGNES MANIACE, AGNES MANIACE, AGNES MANIACE, AGNES MANIACE, VINCEN ROCSIN, FLORICA TEODORU, MIRELL	4.00 2.00 2.00 2.00 6.00 6.00 20.00 4.00		29.00 29.00 87.00 87.00 290.00 58.00	I I I I I I I	
198717	6/08/12	000002	SUNNYSIDE COMMUNITY SERVICES	TUCCI, DOROTHY CUSTOMER		0.00	116.00  899.00		
198718	6/08/12	000040	DUISIN, CHRISTINE				310.00	I	
198719 198720	6/08/12 6/08/12	000049 000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR				344.75 206.85	I I	
				CUSTOMER	40.00	0.00	551.60		
198721	6/08/12	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
198722	6/08/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	137.00	0.00	3,222.60		

			YSIDE CITYWIDE				-	- 32	
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CAS CHILDREN		
			5	ALES REGISTER			BILL WEEK ENI	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198723	6/08/12	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	25.00		387.50	I	
198724	6/01/12	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	4.00		62.00	I	
198725	6/08/12	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	23.50		364.26	I	
198726	6/08/12	000088	CHILDREN'S AID SOCIETY	VARGAS, BRANDON	23.50		364.26	I	
198727	6/08/12	000088	CHILDREN'S AID SOCIETY	VARGAS, JOHN	16.00		248.01	I	
							1 406 03		
				CUSTOMER	92.00	0.00	1,426.03		
				CATEGORY	92.00	0.00	1,426.03		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 323 PAR PRIVATE BILL WEEK ENDING 6/15/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
198728	6/08/12	000098	MILDRED PANSE	PANSE, MILDRED	20.00		310.00 I	
				CATEGORY	20.00	0.00	310.00	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 32 ELD ELDERSERVEHEAI BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
198729 198730	6/08/12 6/08/12	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	25.00 19.00		356.25 I 270.76 I	
				CUSTOMER	44.00	0.00	627.01	
				CATEGORY	44.00	0.00	627.01	

		06/13/12 - L # 0285		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 3 PAR PRIVATE BILL WEEK ENDING	6/15/12
]	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1	L98731	6/08/12	000143	ETTORE COPPOLA	COPPOLA, ETTORE	17.00		271.00 I	
1	L98732	6/08/12	000145	LARRY EISENBERG	BERGER, TESS	45.00		724.50 I	
					CATEGORY	62.00	0.00	995.50	

RUN DATE 06/13/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 3									- 32	6
SALES JRN	L # 0285	LOC 001	SUNNYSIDE CITYWIDE	E REG	NY NY			CCM COMPREHEN	ISIVE	CARE MGMT
				SALE	S REGISTER			BILL WEEK ENI	DING	6/15/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198733	6/08/12	000150	COMPREHENSIVE CARE	MANAGEMENT	BONES, ANA	16.00		225.60	I	
198734	6/08/12	000150	COMPREHENSIVE CARE	MANAGEMENT	GARCIA, MARIA	40.00		564.00	I	
198735	6/08/12	000150	COMPREHENSIVE CARE	MANAGEMENT	MELAMED, ESTER	12.00		169.20	I	
198736	6/08/12	000150	COMPREHENSIVE CARE	MANAGEMENT	ROSARIO, CELEST	36.00		507.60	I	
					CUSTOMER	104.00	0.00	1,466.40		
					CATEGORY	104.00	0.00	1,466.40		

RUN DATE 06/13/12 - SUP SUNI SALES JRNL # 0285 LOC 001			SUNNYSIDE CITYWIDE REG NY NY			PAGE 1 - 32 PAR PRIVATE BILL WEEK ENDING			
									6/15/12
INVOICE#	DATE		CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
198737	6/08/12	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	155.50		2,482.25	I	
198738	6/08/12	000165	ALZHEIMER'S ASSOCIATION	TUCCI, DOROTHY	4.00		62.00	I	
198739	6/08/12	002215	KEITH SALMON	LAWRANCE, LILLA	20.00		322.00	I	
198740	6/08/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I	
198741	6/08/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I	
198742	6/08/12	006337	STEPHEN EDEL	EDEL, CANDACE	79.00		1,248.50	I	
198743	6/08/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I	
198744	6/08/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I	
198745	6/08/12	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	6.00		99.00	I	
198746	6/08/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I	
198747	6/08/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	25.00		387.50	I	
198748	6/08/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	3.00		46.50	I	
198749	6/08/12	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I	
198750	6/08/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	2.00		31.00	I	
198751	6/08/12	010352	BETTIE GIACOMO	GIACOMO, BETTIE	4.00		62.00	I	
198752	6/08/12	010375	DOMINICA IRAOLA	IRAOLA, LILIAN	15.00		243.75	I	
198753	6/08/12	010377	DOMINICA IRAOLA	IRAOLA, ANTONIO	12.00		195.00	I	
198754	6/08/12	010529	STEPHEN WEISS	WEISS, STELLA	4.00		68.00	I	
198755	6/08/12	010530	DANA SITILDES	ANSELMI, PETER	28.00		446.00	I	
				CATEGORY -	439.50	0.00	7,024.50		
				LOCATION	22,321.65	0.00	343,122.26		
				COMPANY	22,321.65	0.00	343,122.26		

RUN DATE 06/13/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 328
SALES JRNL # 0285 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER

BILL WEEK ENDING 6/15/12

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

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