RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 1 SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SHP SENIOR HEALTH PARTNERS SALES REGISTER BILL WEEK ENDING 5/18/12 CUST NO CUSTOMER NAME INVOICE# DATE REFERENCE HOURS TAX AMT AMOUNT TYP SURPLUS CUSTOMER NAME

REFERENCE

REFERENCE

SENIOR HEALTH PARTNERS
COLON, RAYMUNDA
SENIOR HEALTH PARTNERS
SENIOR HEALTH PARTNERS
SENIOR HEALTH PARTNERS
SENIOR HEALTH PARTNERS
DABU, JUANITA
16.00
SENIOR HEALTH PARTNERS
DABU, JUANITA
4.00
SENIOR HEALTH PARTNERS
FENTON, JESSIE
4.00
SENIOR HEALTH PARTNERS
FENTON, JESSIE
4.00
SENIOR HEALTH PARTNERS
GHILIOTTY, FLOR
SENIOR HEALTH PARTNERS
GRAFSTEIN, LILL
7.00
SENIOR HEALTH PARTNERS
GRAFSTEIN, LILL
7.00
SENIOR HEALTH PARTNERS
GRAFSTEIN, KHAMAT
33.00
SENIOR HEALTH PARTNERS
HARIDIN, KHAMAT
33.00
SENIOR HEALTH PARTNERS
HARIDIN, RAMDIA
136.00
SENIOR HEALTH PARTNERS
HERNANDEZ, FRAN
12.00
SENIOR HEALTH PARTNERS
HERNANDEZ, FRAN
12.00
SENIOR HEALTH PARTNERS
SIERRA, MIRIAM
25.00
SENIOR HEALTH PARTNERS
SIERRA, MIRIAM
25.00
SENIOR HEALTH PARTNERS
SIERRA, MIRIAM
25.00
SENIOR HEALTH PARTNERS
VASQUEZ, CORNEL
20.00
SENIOR HEALTH PARTNERS
VOO, LUZ
4.00 194608 5/11/12 000082 57.00 I 194609 5/11/12 000082 57.00 I 256.50 194610 5/11/12 000082 194611 5/11/12 000082 498.75 194612 5/11/12 000082 498.75 194613 228.00 5/11/12 000082 194614 5/11/12 000082 57.00 194615 5/11/12 000082 57.00 194616 5/11/12 000082 57.00 194617 5/11/12 000082 456.00 1,400.00 194618 5/11/12 000082 194619 5/11/12 000082 285.00 194620 5/11/12 000082 470.25 194621 5/11/12 000082 1,938.00 194622 5/11/12 000082 171.00 194623 5/11/12 85.50 000082 194624 5/11/12 1,083.00 000082 194625 5/11/12 000082 285.00 194626 5/11/12 000082 356.25 194627 5/04/12 000082 171.00 194628 5/11/12 000082 570.00 194629 5/04/12 000082 285.00 194630 5/11/12 000082 342.00 171.00 194631 5/11/12 000082 5/11/12 194632 000082 57.00 ----------CUSTOMER 603.00 0.00 9,893.00

CATEGORY

603.00 0.00

9,893.00

			YSIDE CITYWIDE				PAGE 1	-	2
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		F /10 /10
			S	BALES REGISTER			BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
104600	E /11 /10				56.00		016 40	_	
194633	5/11/12	800000	VISITING NURSE SERVICE	ABINANTI, IRENE	56.00		816.48	Τ	
194634	5/11/12	800000	VISITING NURSE SERVICE	ABREU, ANA	12.00		174.96	I	
194635	5/11/12	800000	VISITING NURSE SERVICE	ADAMES, OLGA	25.00		364.50	I	
194636	5/11/12	000008	VISITING NURSE SERVICE	ADAMES, RICARDO	34.75		506.66	I	
194637	5/11/12	800000	VISITING NURSE SERVICE	ADAMS, MYRIAM	70.00		1,020.60	I	
				CUSTOMER	197.75	0.00	2,883.20		
				CATEGORY	197.75	0.00	2,883.20		

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	3
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ON	LY
				S	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194638	5/11/12	800000	VISITING NURSE SERVICE	ADUN, JEANETTE	47.00		685.26 I	
					CATEGORY	47.00	0.00	 685.26	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE S A	REG NY NY LES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194639	5/11/12	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	45.00		656.10 I	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	5
SALES JRN	IL # 0281	LOC 001		REG NY NY			VCP CHOICE LH		
			S	ALES REGISTER			BILL WEEK END	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194640	5/11/12	000008	VISITING NURSE SERVICE	AGUILAR-PROCE,	42.00		612.36	I	
194641	5/11/12	800000	VISITING NURSE SERVICE	AKBAR, NASEEM	20.00		291.60	I	
				CUSTOMER	62.00	0.00	903.96		
				CATEGORY	62.00	0.00	903.96		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	6
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194642	4/27/12	000008	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
194643	5/04/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	5.00		72.90	I	
194644	5/11/12	800000	VISITING NURSE SERVICE	ALEKSANDORVA, S	30.00		437.40	I	
				CUSTOMER	40.00	0.00	583.20		
				CATEGORY	40.00	0.00	583.20		

			YSIDE CITYWIDE	550 100			PAGE 1 -	7
SALES JRN	Г # 0581	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	
	D.1.	G11GE 110	arramoved vive				11/07PT	G
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194645	5/11/12	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA	30.75		448.34 I	
194646	5/11/12	800000	VISITING NURSE SERVICE	ALMANZAR, REMIG	4.00		58.32 I	
				CUSTOMER	34.75	0.00	506.66	
				CATEGORY	34.75	0.00	506.66	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	8
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	C .
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194647	5/11/12	800000	VISITING NURSE SERVICE	E ALVAREZ, NAZARE	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

			YSIDE CITYWIDE				PAGE 1 -	9
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDIN	IG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194648	5/11/12	000008	VISITING NURSE SERVICE	ANDREWS, JOHNNI	56.00		816.48 I	
194649	5/11/12	800000	VISITING NURSE SERVICE	ANGRISANO, RUTH	12.00		174.96 I	• •
				CUSTOMER	68.00	0.00	991.44	
				CATEGORY	68.00	0.00	991.44	

RUN DATE 05/ SALES JRNL #	/16/12 - SUP SUNN # 0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING 1 BILL WEEK EN		
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	/11/12 000008 /11/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	19.75 59.75		287.96 871.16	I I	
			CUSTOMER	79.50	0.00	1,159.12		
			CATEGORY	79.50	0.00	1,159.12		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - 11 VCP CHOICE LHCSA BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194652	5/11/12	800000	VISITING NURSE SERVICE	AOUN, ODETTE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	12 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194653	5/11/12	800000	VISITING NURSE SERVICE	APPELL, LAWRENC	19.75		287.96 I	
				CATEGORY	19.75	0.00		

		UNNYSIDE CITYWIDE	5-2			PAGE 1 -	10
SALES JRNL	# 0281 LOC 00		REGNY NY SALES REGISTER			VCP CHOICE LHC BILL WEEK ENDI	
INVOICE#	DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
	5/11/12 000008 5/11/12 000008		ARIAS, LEOPOLDI ARIAS, MAGDALEN	36.00 46.00		524.88 670.68	I I
			CUSTOMER	82.00	0.00	1,195.56	
			CATEGORY	82.00	0.00	1,195.56	

RUN DATE (SALES JRN)		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	14 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194656 194657	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		23.00 12.00		335.34 I 174.96 I	
				CUSTOMER	35.00	0.00	510.30	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	15
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194658	5/11/12	800000	VISITING NURSE SERVICE	ASHLEY, CLYDE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 16	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 5	/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
194659	5/11/12	000008	VISITING NURSE SERVICE	AVILA, ENIDIA	20.00		291.60 I	
							001 60	
				CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	DDG 1911				17
SALES JRNI	L # 0281	LOC 001		REGNY NY SALES REGISTER			LTC NURSING HOME BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194660	5/11/12	800000	VISITING NURSE SERVICE	AZAD, ABUL	21.25		309.83 I	
				CATEGORY	21.25	0.00	309.83	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	ING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
194661	5/11/12	000008	VISITING NURSE SERVICE	BADILLO, JOVITA	12.00		174.96	I
194662	5/11/12	800000	VISITING NURSE SERVICE	BAEZ, JUAN	35.00		510.30	I
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00	685.26	

-	, - ,		YSIDE CITYWIDE				11100	- 1	
SALES JRN	SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY						LTC NURSING F	,	
				SALES REGISTE	R		BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194663	5/11/12	000008	VISITING NURSE SERVIC	E BALLAS, VIOLA	30.00		437.40	I	
194664	4/27/12	800000	VISITING NURSE SERVIC	E BAQUERIZO, ANNA	8.00		116.64	I	
194665	5/11/12	000008	VISITING NURSE SERVIC	E BAQUERIZO, ANNA	55.50		809.19	I	
194666	5/11/12	000008	VISITING NURSE SERVIC	E BARDEANU, VICTO	45.00		656.10	I	
194667	5/11/12	800000	VISITING NURSE SERVIC	E BATTLE, JEANETT	27.75		404.60	I	
				CUSTOMER	166.25	0.00	2,423.93		
				CATEGORY	166.25	0.00	2,423.93		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	20
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194668	5/11/12	800000	VISITING NURSE SERVICE	BECERRA, FELIPE	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH		21
DALLD OICE	1L # 0201	100 001		SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194669 194670	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BELLOROFONTE, M BERENBLIT, SARA	151.00 4.00		2,201.58 58.32	I	
				CUSTOMER	155.00	0.00	2,259.90		
				 CATEGORY	155.00	0.00	2,259.90		

RUN DATE 05/1 SALES JRNL #	6/12 - SUP SUNN 0281 LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 22 LTC NURSING HOMEW/C BILL WEEK ENDING	
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	1/12 000008 1/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	25.00 30.00		364.50 I 437.40 I	
			CUSTOMER	55.00	0.00	801.90	
			CATEGORY	55.00	0.00	801.90	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	23
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			5	BALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194673	5/11/12	000008	VISITING NURSE SERVICE	BHULLA, JIWAN	48.00		699.84	I	
194674	5/11/12	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	20.00		291.60	I	
				CUSTOMER	68.00	0.00	991.44		
				COSTOMER	08.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 24 LTC NURSING HOMEW/O WALLS (I BILL WEEK ENDING 5/18/12	LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194675	5/11/12	800000	VISITING NURSE SERVICE	BLANCAFLOR, PUR	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	25	
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A	
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 5/18/12	
ı										
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
ı										
ı	194676	5/11/12	800000	VISITING NURSE SERVICE	BLUNNIE, ELIZAB	22.25		324.41 I		
ı										
ı										
ı					CATEGORY	22.25	0.00	324.41		

	16/12 - SUP SUNN					PAGE 1 -	26
SALES JRNL #	0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	NG F/10/10
			SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE# D	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
104688	11/10 00000					001 60	_
	11/12 000008 11/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BOCANEGRA, GLAD BONILLA, ESPERA	20.00 49.00		291.60 714.42	1 T
1940/0 5/	11/12 000000	VISITING NORSE SERVICE	BONILLA, ESPERA	49.00		714.42	
			CUSTOMER	69.00	0.00	1,006.02	
			CATEGORY	69.00	0.00	1,006.02	
			CALEGORI	09.00	0.00	1,000.02	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	27 A
	- "			ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194679	5/11/12	800000	VISITING NURSE SERVICE	BONILLA, LYDIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	28
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			i	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
104600	E / 1 1 / 1 0				05 00		264 50 -	
194680	5/11/12	800000	VISITING NURSE SERVICE	BONSIGNORE, GAE	25.00		364.50 I	
				CA EECODY	25 00	0.00	264 50	
				CATEGORY	25.00	0.00	364.50	

	TE 05/16/12 JRNL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - : AUR ADULT REHAB O	29 NLY
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194681	5/11/12	800000	VISITING NURSE SERVICE	BORSARI, ANTOIN	4.00		58.32 I	
				CATEGORY	4.00	0.00	58.32	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	30
SALES JRN	L # 0281	LOC 001		REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194682	5/11/12	000008	VISITING NURSE SERVICE	BORYSEWICZ, MAR	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	31
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194683	5/11/12	800000	VISITING NURSE SERVICE	BOYADJIAN, ZARO	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				PAGE 1 -	32
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
194684	3/16/12	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	9.00		131.22 I	
194685	3/23/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	18.00		262.44 I	
194686	5/04/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	27.00		393.66 I	
194687	5/04/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	36.00		524.88 I	
194688	5/11/12	800000	VISITING NURSE SERVICE	BOYLAN, FRANK	63.00		918.54 I	
				CUSTOMER	153.00	0.00	2,230.74	
				CATEGORY	153.00	0.00	2,230.74	

RUN DAT	TE 05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	33
SALES 3	JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194689	5/11/12	800000	VISITING NURSE SERVICE	BROWN, BETTY	14.75		215.06 I	
				CATEGORY	14.75	0.00	215.06	

			YSIDE CITYWIDE	DDG NV NV			PAGE 1 -	34
SALES JRN	IL # 0281	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
194690 194691	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		9.00 40.00		131.22 583.20	[[
				CUSTOMER	49.00	0.00	714.42	
				CATEGORY	49.00	0.00	714.42	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	35 G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194692	5/11/12	800000	VISITING NURSE SERVICE	BURNS, MARGARET	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

				YSIDE CITYWIDE				PAGE 1 -	36
SA	LES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			LAD NURSING HOME BILL WEEK ENDING	
					SALES REGISIER			BILL MEEK ENDING	5/10/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19	4693	5/11/12	800000	VISITING NURSE SERVICE	BUSCARELLO, JOH	70.00		1,020.60 I	
					CATEGORY	70.00	0.00	1,020.60	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	37
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194694	5/11/12	800000	VISITING NURSE SERVICE	CABA, PURA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

	05/16/12 - NL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEG NY NY			PAGE 1 -	38
SALES URI	NL # U281	TOC 001		REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194695	5/11/12	800000	VISITING NURSE SERVICE	CALABRO, JOSEPH	70.00		1,020.60	I
				CATEGORY	70.00	0.00	1,020.60	

			YSIDE CITYWIDE				11101		39
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		F /10 /10
			'	SALES REGISTER			BILL WEEK END	TING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194696	5/11/12	000008	VISITING NURSE SERVICE	CALDERON, FRANC	43.50		634.24	I	
194697	5/11/12	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	36.00		524.88	I	
				CUSTOMER	79.50	0.00	1,159.12		
				CATEGORY	79.50	0.00	1,159.12		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	40	
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADUL		
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
194698	5/11/12	800000	VISITING NURSE SERVICE	CALKOSZ, JOSEFI	63.00		918.54 I		
				CATEGORY	63.00	0.00	918.54		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	41
SALES JRN	rL # 0281	LOC 001		REG NY NY			VCP CHOICE LHCS	
			i	SALES REGISTER			BILL WEEK ENDIN	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194699	5/11/12	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	55.25		805.55	Γ
				CATEGORY	55.25	0.00	805.55	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	42
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	//O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194700	5/11/12	800000	VISITING NURSE SERVICE	CANO, ADELINA	42.00		612.36 I	
					40.00			
				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 4 ADU ADULT	43
DALES UKN.	L # 0201	HOC 001		SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194701	5/11/12	000008	VISITING NURSE SERVICE	CANO, GLORIA	17.50		255.15 I	
				CAMPRODY.	17.50			
				CATEGORY	17.50	0.00	255.15	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	44	
١	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA		
١				S	SALES REGISTER			BILL WEEK ENDING	5/18/12	
ı										
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
ı										
ı	194702	5/11/12	800000	VISITING NURSE SERVICE	CAPORASO, VINCE	84.00		1,224.72 I		
١										
١										
ı					CATEGORY	84.00	0.00	1,224.72		

١	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	45
ı	SALES JRN	L # 0281	LOC 001		REG NY NY			LTC NURSING HOME	•
ı				S	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194703	5/11/12	800000	VISITING NURSE SERVICE	CARBAJAL, MERCE	35.00		510.30 I	
ı					CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE				11101		46
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY	_		VCP CHOICE LH		F /10 /10
				SALES REGISTE	R		BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194704	5/11/12	000008	VISITING NURSE SERVI	E CARDONA, MARIA	41.00		597.78	I	
194705	5/11/12	800000	VISITING NURSE SERVI	E CARDOSO, ORLAND	55.75		812.84	I	
194706	5/11/12	800000	VISITING NURSE SERVI	E CARDOZA, ANAIDA	32.00		466.56	I	
194707	5/04/12	800000	VISITING NURSE SERVI	E CARELA-REYES, M	5.00		72.90	I	
194708	5/11/12	800000	VISITING NURSE SERVI	E CARELA-REYES, M	25.50		371.79	I	
				CUSTOMER	159.25	0.00	2,321.87		
				 CATEGORY	159.25	0.00	2,321.87		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - HOA HOSPICE ADUL	47 T
	_ "			ALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194709 194710	4/27/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CARRALERO, ROSA CARRALERO, ROSA	6.00 41.00		87.48 I 597.78 I	
194/10	5/11/12	000000	VISITING NURSE SERVICE	CARRALERO, ROSA	41.00		397.76 1	
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00		

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	
			S	SALES REGISTER			BILL WEEK ENDIN	G 5/18/12
INVOICE	C# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194711	5/11/12	800000	VISITING NURSE SERVICE	CARTAGENA, FRAN	56.00		816.48 I	
				CATEGORY	56.00	0.00	 816.48	

RUN DATE	05/16/12 -	- SUP SUNN	IYSIDE CITYWIDE				PAGE 1	- 49	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			ADU ADULT BILL WEEK EN	DING 5/18/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPL	US
194712	5/11/12	800000	VISITING NURSE SERVICE	CASTANO, MARIA	6.00		87.48	I	
				CATEGORY	6.00	0.00	87.48		

RUN DATE SALES JRN		LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHCS. BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194713	5/11/12	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 51	Ĺ
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			5	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194714	5/11/12	000008	VISITING NURSE SERVICE	CELIO, MARION	3.00		43.74	I	
194715	5/11/12	800000	VISITING NURSE SERVICE	CELIO, MARION	3.00		43.74	I	
				CUSTOMER	6.00	0.00	87.48		
				CATEGORY	6.00	0.00	87.48		

			YSIDE CITYWIDE				PAGE 1 -	3.5
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	-
			i	SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194716	5/04/12	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	6.25		91.13	I
194717	5/11/12	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	35.00		510.30	I
				CUSTOMER	41.25	0.00	601.43	
				CATEGORY	41.25	0.00	601.43	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	53
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194718	5/11/12	800000	VISITING NURSE SERVICE	CHAPPLE, VICKIE	17.50		255.15 I	
				CATEGORY	17.50	0.00	255.15	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	54
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
				SALES REGISTER			BILL WEEK ENDING	5/18/12
		~~						
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
104710	F /11 /10	000000	THE THE MIDE CONTROL	GUADI EG DIEDDE	20 00		427 40 T	
194719	5/11/12	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	
				CAILGORI	30.00	0.00	437.40	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	55
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	W/O WALLS LT
ı				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYE	SURPLUS
ı									
	194720	5/11/12	800000	VISITING NURSE SERVICE	CHARLES, JOSE	15.00		218.70 I	
ı									
					CATEGORY	15.00	0.00	218.70	

			YSIDE CITYWIDE	222			PAGE 1 -	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			VCP CHOICE LHC	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194721	5/11/12	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	50.00		729.00	I
				CATEGORY	50.00	0.00	729.00	

RUN D.	ATE 05/16/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - !	57
SALES	JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW,	O WALLS (LT
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19472	2 5/11/12	800000	VISITING NURSE SERVICE	CHIANETTA, JOSE	34.00		495.72 I	
				CATEGORY	34.00	0.00	495.72	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	58
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	A
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194723	5/11/12	800000	VISITING NURSE SERVICE	CHINGA, ALBA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	59
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	•
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194724	5/11/12	800000	VISITING NURSE SERVICE	CHO, MOGEE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE SALES JRN	, - ,			REG NY NY			VCP CHOICE L	HCSA	60
			S	ALES REGISTED	R		BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194725	4/27/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	8.00		116.64	I	
194726	5/11/12	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	56.00		816.48	I	
194727	5/11/12	800000	VISITING NURSE SERVICE	CHU, MOLLY	40.00		583.20	I	
194728	5/11/12	800000	VISITING NURSE SERVICE	CHUCK, ENA	32.00		466.56	I	
				CUSTOMER	136.00	0.00	1,982.88		
				CATEGORY	136.00	0.00	1,982.88		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	1
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194729	5/11/12	800000	VISITING NURSE SERVICE	CIPRIAN, FREDEV	53.75		783.68 I	
				CATEGORY	53.75	0.00	783.68	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	62 G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194730	5/11/12	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 6	53
SALES JRN	ъ # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW,	O WALLS (LT
				SALES REGISTI	E R		BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194731	5/11/12	000008	VISITING NURSE SERVICE	COLLER, FELISA	20.00		291.60	I	
194732	5/11/12	800000	VISITING NURSE SERVICE	COLLER, JOSE	15.00		218.70	I	
194733	5/11/12	800000	VISITING NURSE SERVICE	COLON, ANTONIA	42.00		612.36	I	
194734	4/27/12	800000	VISITING NURSE SERVICE	COLON, ISABEL	12.00		174.96	I	
194735	5/11/12	800000	VISITING NURSE SERVICE	COLON, ISABEL	18.00		262.44	I	
				CUSTOMER	107.00	0.00	1,560.06		
				CATEGORY	107.00	0.00	1,560.06		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE (BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194736	5/11/12	800000	VISITING NURSE SERVICE	CORDERO, NELLY	168.00		2,449.44 I	
				CATEGORY	168.00	0.00	2,449.44	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	65
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194737	5/11/12	800000	VISITING NURSE SERVICE	CORREA, MARGARI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE					66
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCS	
				SALES REGISIER			DILL MEEV FINDIN	G 5/10/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194738	5/11/12	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	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 SALES REGISTER			PAGE 1 - 67 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194739 194740	5/11/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		10.00 6.00		145.80 I 87.48 I
				CUSTOMER	16.00	0.00	233.28
				CATEGORY	16.00	0.00	233.28

RUN DATE 05	/16/12 - SUP S	SUNNYSIDE CITYWIDE				PAGE 1 -	68
SALES JRNL	# 0281 LOC 0	001 SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE# I	DATE CUST	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194741 5,	/11/12 00000	08 VISITING NURSE SERVICE	COTTON, MARCUS	4.00		58.32	I
194742 5,	/11/12 00000	08 VISITING NURSE SERVICE	COVALIU, SIMION	30.00		437.40	I
			CUSTOMER	34.00	0.00	495.72	
			CATEGORY	34.00	0.00	495.72	

RUN DATE (05/16/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	- 69)	
SALES JRNI	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE AI	-		
			2	SALES F	EGISTE	R		BILL WEEK END	ING	5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REF	'ERENCE	HOURS	TAX AMT	AMOUNT 7	ГҮР	SURPLUS	
194743	5/11/12	800000	VISITING NURSE SERVICE	COX,	PETRA	19.00		277.02	I		
					- CATEGORY	19.00	0.00	277.02			

RUN DATE 05/16 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 70 ADU ADULT
	200 001		SALES REGISTER			BILL WEEK ENDING 5/18/12
INVOICE# DAT	E CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194744 5/11 194745 5/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	COZZOLINO, MARG CROUSE, MARIA	3.00		43.74 I 43.74 I
			CUSTOMER	6.00	0.00	87.48
			CATEGORY	6.00	0.00	87.48

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	71
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194746	5/11/12	800000	VISITING NURSE SERVICE	CRUZ, HECTOR	35.00		510.31 I	
				CATEGORY	35.00	0.00	510.31	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	72
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194747	5/11/12	800000	VISITING NURSE SERVICE	CRUZ, JUANA	16.00		233.28 I	
				CATEGORY	16.00	0.00	233.28	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 73
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	OMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	DING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
194748	5/11/12	000008	VISITING NURSE SERVICE	DAMICO, ANGELA	20.00		291.60	I
194749	5/11/12	800000	VISITING NURSE SERVICE	DANNY, RAMDULAR	56.00		816.48	I
				CUSTOMER	76.00	0.00	1,108.08	
				CATEGORY	76.00	0.00	1,108.08	

			YSIDE CITYWIDE				PAGE 1 - 7	74
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194750	5/11/12	800000	VISITING NURSE SERVICE	DAVIS, LOUELLEN	41.75		608.72 I	
				CATEGORY	41.75	0.00	608.72	

	05/16/12 - IL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	75
				ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194751	5/11/12	800000	VISITING NURSE SERVICE	DEJESUS, FELIX	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

	TE 05/16/12 JRNL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING	HOMEW/	,
				SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194752 194753 194754	5/11/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DELACRUZ, SEFER	40.00 38.00 5.00		583.20 554.04 72.90	I I I	
				CUSTOMER	83.00	0.00	1,210.14		
				CATEGORY	83.00	0.00	1,210.14		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS. BILL WEEK ENDIN	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194755 194756 194757	5/11/12 5/11/12 5/11/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	DELOSSANTOS, MA DELPOZO, MIGUEL DELUCA, ANTIONE	31.50 20.00 28.00		459.27 I 291.60 I 408.24 I	
				CUSTOMER	79.50	0.00	1,159.11	
				CATEGORY	79.50	0.00	1,159.11	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	78
	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	·
				:	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194758	5/11/12	800000	VISITING NURSE SERVICE	DELVALLE, JESUS	35.00		510.30 I	
					CATEGORY	35.00	0.00	510.30	

RUN DATE 0		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L		79
BALLS UML	# 0201	100 001		LES REGISTER			BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194759	5/11/12	000008	VISITING NURSE SERVICE	DEY, KRISHNA	3.00		43.74	I	
194760	5/11/12	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	36.50		532.18	I	
194761	5/04/12	800000	VISITING NURSE SERVICE	DIAZ, MARIA	7.00		102.06	I	
194762	5/11/12	800000	VISITING NURSE SERVICE	DIAZ, MARIA	35.00		510.30	I	
194763	5/11/12	800000	VISITING NURSE SERVICE	DIAZ, OLGA	46.00		670.68	I	
194764	5/11/12	800000	VISITING NURSE SERVICE	DIAZ, ROSA	36.00		524.88	I	
194765	5/11/12	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	70.00		1,020.60	I	
194766	5/11/12	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	41.75		608.72	I	
194767	5/11/12	800000	VISITING NURSE SERVICE	DOMINGUEZ-REIN,	20.00		291.60	I	
				CUSTOMER	295.25	0.00	4,304.76		
				CATEGORY	 295.25	0.00	4,304.76		

RUN DATE 05/ SALES JRNL #	16/12 - SUP SUNN 0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING I BILL WEEK ENI		
INVOICE# D	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	711/12 000008 711/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	53.00 40.00		772.74 583.20	I I	
			CUSTOMER	93.00	0.00	1,355.94		
			CATEGORY	93.00	0.00	1,355.94		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 8	31
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194770	5/11/12	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 05	5/16/12 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 8	32
SALES JRNL	# 0281 LOC 001		REG NY NY			ADU ADULT		
		S	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194771 5	5/11/12 000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	43.00		626.94	I	
194772 5	5/11/12 000008	VISITING NURSE SERVICE	EDELMAN, MILDRE	15.00		218.70	I	
			CUSTOMER	58.00	0.00	845.64		
			CATEGORY	58.00	0.00	845.64		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	83
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194773	5/11/12	800000	VISITING NURSE SERVICE	EPSTEIN, GEORGE	20.00		291.60 I	
				CATEGORY	20.00	0.00		

RUN DATE 05/16/12 SALES JRNL # 0281	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITY	WIDE REG NY N	NY		PAGE 1 - 8 ADU ADULT	4
SALES OIGH # 0201	LOC 001 SONNISIDE CITI		EGISTER		BILL WEEK ENDING	5/18/12
INVOICE# DATE	CUST NO CUSTOMER NAME	REFER	RENCE HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194774 4/27/12 194775 5/11/12	000008 VISITING NURSE 000008 VISITING NURSE		, CESAR 9.00 , CESAR 62.00		131.22 I 903.96 I	
			CUSTOMER 71.00	0.00	1,035.18	
			CATEGORY 71.00	0.00	1,035.18	

			YSIDE CITYWIDE					85
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	F /10 /10
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194776	5/11/12	000008	VISITING NURSE SERVICE	ESPINAL, JOSE	9.00		131.22 I	
194777	5/11/12	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 SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	86
BALLED OIGN	1 # 0201	100 001		SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194778 194779	5/11/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	FADEN, ROBIN FAMBIATOU, PARA	70.00 11.50		1,020.60 167.67	I I
				CUSTOMER	81.50	0.00	1,188.27	
				CATEGORY	81.50	0.00	1,188.27	

			YSIDE CITYWIDE						- 8	37	
SALES JRNI	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			HOA HOSPICE	-		
			S	SALES	REGISTE	R		BILL WEEK EN	DING	5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REI	FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
194780	5/11/12	800000	VISITING NURSE SERVICE	FARG), JOSEPH	21.00		306.18	I		
1					CATEGORY	21.00	0.00	306.18			

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	88
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194781	5/11/12	000000	VISITING NURSE SERVICE	FAY, JULIA	4.00		58.32 I	
194/01	5/11/12	000008	VISITING NORSE SERVICE	FAI, UULIA	4.00		30.32 1	
				CATEGORY	4.00	0.00	58.32	

	E 05/16/12 RNL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCSA	89
SALES U	KNL # 0261	LOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
194782	5/11/12	800000	VISITING NURSE SERVICE	FERMIN, ORQUIDI	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 90)
SALES JR	NL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	E PROGRAM
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194783	5/11/12	800000	VISITING NURSE SERVICE	FERNANDEZ, JORG	11.25		164.03 I	
				CATEGORY	11.25	0.00	164.03	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	91
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194784	5/11/12	800000	VISITING NURSE SERVICE	FERREIRO, JOSEP	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

RU	N DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	92
SA	LES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				2	SALES REGISTER			BILL WEEK ENDING	5/18/12
IN	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19	4785	5/11/12	800000	VISITING NURSE SERVICE	FERRER, MARIE	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	93
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDIN	G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194786	5/11/12	800000	VISITING NURSE SERVICE	FIUMARA, ROSE	44.00		641.52 I	
				CATEGORY	44.00	0.00	641.52	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	94
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	ARE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194787	5/11/12	800000	VISITING NURSE SERVICE	FLEITMAN, KLARA	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE				11102	- 95
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHO	
				SALES REGISIER			DILL WEEK END.	ING 5/10/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
104700	F /11 /10	000000	VICTURAL NUMBER OFFICE	EOLI EMMO DOCINI	25 00		510.30	т
194788 194789	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	·	35.00 12.00		174.96	I T
1271705	3,11,12	00000	VIDITING NONDE DENVIOL					
				CUSTOMER	47.00	0.00	685.26	
				CATEGORY	47.00	0.00	685.26	

١	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	96
١	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
ı				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	11110101	DIII	CODI NO	CODIONER WINE	KEI EKEIVEE	1100115	11111 11111	11100111 111	DORT LOD
	194790	5/04/12	800000	VISITING NURSE SERVICE	FONSECA, EUGENI	7.00		102.06 I	
ı									
ı					CATEGORY	7.00	0.00	102.06	

	NL # 0281			REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194791	5/11/12	800000	VISITING NURSE SERVICE	FONTEBOA, GUILL	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

			YSIDE CITYWIDE					98
SALES J	RNL # 0281	LOC 001		REG NY NY			LTC NURSING HOMEW	,
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194792	5/11/12	800000	VISITING NURSE SERVICE	FRED, EULALIA	56.00		816.48 I	
				CATEGORY	56.00	0.00	 816.48	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194793	5/11/12	800000	VISITING NURSE SERVICE	FREDERICK, AMEL	46.25		674.33 I	
				CATEGORY	46.25	0.00		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 10	0
SALES JRN	L # 0281	LOC 001		REG NY NY			LTC NURSING HOMEW/	,
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194794	5/11/12	800000	VISITING NURSE SERVICE	FREIJOSO, ROSA	46.00		670.68 I	
				CATEGORY	46.00	0.00	670.68	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 101
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
			S	SALES REGISTER			BILL WEEK END	ING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
194795	5/11/12	000008	VISITING NURSE SERVICE	GAID, ASILA	35.00		510.30	I
194796	5/11/12	800000	VISITING NURSE SERVICE	GALARZA, JOSE	41.00		597.78	I
194797	5/11/12	000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	42.75		623.30	I
194798	5/11/12	800000	VISITING NURSE SERVICE	GALLINA, VIRGIN	9.00		131.22	I
				CUSTOMER	127.75	0.00	1,862.60	
				CATEGORY	127.75	0.00	1,862.60	

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L02
SALES JRN	NL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194799 194800	5/11/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GALLO, BENJAMIN GARAY, ANGELES	40.00 16.00		583.20 I 233.28 I	
				CUSTOMER	56.00	0.00	816.48	
				CATEGORY	56.00	0.00	816.48	

RUN DATE (- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	103
SALES UKNI	L # UZ01	HOC 001		SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194801 194802	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GARCIA, CONCEPC GARCIA, JESUS	45.50 9.00		663.39 131.22	I I
				CUSTOMER	54.50	0.00	794.61	
				CATEGORY	54.50	0.00	794.61	

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	104 MEW/O WALLS (LT NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
194803 194804	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 32.00		437.40 466.56	I I
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	105
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
ı				S	SALES REGISTER			BILL WEEK ENDIN	G 5/18/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
ı									
ı	194805	5/11/12	800000	VISITING NURSE SERVICE	GEORGE, MERCEDE	48.75		710.78 I	
ı									
ı									
ı					CATEGORY	48.75	0.00	710.78	

RUN DATE	05/16/12 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 -	106
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194806	5/11/12	800000	VISITING NURSE SERVICE	GERGENTI, LILLI	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.07
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			Ş	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194807	5/11/12	800000	VISITING NURSE SERVICE	GIORGIO, WILLIA	46.75		681.62 I	
				CATEGORY	46.75	0.00	681.62	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.08
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194808	5/11/12	000008	VISITING NURSE SERVICE	GOLIGHTLY, OZEL	56.00		816.48 I	
				CATEGORY	56.00	0.00	816.48	

	05/16/12 - IL # 0281			REG NY NY A L E S R E G I S T E R			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	Ä
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194809	5/11/12	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 11	0
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194810	5/11/12	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	35.00		510.30	I	
194811	5/11/12	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	24.00		349.92	I	
				CUSTOMER	59.00	0.00	860.22		
				CATEGORY	59.00	0.00	860.22		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	111
DILLED GIAN	0201	100 001		SALES REGISTER			BILL WEEK ENDING	G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194812 194813	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GOMEZ-VIDAL, AL GONZALEZ, CARLO	10.00 9.00		145.80 I 131.22 I	
				CUSTOMER	19.00	0.00	277.02	
				CATEGORY	 19.00	0.00	277.02	

	05/16/12 L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	112
511225 0144	.2 0201	200 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194814 194815	4/06/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GONZALEZ, DOLOR GONZALEZ, DOLOR	6.00 30.00		87.48 437.40	I
194015	5/11/12	000008	VISITING NURSE SERVICE	GONZALEZ, DOLOR	30.00		437.40	
				CUSTOMER	36.00	0.00	524.88	
				CATEGORY	 36.00	0.00	 524.88	

	16/12 - SUP SUNN						- 113
SALES JRNL #	0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		:	SALES REGISTER			BILL WEEK ENI	DING 5/18/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
194816 5/1	11/12 000008	VISITING NURSE SERVICE	GONZALEZ, ELSA	30.00		437.40	I
194817 5/1	11/12 000008	VISITING NURSE SERVICE	GOVERDOVSKIY, N	21.00		306.18	I
			CUSTOMER	51.00	0.00	743.58	
			CATEGORY	51.00	0.00	743.58	

RUN DATE 0	5/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 114	
SALES JRNL	# 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA	
			S	SALES REGISTER			BILL WEEK END	ING 5/18	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURP	LUS
194818	5/11/12	800000	VISITING NURSE SERVICE	GOYES, ELBA	20.00		291.60	I	
194819	5/11/12	800000	VISITING NURSE SERVICE	GRAVER, EDNA	36.00		524.88	I	
				CUSTOMER	56.00	0.00	816.48		
				COSTOMER	30.00	0.00	010.40		
				CATEGORY	56.00	0.00	816.48		

RUN DATE	05/16/12 -		YSIDE CITYWIDE				PAGE 1 - 115	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			:	SALES REGISTER			BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194820	4/27/12	000008	VISITING NURSE SERVICE	GREENBAUM, MASA	6.00		87.48 I	
194821	5/04/12	000008	VISITING NURSE SERVICE	GREENBAUM, MASA	2.00		29.16 I	
194822	5/04/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	6.00		87.48 I	
194823	5/11/12	800000	VISITING NURSE SERVICE	GREENBAUM, MASA	6.00		87.48 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC NV NV			PAGE 1 - 116	
SALES UR	NL # 0281	LOC 001		REGNY NY SALES REGISTER			LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194824	5/11/12	000008	VISITING NURSE SERVICE	GRESSINE, ARNOL	42.00		612.36 I	
				CAMECODY	42.00			
1				CATEGORY	42.00	0.00	612.36	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 11 ADU ADULT BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194825	5/11/12	800000	VISITING NURSE SERVICE	GUEVARA, ELENA	84.00		1,224.72 I	
				CATEGORY	84.00	0.00	1,224.72	

RUN DA	re 05/16/12 -	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 1	118
SALES 0	JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE	E# DAIE	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAA AMI	AMOUNT TIP	SURPLUS
194826	5/11/12	800000	VISITING NURSE SERVICE	GUTIERREZ, JOSE	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				11102	- 119	
SALES JRN	L # 0281	LOC 001		REG NY NY			VCP CHOICE L		_ , _ , _ ,
				SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194827	5/11/12	000008	VISITING NURSE SERVICE	HENAO, VICTORIA	16.00		233.28	I	
194828	5/11/12	800000	VISITING NURSE SERVICE	HENDY, BERNICE	22.00		320.76	I	
				CUSTOMER	38.00	0.00	554.04		
				CATEGORY	38.00	0.00	554.04		

RUN DATE 05/16	5/12 - SUP SUNN	YSIDE CITYWIDE		PAGE 1 - 120				
SALES JRNL # 0	0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
		S	ALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194829 5/11	1/12 000008	VISITING NURSE SERVICE	HENRIQUEZ, MARI	55.75		812.84	I	
194830 5/11	1/12 000008	VISITING NURSE SERVICE	HERNANDEZ, MARI	5.25		76.55	I	
			CUSTOMER	61.00	0.00	889.39		
			CATEGORY	61.00	0.00	889.39		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.21
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
104001	E /44 /40				25.00		504.00 -	
194831	5/11/12	800000	VISITING NURSE SERVICE	HERNANDEZ, MERC	36.00		524.88 I	
					26.00		504.00	
				CATEGORY	36.00	0.00	524.88	

RUN DATE 05			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 LTC NURSING F	- 12:	
				SALES REGISTER			BILL WEEK EN	,	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	5/11/12	800000	VISITING NURSE SERVICE	,	31.00		451.98	I	
	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	20.00 40.00		291.60 583.20	I	
				CUSTOMER	91.00	0.00	1,326.78		
				CATEGORY	91.00	0.00	1,326.78		

RUN DATE SALES JRN				REG NY NY LES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194835	5/11/12	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	05/16/12 - JL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 124 ADU ADULT BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194836	5/11/12	800000	VISITING NURSE SERVICE	ICIANO, ALFREDO	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 - 1 LAA LOMBARDI AIDS	S ADULT POPUL
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194837	5/11/12	000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	45.00		656.10 I	
				CATEGORY	45.00	0.00	656.10	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 126 ADU ADULT
			S	ALES REGISTER			BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194838	5/11/12	000008	VISITING NURSE SERVICE	INSERRA, CATHER	49.00		714.42 I
				CATEGORY	49.00	0.00	714.42

			YSIDE CITYWIDE				-	127
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
			i	SALES REGISTER			BILL WEEK ENDIN	G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194839	5/11/12	000008	VISITING NURSE SERVICE	ISKENDERIAN, KA	30.00		437.40 I	
194840	4/27/12	800000	VISITING NURSE SERVICE	JACSO, ERZSEBET	4.00		58.32 I	
				CUSTOMER	34.00	0.00	495.72	
				CATEGORY	34.00	0.00	495.72	

			YSIDE CITYWIDE				PAGE 1 - 1	128
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	· ·
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE#	DAIE	CODI NO	COSTOMER NAME	KEFEKENCE	1100105	IAA ANI	AMOUNT TIP	BORFEOS
194841	5/11/12	800000	VISITING NURSE SERVICE	JAKLITSCH, ELIZ	41.50		605.07 I	
				CATEGORY	41.50	0.00	605.07	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHCS	129 SA
				SALES REGISTER			BILL WEEK ENDIN	IG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194842 194843	5/11/12	800000	VISITING NURSE SERVICE		10.00		145.80 I 58.32 I	
194843	5/11/12	800000	VISITING NURSE SERVICE	JARAMILLO PAL,	4.00		58.32 1	
				CUSTOMER	14.00	0.00	204.12	
				CATEGORY	14.00	0.00	204.12	

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 - 130 ADU ADULT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194844	5/11/12	800000	VISITING NURSE SERVICE	JASZKOWSKI, GEN	6.00		87.48 I
				CATEGORY	6.00	0.00	87.48

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
				SALES REGISTER			BILL WEEK END	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194845 194846	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ·· ,	76.00 24.00		1,108.09 349.92	I	
				CUSTOMER	100.00	0.00	1,458.01		
				CATEGORY	100.00	0.00	1,458.01		

	05/16/12 - JL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 HOA HOSPICE ADULT	
SALES UKI	NL # U201	TOC 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194847	5/11/12	800000	VISITING NURSE SERVICE	JIANNARAS, ANNA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	I/O WALLS (LT
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194848	5/11/12	800000	VISITING NURSE SERVICE	JIMENEZ, ALTAGR	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

			YSIDE CITYWIDE				PAGE 1 - 1:	34
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_ , _ , _ ,
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194849	5/11/12	000008	VISITING NURSE SERVICE	JIMENEZ, BETTY	25.00		364.50 I	
194850	5/11/12	800000	VISITING NURSE SERVICE	JOHNSON, FANNY	20.00		291.60 I	
				CUSTOMER	45.00	0.00	656.10	
				CATEGORY	45.00	0.00	656.10	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 13	5
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			S	ALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194851	5/11/12	000008	VISITING NURSE SERVICE	JORRIN, HORTENS	24.50		357.22	I	
194852	5/11/12	800000	VISITING NURSE SERVICE	JORRIN, NILIO	34.00		495.72	I	
							050.04		
				CUSTOMER	58.50	0.00	852.94		
				CATEGORY	58.50	0.00	852.94		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 13 VCP CHOICE LHCSA	6
Brilling Grav	12 0201	100 001		SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194853	5/11/12	000008	VISITING NURSE SERVICE	KAUR, SARD	12.00		174.96 I	
194854 194855	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	KAUR, SHARAN KEARNEY, LORRAI	52.00 18.75		758.16 I 273.38 I	
	-,,		,	·				
				CUSTOMER	82.75	0.00	1,206.50	
				CATEGORY	82.75	0.00	1,206.50	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 13	7	
ı	SALES JRN	L # 0281	LOC 001		REG NY NY			HOA HOSPICE ADULT		
ı				S	SALES REGISTER			BILL WEEK ENDING	5/18/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS	
	194856	5/11/12	800000	VISITING NURSE SERVICE	KHAN, MARGARET	12.50		182.26 I		
ı					CATEGORY	12.50	0.00	182.26		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			i	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194857 194858	5/11/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	48.00 56.00		699.84 816.48	I	
				CUSTOMER	104.00	0.00	1,516.32		
				CATEGORY	104.00	0.00	1,516.32		

			YSIDE CITYWIDE				PAGE 1 - 139	9
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	F /1 0 /1 0
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194859	4/27/12	000008	VISITING NURSE SERVICE	LANDAU, BERNARD	3.00		43.74 I	
194860	5/11/12	800000	VISITING NURSE SERVICE	LANDAU, BERNARD	12.00		174.96 I	
				CUSTOMER	15.00	0.00	218.70	
				COSTOMER	13.00	0.00	210.70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 14	40
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194861	5/11/12	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	55.25		805.55 I	
				CATEGORY	55.25	0.00	805.55	

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 141 ADU ADULT BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194862 194863	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LASAK, MICHAEL LEBOWITZ, MICHA	9.00 2.00		131.22 I 29.16 I	
				CUSTOMER	11.00	0.00	160.38	
				CATEGORY	11.00	0.00	160.38	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 142 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194864 194865	5/11/12 5/11/12	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	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	143
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194866	5/11/12	800000	VISITING NURSE SERVICE	LEWIS, CATHERIN	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	- 144	Į
	- "			ALES REGI	STER		BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194867	5/11/12	800000	VISITING NURSE SERVICE	LIMANDRI, F	FRANC 39.25		572.27	I	
				CATEG	GORY 39.25	0.00	572.27		

			YSIDE CITYWIDE				PAGE 1	- 14	45
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE L		F /10 /10
				SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194868	5/11/12	000008	VISITING NURSE SERVICE	LIRIANO, FRANCI	69.75		1,016.96	I	
194869	5/11/12	800000	VISITING NURSE SERVICE	LITSAS, MARTHA	23.00		335.34	I	
				CUSTOMER	92.75	0.00	1,352.30		
				CATEGORY	92.75	0.00	1,352.30		

RUN DATE SALES JRN				REG NY NY A L E S R E G I S T E R			PAGE 1 - 146 ADU ADULT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194870	5/11/12	800000	VISITING NURSE SERVICE	LLANES, ELEAZER	35.00		510.30 I
				CATEGORY	35.00	0.00	510.30

RUN DATE SALES JRN		- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			11100	- 147 HOMEW/O WALLS (LT
			S	SALES REGISTER			BILL WEEK END	DING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
194871	5/04/12	800000	VISITING NURSE SERVICE	LOCORRIERE, JOS	16.00		233.28	I
194872 194873	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	LOCORRIERE, JOS LOGAN, ADELE	40.00 42.00		583.20 612.36	I I
				CUSTOMER	98.00	0.00	1,428.84	
				COSTOMER	90.00	0.00	1,420.04	
				CATEGORY	98.00	0.00	1,428.84	

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY ALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	SA
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194874	5/11/12	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	59.00		860.22 I	1
				CATEGORY	59.00	0.00	860.22	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	149
SALES JRN	L # 0281	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194875	5/11/12	800000	VISITING NURSE SERVICE	LONDONO, MARIA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	0
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
			S	ALES REGISTER			BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194876	5/11/12	000008	VISITING NURSE SERVICE	LOPEZ, ANGELICA	35.00		510.30	I	
194877	5/11/12	800000	VISITING NURSE SERVICE	LOPEZ, GRACIELA	12.00		174.96	I	
					45.00				
				CUSTOMER	47.00	0.00	685.26		
				CATEGORY	47.00	0.00	685.26		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 151	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WAL	LS (LT
			S	SALES REGISTER			BILL WEEK ENDING 5/18	/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURP	LUS
194878	5/11/12	800000	VISITING NURSE SERVICE	LOPEZ, MARIA	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE				PAGE 1 - 15	52
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/18/12
		GTTGT 110	G11GT014TD 11114T				1110TPT	GIIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194879	5/11/12	800000	VISITING NURSE SERVICE	LOPEZDELCASTIL,	69.75		1,016.96 I	
				CATEGORY	69.75	0.00	1,016.96	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 1 ADU ADULT	153
511225 014	0201	200 001		SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194880	5/11/12	800000	VISITING NURSE SERVICE	LOZADA, LAURA	9.00		131.22 I	
				CATEGORY	9.00	0.00	131.22	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 15	4
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	E PROGRAM
			Ş	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194881	5/11/12	000008	VISITING NURSE SERVICE	LUCES, LETICIA	19.50		284.32 I	
				CATEGORY	19.50	0.00	284.32	

RUN DATE	05/16/12 -	SUP SUNN	NYSIDE CITYWIDE					PAGE 1 -	155
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			VCP CHOICE LHCS	A
				SALES R	EGISTEF	}		BILL WEEK ENDIN	G 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	ERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194882	5/11/12	800000	VISITING NURSE SERVICE	LYMN,	ANGIE	28.00		408.24 I	
					CATEGORY	28.00	0.00	408.24	

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
194883	5/11/12	800000	VISITING NURSE SERVICE	MACCHIA, CATHY	41.00		597.78	I
				CATEGORY	41.00	0.00	 597.78	

RUN DATE (05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 157	
SALES JRNI	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGA'	FE CARE	PROGRAM
			S	SALES REGI	ISTER		BILL WEEK EN	DING 5	/18/12
TMTOTOT!	DAME	CIICE NO	CHOMOMED NAME	DEFEDENCE	E HOUD		AMOTINE	mxD 0	IIDDI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCI	E HOURS	TAX AMT	AMOUNT	TYP SI	URPLUS
194884	5/11/12	000008	VISITING NURSE SERVICE	MAGILLIGAN	N, LOR 38.25		557.69	Т	
	-,,				.,			_	
				CATI	EGORY 38.25	0.00	557.69		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 15	8
DALLS OIL	H 0201	HOC 001		SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194885 194886	5/11/12 5/11/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		84.00 20.00		1,224.72 291.60	I	
194887	5/11/12	000008	VISITING NURSE SERVICE	•	77.00		1,122.66	I	
				CUSTOMER	181.00	0.00	2,638.98		
				CATEGORY	181.00	0.00	2,638.98		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 15	9
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			5	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194888	5/11/12	000008	VISITING NURSE SERVICE	MANOS, ARCHIE	48.00		699.84	I	
194889	5/11/12	800000	VISITING NURSE SERVICE	MANOS, VASILIKE	28.00		408.24	I	
				CUSTOMER	76.00	0.00	1,108.08		
				CATEGORY	76.00	0.00	1,108.08		

RUN I	DATE 05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	160
SALES	S JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	CARE PROGRAM
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
19489	90 5/11/12	800000	VISITING NURSE SERVICE	MARINO, ANN	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

- 1				YSIDE CITYWIDE	DEC MY MY			PAGE 1 -	
	SALES URN.	L # U281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194891	5/11/12	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	25.00		364.50 I	
					CATEGORY	25.00			
ı					CALEGORY	∠5.00	0.00	304.50	

			YSIDE CITYWIDE				PAGE 1 - 162	
SALES JRN	L # 0281	LOC 001		REGNY NY ALES REGISTER			LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/18/12	
			-					
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194892	5/11/12	000008	VISITING NURSE SERVICE	MARMOL, LIDIA	43.00		626.94 I	
				CATEGORY	43.00	0.00	626.94	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	163
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	1
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194893	5/11/12	000008	VISITING NURSE SERVICE	MARTE, JOSE	7.00		102.06 I	
194894	5/11/12	000008	VISITING NURSE SERVICE	MARTIN, ELAUCAD	15.00		218.70 I	
194895	5/04/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	3.00		43.74 I	
194896	5/11/12	800000	VISITING NURSE SERVICE	MARTINEZ, CAMIL	15.00		218.70 I	
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 164	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE P	ROGRAM
			S	SALES REGISTER			BILL WEEK ENDING 5/	18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
194897	5/11/12	800000	VISITING NURSE SERVICE	MARTINEZ, ELENA	70.00		1,020.60 I	
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 16 HCSA	55
			\$	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194898	5/11/12	000008	VISITING NURSE SERVICE	MARTINEZ, MARGA	24.00		349.92	I	
194899	5/11/12	800000	VISITING NURSE SERVICE	MARTINEZ, MARTA	35.50		517.60	I	
194900	5/11/12	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	84.00		1,224.72	I	
				CUSTOMER	143.50	0.00	2,092.24		
				CATEGORY	143.50	0.00	2,092.24		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194901 194902	4/27/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 37.50		87.48 546.76	I I	
				CUSTOMER	43.50	0.00	634.24		
				CATEGORY	43.50	0.00	634.24		

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	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
194903	4/20/12	000008	VISITING NURSE SERVICE	MATOS, ROSA	8.00		116.64 I	
				CATEGORY	8.00	0.00		

	05/16/12 - JL # 0281			REG NY NY A L E S R E G I S T E R			PAGE 1 - 168 VCP CHOICE LHCSA BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194904	5/11/12	800000	VISITING NURSE SERVICE	MATOS, ROSA	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	- 16	9
			S	SALES REGISTER			BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ΓΥΡ	SURPLUS
194905 194906	5/11/12 4/20/12	000008 000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	63.00 5.50		918.54 80.19	I	
194906	5/11/12	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MCBRAYER, SYLVI MCBRAYER, SYLVI	168.00		2,449.44	I	
				CUSTOMER	236.50	0.00	3,448.17		
				CATEGORY	236.50	0.00	3,448.17		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 17	0
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194908	5/11/12	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	56.00		816.48	I	
194909	5/11/12	000008	VISITING NURSE SERVICE	MEJIA, DINORAH	16.75		244.22	I	
194910	4/27/12	800000	VISITING NURSE SERVICE	MEJIA, MARINA	4.00		58.32	I	
194911	5/11/12	800000	VISITING NURSE SERVICE	MEJIA, MARINA	23.50		342.63	I	
					100 05		1 461 65		
				CUSTOMER	100.25	0.00	1,461.65		
				CATEGORY	100.25	0.00	1,461.65		

RUN DATE SALES JRN		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 171 LTC NURSING HOMEW/C	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194912	5/11/12	800000	VISITING NURSE SERVICE	MEJIA, ROSA	37.75		550.40 I	
				CATEGORY	37.75	0.00	550.40	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	172
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAA LOMBARDI AII	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194913	5/11/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	5.00		72.90 I	
				CATEGORY	5.00	0.00	72.90	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 173	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOME W/O	WALLS LT
			:	SALES REGISTER			BILL WEEK ENDING 5	/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
194914	5/11/12	800000	VISITING NURSE SERVICE	MENDEZ, NELLY	12.00		174.96 I	
				CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 - 174	
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194915	5/11/12	800000	VISITING NURSE SERVICE	MENDOLIA, ANTOI	73.75		1,075.28 I	
				CATEGORY	73.75	0.00	1,075.28	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	175
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	MEW/O WALLS (LT
				S A L E S R E G I S T E R			BILL WEEK ENDIN	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194916	5/11/12	800000	VISITING NURSE SERVICE	MENDOZA, JULIO	40.00		583.20	[
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.76
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			i	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194917	5/11/12	800000	VISITING NURSE SERVICE	MILEO, MARY	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1'	77
ı	SALES JRN	L # 0281	LOC 001		REG NY NY			HOA HOSPICE ADULT	
ı				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194918	5/11/12	800000	VISITING NURSE SERVICE	MOLINA, ANA	29.75		433.76 I	
					CATEGORY	29.75	0.00	433.76	
1					CATEGORI	47.13	0.00	±33.70	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	17 HCSA	78
	"			SALES REGISTER			BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194919	5/11/12	800000	VISITING NURSE SERVICE	MONSERRAT, DORI	9.75		142.16	I	
194920	5/11/12	000008	VISITING NURSE SERVICE	MONTES, MARTA	30.00		437.40	I	
194921	5/11/12	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	35.00		510.30	Τ	
				CUSTOMER	74.75	0.00	1,089.86		
				CATEGORY	74.75	0.00	1,089.86		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 179	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
			S	BALES REGISTER			BILL WEEK ENDING 5	/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
194922	5/11/12	800000	VISITING NURSE SERVICE	MORALES, ANGELI	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

			YSIDE CITYWIDE				11102	- 18	30
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TMG	F /10 /10
				SALES REGISTER			BILL WEEK ENI	JING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194923	5/11/12	000008	VISITING NURSE SERVICE	MORALES, GENERO	83.25		1,213.79	I	
194924	5/11/12	800000	VISITING NURSE SERVICE	MOURAS, ANNA	10.00		145.80	I	
194925	5/11/12	800000	VISITING NURSE SERVICE	MUSSALLI, NAIM	2.00		29.16	I	
				CUSTOMER	95.25	0.00	1,388.75		
				CATEGORY	95.25	0.00	1,388.75		

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 - 181 VCP CHOICE LHCSA BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194926	5/11/12	800000	VISITING NURSE SERVICE	NAGY, GEORGE	39.00		568.62 I	
				CATEGORY	39.00	0.00	 568.62	

ı	RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 182	
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE	PROGRAM
				Ş	SALES REGISTER			BILL WEEK ENDING 5	/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
	194927	5/11/12	800000	VISITING NURSE SERVICE	NAVARRO, MARIA	20.00		291.60 I	
					CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	.83
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S.	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194928	5/11/12	800000	VISITING NURSE SERVICE	NELLINI, MARY	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

			YSIDE CITYWIDE				PAGE 1 - 184	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTER			BILL WEEK ENDING 5/	18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
194929	5/11/12	000008	VISITING NURSE SERVICE	NELLINI, MARY	6.00		87.48 I	
194930	5/11/12	800000	VISITING NURSE SERVICE	NICKELL, JEAN	9.00		131.22 I	
				CUSTOMER	15.00	0.00	218.70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 18	35
SALES JRN	IL # 0281	LOC 001		REG NY NY			LTC NURSING HOMEW/	•
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194931	5/11/12	800000	VISITING NURSE SERVICE	NIDO, MICHAEL	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	86
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	194932	5/11/12	800000	VISITING NURSE SERVICE	NIETO RAMOS, JO	62.75		914.90 I	
					CATEGORY	62.75	0.00	914.90	

RUN DATE 05/16/12 SALES JRNL # 0281		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		37 5/18/12
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194933 5/04/12 194934 5/11/12 194935 5/11/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	NIEVES, NANCY NIEVES, NANCY NINO, CARMEN	9.00 45.00 20.00		131.22 656.10 291.60	I I I	
			CUSTOMER	74.00	0.00	1,078.92		
			CATEGORY	74.00	0.00	1,078.92		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 188	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/O	WALLS (LT
				S A L E S R E G I S T E R			BILL WEEK EN	DING 5	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
194936	5/11/12	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	25.00		364.50	I	
194937	5/11/12	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	34.00		495.72	I	
				CUSTOMER	59.00	0.00	860.22		
				CATEGORY	59.00	0.00	860.22		

			YSIDE CITYWIDE				PAGE 1	- 189	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		
			S	SALES REGISTER			BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194938	5/11/12	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	49.00		714.42	I	
194939	5/11/12	800000	VISITING NURSE SERVICE	OCHOA, LUIS	42.75		623.30	I	
				CUSTOMER	91.75	0.00	1,337.72		
				CATEGORY	91.75	0.00	1,337.72		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	190
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	N/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194940	5/11/12	000008	VISITING NURSE SERVICE	OLVERA, ROSALIA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 191 ADU ADULT BILL WEEK ENDING 5/3	18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT		RPLUS
194941	5/11/12	800000	VISITING NURSE SERVICE	ONATE, MIGUEL	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LE		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194942 194943 194944	5/11/12 5/11/12 5/11/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ORTEGA, CARLOS OSPINA, ANA PANASKAROLIDIS,	16.00 8.00 30.25		233.28 116.64 441.05	I I I	
				CUSTOMER	54.25	0.00	790.97		
				CATEGORY	54.25	0.00	790.97		

RUN DATE SALES JRN				REG NY NY SALES REGISTER			PAGE 1 - 193 ADU ADULT BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194945	5/11/12	800000	VISITING NURSE SERVICE	PAOLONI, MARY	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

	05/16/12 - NL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 194 AUR ADULT REHAB ONL	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194946	5/11/12	000008	VISITING NURSE SERVICE	PAPAZIAN, MANNI	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
				SALES REGISTER			BILL WEEK END	ING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
194947	5/11/12	000008	VISITING NURSE SERVICE	PAPOUTSIS, MARY	6.00		87.48	I
194948	5/11/12	800000	VISITING NURSE SERVICE	PARETTI, MARIE	56.00		816.48	I
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

RUN DATE O			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	196
SALES URNI	1 # 0201	LOC 001		SALES REGISTER			BILL WEEK ENDIN	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
194949	5/11/12	800000	VISITING NURSE SERVICE	PARK, SUNG	17.00		247.86 I	
				 CATEGORY	17.00	0.00	 247.86	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 197
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
			S	SALES REGISTER			BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194950	5/11/12	000008	VISITING NURSE SERVICE	PENA, VICTORIA	38.75		564.98 I
194951	5/11/12	800000	VISITING NURSE SERVICE	PENAGOS, MARIA	25.00		364.50 I
				CUSTOMER	63.75	0.00	929.48
				CATEGORY	63.75	0.00	929.48

			YSIDE CITYWIDE				PAGE 1 - 198	-
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB ON	
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194952	5/11/12	800000	VISITING NURSE SERVICE	PENNACCHIA, MAR	11.75		171.32 I	
				CATEGORY	11.75	0.00	171.32	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	9
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
			:	SALES REGISTER			BILL WEEK END	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194953	4/13/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06	I	
194954	5/04/12	000008	VISITING NURSE SERVICE	PEREZ MONSER, C	7.00		102.06	I	
194955	5/11/12	800000	VISITING NURSE SERVICE	PEREZ MONSER, C	49.00		714.42	I	
				CUSTOMER	63.00	0.00	918.54		
				CATEGORY	63.00	0.00	918.54		

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - : LTC NURSING HOME BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194956	5/11/12	800000	VISITING NURSE SERVICE	PEREZ, DOMINGA	41.50		605.07 I	
				CATEGORY	41.50	0.00	605.07	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	201
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194957	5/11/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	18.00		262.44 I	
				CATEGORY	18.00	0.00		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	202
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194958	5/11/12	800000	VISITING NURSE SERVICE	PEREZ, GLADYS	6.00		87.48 I	
				CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE				PAGE 1 - 203
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			ADU ADULT BILL WEEK ENDING 5/18/12
			5 1				
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194959	5/11/12	800000	VISITING NURSE SERVICE	PEREZ, JOAQUIN	30.00		437.40 I
				CATEGORY	30.00	0.00	437.40

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	04
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194960	5/11/12	800000	VISITING NURSE SERVICE	PERSAUD, RITA	34.00		495.72 I	
				CATEGORY	34.00	0.00	495.72	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LHO BILL WEEK END)5 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	ΓΥΡ	SURPLUS
194961 194962 194963	5/11/12 5/11/12 5/11/12	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PIZARRO, BARBAR	40.00 3.00 34.50		583.20 43.74 503.01	I I I	
				CUSTOMER	77.50	0.00	1,129.95		
				CATEGORY	77.50	0.00	1,129.95		

RUN DATE SALES JRN		SUP SUNN LOC 001		REG NY NY ALES REGISTER			PAGE 1 - 206 ADU ADULT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
194964	5/11/12	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	42.00		612.36 I
				CATEGORY	42.00	0.00	612.36

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	207
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194965	5/11/12	800000	VISITING NURSE SERVICE	POGGI, EMERITA	36.00		524.88 I	
				CATEGORY	36.00	0.00	524.88	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	08
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194966	5/11/12	800000	VISITING NURSE SERVICE	PONCE, ALICIA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - :	209
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194967	5/11/12	800000	VISITING NURSE SERVICE	PUISELLO, CIRA	28.00		408.24 I	
				CATEGORY	28.00	0.00	408.24	

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	210
SALES JR	NL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE C	ARE PROGRAM
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194968	5/11/12	800000	VISITING NURSE SERVICE	PULLIZA, DIANNE	42.00		612.36 I	
				CATEGORY	42.00	0.00	612.36	

	05/16/12 - IL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 2 VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194969	5/11/12	800000	VISITING NURSE SERVICE	QUINTERO, INES	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 21	2
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/	O WALLS (LT
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
104070	E /11 /10	00000		011111111111111111111111111111111111111	40 85		F10 F0 T	
194970	5/11/12	000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	48.75		710.78 I	
				CATEGORY	48.75	0.00	710.78	
				CALEGORI	40.75	0.00	710.70	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 213	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAP LOMBARDI AIDES PEDIATE	RIC
			5	SALES REGISTER			BILL WEEK ENDING 5/18/12	2
	53.00	GTTGT 170	GIIGHOMED MANE		******		AMOUNTS THE CHIRAL IN	~
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	S
194971	5/11/12	000008	VISITING NURSE SERVICE	DAMIDER ANA	40.00		583.20 I	
1949/1	5/11/12	000008	VISITING NURSE SERVICE	RAMIREZ, ANA	40.00		583.20 1	
								_
				CATEGORY	40.00	0.00	583.20	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 214
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	IOMEW/O WALLS (LT
			:	SALES REGISTER			BILL WEEK END	OING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
194972	5/11/12	000008	VISITING NURSE SERVICE	RAMIREZ, JUANA	52.00		758.16	I
194973	5/11/12	800000	VISITING NURSE SERVICE	RAMLALL, LILOWT	25.00		364.50	I
				CUSTOMER	77.00	0.00	1,122.66	
				CATECODY	77.00	0.00	1 122 66	
				CATEGORY	77.00	0.00	1,122.66	

	05/16/12 - JL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 2 AUR ADULT REHAB C BILL WEEK ENDING	NLY
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194974	5/11/12	800000	VISITING NURSE SERVICE	RAMOS, JENNIFER	36.75		535.82 I	
				CATEGORY	36.75	0.00	 535.82	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 216 VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
194975 194976	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	12.00 12.00		174.96 I 174.96 I	
194976	5/11/12	000008	VISITING NURSE SERVICE	RANDAZZO, ROSAL	12.00		174.90 1	
				CUSTOMER	24.00	0.00	349.92	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 21'	7
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL H	EALTH
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
TATTOTOTI	DAME	GIIGE NO	CHOMOMED NAME	DEFEDENCE	HOHD	max and	AMOUNTE TEUD	GIID DI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194977	4/20/12	800000	VISITING NURSE SERVICE	RASMUSSEN, GEOR	3.00		43.74 I	
				CATEGORY	3.00	0.00	43.74	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	218
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
194978	5/11/12	000008	VISITING NURSE SERVICE	RASMUSSEN, GEOR	6.00		87.48	I
194979	5/11/12	000008	VISITING NURSE SERVICE	REINA, JOSE	20.00		291.60	I
194980	5/11/12	800000	VISITING NURSE SERVICE	RICCA, MARIE	15.75		229.64	I
194981	5/11/12	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	12.00		174.96	I
				CUSTOMER	53.75	0.00	783.68	
				CATEGORY	53.75	0.00	783.68	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	219
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	I/O WALLS (LT
ı				:	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	194982	5/11/12	000008	VISITING NURSE SERVICE	RIVADENEIRA, RO	56.00		816.48 I	
ı									
ı					CATEGORY	56.00	0.00	816.48	

			YSIDE CITYWIDE				PAGE 1 - 220	
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING 5	/18/12
				SALES KEGISIEK			BILL WEEK ENDING 5	/10/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
194983 194984	5/11/12 5/11/12	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	

			NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194985	5/11/12	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 - 222 ADU ADULT	
				SALES REGISTER			-	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194986	5/11/12	000008	VISITING NURSE SERVICE	RIVERA, RAQUEL	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 22	23
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H	HOMEW/	O WALLS (LT
				SALES REGISTE	R		BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194987	4/27/12	000008	VISITING NURSE SERVIC	E RIVERA, WANDA	7.50		109.35	I	
194988	5/11/12	800000	VISITING NURSE SERVIC	E RIVERA, WANDA	36.50		532.18	I	
194989	4/06/12	800000	VISITING NURSE SERVIC	E ROBERTS, SARAH	10.75		156.74	I	
194990	4/20/12	800000	VISITING NURSE SERVIC	E ROBERTS, SARAH	8.00		116.64	I	
194991	5/11/12	800000	VISITING NURSE SERVIC	E ROBERTS, SARAH	12.50		182.25	I	
				CUSTOMER	75.25	0.00	1,097.16		
				- CATEGORY	75.25	0.00	1,097.16		

			YSIDE CITYWIDE				PAGE 1 - 22	4
SALES JR	NL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	5/18/12
	D	G11GT 310			******			-, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194992	5/11/12	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	47.75		696.20 I	
				CATEGORY	47.75	0.00	696.20	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 225	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O W	ALLS (LT
			S	SALES REGISTER			BILL WEEK ENDING 5/	18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUI	RPLUS
194993	5/11/12	800000	VISITING NURSE SERVICE	ROCCISANO, LOUI	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 22 CSA	6
	_ "			SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
194994 194995	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	RODRIGUEZ, FERM RODRIGUEZ, IRMA	14.75 40.50		215.06 590.49	I	
194995	5/11/12	000008	VISITING NORSE SERVICE	RODRIGUEZ, IRMA	40.50		590.49		
				CUSTOMER	55.25	0.00	805.55		
				CATEGORY	55.25	0.00	805.55		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 227	
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CARE PRO	JGRAM
			S	SALES REGISTER			BILL WEEK ENDING 5/18	8/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
194996	5/11/12	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 SALES REGISTER			PAGE 1 - 2 LTC NURSING HOMEW BILL WEEK ENDING	•
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194997	5/11/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, OLGA	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 22	29
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
194998	5/11/12	800000	VISITING NURSE SERVICE	E RODRIGUEZ, PORF	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

			YSIDE CITYWIDE				PAGE 1 - 230	
SALES JRN	L # 0281	LOC 001		REG NY NY			LTC NURSING HOMEW/C	•
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	_ , ,							
194999	5/11/12	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	48.00		699.84 I	
				CATEGORY	48.00	0.00	699.84	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	. – 23		
					ISTER		BILL WEEK EN		5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE		TAX AMT	AMOUNT	TYP	SURPLUS	
195000	5/11/12	800000	VISITING NURSE SERVICE	RODRIGUEZ,	, YLMA 56.00		816.48	I		
				CATE	EGORY 56.00	0.00	816.48			

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	232
SALES JRN	IL # 0281	LOC 001		REG NY NY			LTC NURSING HOME	•
			S	ALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195001	5/11/12	800000	VISITING NURSE SERVICE	ROLON, JUANITA	40.00		583.20 I	
				CATEGORY	40.00	0.00		

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	233
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
١				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
١									
١	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
١	105000	F /11 /10	000000	VICIALNO MIDOS CEDVICE	DOMEDO CAMBILLA	FF 2F		005 55 7	
١	195002	5/11/12	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	55.25		805.55 I	
١									
					CATEGORY	55.25	0.00	805.55	

RUN DATE 05/16, SALES JRNL # 02				NY E G I S T E	R		PAGE 1 LTC NURSING BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195003 5/11, 195004 5/11,		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	FLOR ANA	56.00 40.00		816.48 583.20	I	
				CUSTOMER	96.00	0.00	1,399.68		
				CATEGORY	96.00	0.00	1,399.68		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 23	5
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			ADU ADULT		
				SALES R	EGISTER	<u>.</u>		BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195005	5/11/12	000008	VISITING NURSE SERVICE	ROSA,	, LUZ E	56.00		816.48	I	
					CATEGORY	56.00	0.00	816.48		

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 236
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	JSA
			S	ALES REGISTER			BILL WEEK ENDI	ING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
195006	5/11/12	000008	VISITING NURSE SERVICE	ROSA, MANOLO	16.00		233.28	I
195007	5/11/12	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	30.00		437.40	I
195008	3/30/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	6.00		87.48	I
195009	5/11/12	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	20.00		291.60	I
				CUSTOMER	72.00	0.00	1,049.76	
				CATEGORY	72.00	0.00	1,049.76	

RUN DATE 05/1 SALES JRNL #	16/12 - SUP SUNN 0281 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 2 ADU ADULT BILL WEEK ENDING	37 5/18/12
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195011 5/1	11/12 000008 11/12 000008 11/12 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSARIOBREU, EM RUBIN, EVGENY RUECKHER, PATRI	25.00 20.00 15.00		364.50 I 291.60 I 218.70 I	
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 238	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING 5/18/	12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	US
195013	5/11/12	800000	VISITING NURSE SERVICE	RUEDA, INES	47.00		685.26 I	
				CATEGORY	47.00	0.00	 685.26	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 23	39
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	O WALLS (LT
ı				Š	SALES REGISTER			BILL WEEK ENDING	5/18/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	195014	5/11/12	800000	VISITING NURSE SERVICE	RUFFEN, SANDRA	18.00		262.44 I	
ı									
ı									
ı					CATEGORY	18.00	0.00	262.44	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END	210
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
195015	5/11/12	800000	VISITING NURSE SERVICE	RUSSO, MONICA	70.00		1,020.60	I
				CATEGORY	70.00	0.00	1,020.60	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	241
SALES JRI	NL # 0281	LOC 001		REG NY NY			LTC NURSING HOME	
			S	SALES REGISTER			BILL WEEK ENDING	5 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
195016	5/11/12	800000	VISITING NURSE SERVICE	SAAVEDRA, STELL	26.00		379.08 I	
				CATEGORY	26.00	0.00	379.08	
				CALEGORI	20.00	0.00	3/9.00	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 24	:2
Bribbs ord	0201	100 001		SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195017	5/11/12	000008	VISITING NURSE SERVICE	SAK, FIRDEVS	15.00		218.70	I	
195018	5/11/12	800000	VISITING NURSE SERVICE	SALADIN, MARIA	74.00		1,078.92	Τ.	
				CUSTOMER	89.00	0.00	1,297.62		
				CATEGORY	89.00	0.00	1,297.62		

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	43
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
ı				:	SALES REGISTER			BILL WEEK ENDING	5/18/12
ı									
ı	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı									
ı	195019	5/11/12	000008	VISITING NURSE SERVICE	SALVATIERRA, TE	36.00		524.88 I	
ı									
ı									
ı					CATEGORY	36.00	0.00	524.88	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	14
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			\$	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195020	5/11/12	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	17.00		247.86	I	
195021	5/11/12	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	36.00		524.88	I	
				CUSTOMER	53.00	0.00	772.74		
				CATEGORY	53.00	0.00	772.74		

			YSIDE CITYWIDE					45
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGATE CA	
				SALES REGISIER			BILL MEEK ENDING	5/10/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195022	5/11/12	800000	VISITING NURSE SERVICE	SANCHEZ, MARIA	30.00		437.40 I	
				CATEGORY	30.00	0.00	437.40	

- 1				YSIDE CITYWIDE	DEC NV NV			PAGE 1 - 2	= = *
	SALES JRNI	T # 078T	LOC 001	SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			VCP CHOICE LHCSA BILL WEEK ENDING	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195023	5/11/12	800000	VISITING NURSE SERVICE	SANCHEZ, NILSA	26.25		382.73 I	
					CATEGORY	26.25	0.00	382.73	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	- 24	17
			S	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195024	5/11/12	800000	VISITING NURSE SERVICE	SCALA, CATHERIN	8.50		123.93	I	
195025	5/11/12	000008	VISITING NURSE SERVICE	SCHMIDT, FREDER	6.00		87.48	I	
195026	5/11/12	800000	VISITING NURSE SERVICE	SCHNEIER, CATHE	9.00		131.22	I	
				CUSTOMER	23.50	0.00	342.63		
				CATEGORY	23.50	0.00	342.63		

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 24	18
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	CSA	
				S A L E S R E G I S T E R			BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195027	5/11/12	000008	VISITING NURSE SERVICE	SCOTT, CATHERIN	48.00		699.84	I	
195028	5/11/12	800000	VISITING NURSE SERVICE	SEGOVIA, BEATRI	36.00		524.88	I	
195029	5/11/12	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	46.25		674.34	I	
195030	5/11/12	000008	VISITING NURSE SERVICE	SERRANO, AGUEDA	56.00		816.48	I	
195031	5/11/12	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	42.00		612.36	I	
				CUSTOMER	228.25	0.00	3,327.90		
				CATEGORY	228.25	0.00	3,327.90		

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGISTER			PAGE 1 - 249 ADU ADULT BILL WEEK ENDING 5/18/3	1 2
INVOICE#	DATE	CUST NO	-	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	
195032	5/11/12	800000	VISITING NURSE SERVICE	SHARMA, DEROPDI	29.00		422.82 I	
				CATEGORY	29.00	0.00	422.82	

RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY	PAGE 1 - 250 VCP CHOICE LHCSA
SALES REGISTER	BILL WEEK ENDING 5/18/12
INVOICE# DATE CUST NO CUSTOMER NAME REFERENCE HOURS TAX AMT	AMOUNT TYP SURPLUS
195033 5/11/12 000008 VISITING NURSE SERVICE SIFFETI, ROHAFZ 6.00	87.48 I
CATEGORY 6.00 0.00	 87.48

١	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	251
١	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	W/O WALLS (LT
١				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195034	5/11/12	800000	VISITING NURSE SERVICE	SILLS, JAMES	42.00		612.36 I	
ı					CATEGORY	42.00	0.00	612.36	

			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
195035	5/11/12	800000	VISITING NURSE SERVICE	SINGH, BADREE	30.00		437.40	I
				CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				PAGE 1 - 2	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAB O	
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195036	5/11/12	000008	VISITING NURSE SERVICE	SINGH, JAMOONIE	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN				REGNY 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
195037	5/11/12	800000	VISITING NURSE SERVICE	SOLDATI, RONDA	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	55
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195038	5/11/12	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	56
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	/O WALLS (LT
				SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195039	5/11/12	800000	VISITING NURSE SERVICE	SORIA, ROLANDO	34.00		495.72 I	
				CATEGORY	34.00	0.00	495.72	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	257
ı	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
ı				5	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
ı	111101011	21112	0001 1.0	00010111111111111	1122 21121102	110 0110		11100111 111	50111 205
	195040	5/11/12	800000	VISITING NURSE SERVICE	SOTO, MARCELINA	12.00		174.96 I	
					CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 - 258	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	0 /10
			2	SALES REGISTER			BILL WEEK ENDING 5/18	8/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURI	PLUS
195041	4/06/12	000008	VISITING NURSE SERVICE	SOTO, OSCAR	1.00		14.58 I	
195042	5/11/12	800000	VISITING NURSE SERVICE	STAMATIADES, ME	9.00		131.22 I	
				CUSTOMER	10.00	0.00	145.80	
				CATEGORY	10.00	0.00	145.80	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0281	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195043	5/11/12	800000	VISITING NURSE SERVICE	STAMBOULIDIS, V	56.00		816.48 I	
				CATEGORY	56.00	0.00		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	60
SALES JRN	L # 0281	LOC 001		REG NY NY			HOA HOSPICE ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195044	5/11/12	800000	VISITING NURSE SERVICE	STEIN, STEPHANI	21.00		306.18 I	
				CATEGORY	21.00	0.00	306.18	

	05/16/12 - JL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDING	261 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195045	5/11/12	000008	VISITING NURSE SERVICE	STENOS, MOSHOUL	13.00		189.54 I	
				CATEGORY	13.00	0.00	189.54	

			YSIDE CITYWIDE	DEC NV NV			PAGE 1 -	
SALES JRN	L # UZ81	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AUR ADULT REHAE BILL WEEK ENDIN	-
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
195046	5/11/12	800000	VISITING NURSE SERVICE	STERGIOU, GLORI	15.00		218.70 I	
				CATEGORY	15.00	0.00	218.70	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 26	53
Bribbs ord	0201	100 001		ALES REGISTER			BILL WEEK ENI		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195047	5/11/12	000008	VISITING NURSE SERVICE	STICKELL, BLANC	35.00		510.30	I	
195048	5/11/12	800000	VISITING NURSE SERVICE	STROBL, ALFRED	36.00		524.88		
				CUSTOMER	71.00	0.00	1,035.18		
				CATEGORY	71.00	0.00	1,035.18		

RUN DATE 05 SALES JRNL		SUP SUNNY LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOM BILL WEEK ENDING	
INVOICE#	DATE C	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
	- , ,		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	2.50 16.00		36.45 I 233.28 I	
				CUSTOMER	18.50	0.00	269.73	
				CATEGORY	18.50	0.00	269.73	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 26	55
Bribbs orde	0201	100 001		SALES REGISTER			BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195051	5/11/12	000008	VISITING NURSE SERVICE	TABOADA, DIMAS	3.75		54.68	I	
195052	5/11/12	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	71.25		1,038.84	Т	
				CUSTOMER	75.00	0.00	1,093.52		
				CATEGORY	75.00	0.00	1,093.52		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTEF	2		PAGE 1 - 2 LTC NURSING HOMEV BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195053 195054	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	56.00 15.75		816.48 I 229.64 I	
				CUSTOMER	71.75	0.00	1,046.12	
				CATEGORY	71.75	0.00	1,046.12	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 267 VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195055 195056	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TEJADA, BALDOME TERZIAN, ASDGHI	20.00 42.00		291.60 I 612.36 I	
				CUSTOMER	62.00	0.00	903.96	
				CATEGORY	62.00	0.00	903.96	

RUN DATE (05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 268	
SALES JRNI	և # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AMH ADULT MENTAL HEALTH	
			5	SALES REGISTER			BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195057	5/11/12	800000	VISITING NURSE SERVICE	THEN, MARIA	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	269
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
			S	SALES REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195058	5/11/12	000008	VISITING NURSE SERVICE	TINOCO, INES	31.50		459.27	I
195059	5/11/12	000008	VISITING NURSE SERVICE	TORO VEGA, LUZV	28.00		408.24	I
195060	5/11/12	800000	VISITING NURSE SERVICE	TORO, PURA	83.75		1,221.08	I
195061	5/11/12	800000	VISITING NURSE SERVICE	TORRES, EMELINA	40.00		583.20	I
195062	5/11/12	800000	VISITING NURSE SERVICE	TORRES, LUZ M	83.75		1,221.08	I
				CUSTOMER	267.00	0.00	3,892.87	
				CATEGORY	267.00	0.00	3,892.87	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 27	70
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	O WALLS (LT
			Ş	SALES REGISTE	R		BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195063	4/20/12	000008	VISITING NURSE SERVICE	TORRES, MARGOT	6.00		87.48	I	
195064	5/11/12	000008	VISITING NURSE SERVICE	•	42.00		612.36	Ī	
				CUSTOMER	48.00	0.00	699.84		
				==					
				CATEGORY	48.00	0.00	699.84		

			YSIDE CITYWIDE				PAGE 1 - 271	
SALES J	RNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 5/1	8/12
TATIOTOR	D3	CITCE NO	GUGEOMED NAME	DEFEDENCE	HOUDA	W237 234W	AMOUNT THE CLIP	DI IIG
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
195065	5/11/12	800000	VISITING NURSE SERVICE	TOUMA, MATTA	35.00		510.30 I	
				CATEGORY	35.00	0.00	510.30	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 27	2
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	E /10 /10
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195066	5/11/12	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	55.75		812.84 I	
				CATEGORY	55.75	0.00	812.84	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	273
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING HOM	IE W/O WALLS LT
				SALES REGISTER			BILL WEEK ENDIN	IG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
INVOICEN	DITTE	CODI NO	CODIONER WILL	REI BREIVEE	1100110	11111 11111	11100111 11	orti Eob
195067	5/11/12	800000	VISITING NURSE SERVICE	TSUAI, PING	13.00		189.54	
				CATEGORY	13.00	0.00	189.54	

	05/16/12 - L # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	- 274	
DALLO OICI	1 # 0201	100 001		SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
195068 195069	5/11/12 5/11/12	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TZOUMAS, EFFIE UGURLUYAN, KARA	63.00 7.00		918.54 1,224.72	I I	
				CUSTOMER	70.00	0.00	2,143.26		
				CATEGORY	70.00	0.00	2,143.26		

RUN	DATE C)5/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	275
SALE	ES JRNI	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	· ·
					SALES REGISTER			BILL WEEK ENDING	5/18/12
INVC	DICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
1950	70	5/11/12	800000	VISITING NURSE SERVICE	URBINA, ANA	35.00		510.30 I	
					CATEGORY	35.00	0.00		

	05/16/12 - IL # 0281		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY SALES REGISTER			PAGE 1 - 2 AUR ADULT REHAB OF BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195071	5/11/12	800000	VISITING NURSE SERVICE	VACCA, MARIA	9.00		131.22 I	
				 CATEGORY	9.00	0.00	131.22	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2'	77
SALES JRN	L # 0281	LOC 001		REG NY NY			ADU ADULT	
			2	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195072	5/11/12	800000	VISITING NURSE SERVICE	VALENCIA, ESTHE	13.00		189.54 I	
				CATEGORY	13.00	0.00	189.54	

RUN I	DATE 05/16/12	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 27	78
SALES	S JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
19507	73 5/11/12	800000	VISITING NURSE SERVICE	VALENTI, HELEN	8.00		116.64 I	
				CATEGORY	8.00	0.00	116.64	

			YSIDE CITYWIDE				PAGE 1 - 279	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	10/10
				SALES REGISTER			BILL WEEK ENDING 5/	18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
195074	5/11/12	000008	VISITING NURSE SERVICE	VALENTIN, ALEJA	20.00		291.60 I	
195075	5/11/12	800000	VISITING NURSE SERVICE	VARELAS, ANNA	3.00		43.74 I	
				CUSTOMER	23.00	0.00	335.34	
				CATEGORY	23.00	0.00	335.34	

RUN DATE (SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 280 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
195076 195077	5/11/12 5/11/12	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	6.00 4.00		87.48 I 58.32 I
				CUSTOMER	10.00	0.00	145.80
				CATEGORY	10.00	0.00	 145.80

			NYSIDE CITYWIDE				PAGE 1 -	281	
SALES	S JRNL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS		
				SALES REGISTER			BILL WEEK ENDIN	IG 5/18/12	
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS	
19507	78 5/11/12	000008	VISITING NURSE SERVICE	VASQUEZ, ARTURO	48.00		699.84 I		
				CATEGORY	48.00	0.00	699.84		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 28	2
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/	•
			\$	SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195079	5/11/12	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	33.00		481.14	I	
195080	5/11/12	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	20.75		302.54	I	
195081	5/11/12	800000	VISITING NURSE SERVICE	VAZQUEZ, ESTHER	40.00		583.20	I	
							1 266 22		
				CUSTOMER	93.75	0.00	1,366.88		
				CATEGORY	93.75	0.00	1,366.88		

			YSIDE CITYWIDE				PAGE 1 - 2	83
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	F /10 /10
			\$	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195082	5/11/12	800000	VISITING NURSE SERVICE	VELASQUEZ, NELL	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

	DATE 05/16/12 S JRNL # 0281			REG NY NY			LTC NURSING HOM	
				SALES REGISTER			BILL WEEK ENDIN	IG 5/18/12
INVO	ICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
19508	33 5/11/12	000008	VISITING NURSE SERVICE	VENTURA, ROSA	49.00		714.42 I	
				CATEGORY	49.00	0.00	714.42	

RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	85
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195084	5/11/12	800000	VISITING NURSE SERVICE	VERAS, JUANA	40.00		583.20 I	
				CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC MY MY			PAGE 1 - 2	
SALES URN	L # U281	TOC 001		REG NY NY SALES REGISTER			HOA HOSPICE ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195085	5/11/12	800000	VISITING NURSE SERVICE	VIGORITO, ANN	20.00		291.60 I	
				CAMBROON				
				CATEGORY	20.00	0.00	291.60	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	287
SALES JRN	IL # 0281	LOC 001		REG NY NY			VCP CHOICE LHCSA	
			S	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195086	5/11/12	800000	VISITING NURSE SERVICE	VILLAPOL, ANNA	24.00		349.92 I	
				CATEGORY	24.00	0.00	349.92	

RUN DATE (05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 28	38
SALES JRNI	և # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CAR	RE PROGRAM
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195087	5/11/12	800000	VISITING NURSE SERVICE	VISCONTI, JASON	3.50		51.03 I	
				CATEGORY	3.50	0.00	51.03	

ı	RUN DATE	05/16/12 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	189
ı	SALES JRN	L # 0281	LOC 001		REG NY NY			LTC NURSING HOMEW	•
ı				:	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195088	5/11/12	800000	VISITING NURSE SERVICE	VITO, CARMEN	30.00		437.40 I	
ı					CATEGORY	30.00	0.00	437.40	

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2:	90
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			5	SALES REGISTER			BILL WEEK ENDING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195089	5/11/12	800000	VISITING NURSE SERVICE	VIVACQUA, EMMA	68.75		1,002.38 I	
				CATEGORY	68.75	0.00	1,002.38	

			YSIDE CITYWIDE				PAGE 1 - 29	91
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/18/12
								-, -,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195090	5/11/12	800000	VISITING NURSE SERVICE	VLAHOS, MARIE	20.00		291.60 I	
				CATEGORY	20.00	0.00	291.60	

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 29	2
	.2 0201	200 001		SALES REGISTER			BILL WEEK END		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195091	5/11/12	800000	VISITING NURSE SERVICE	VOLASTRO, JOHN	3.00		43.74	I	
195092	5/11/12	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	30.00		437.40	Τ	
				CUSTOMER	33.00	0.00	481.14		
				CATEGORY	33.00	0.00	481.14		

			YSIDE CITYWIDE				PAGE 1 - 293	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	5/18/12
				SALES REGISIER			BILL WEEK ENDING	5/10/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195093	5/11/12	800000	VISITING NURSE SERVICE	WERKMEISTER, JO	12.00		174.96 I	
				CATEGORY	12.00	0.00	 174.96	

RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE				PAGE 1 - 29	94
SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG	NY NY			VCP CHOICE LHCSA	
SALE	S REGISTER			BILL WEEK ENDING	5/18/12
INVOICE# DATE CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195094 5/11/12 000008 VISITING NURSE SERVICE	YAGHDJIAN, SIRA	16.00		233.28 I	
	CATEGORY	 16.00	0.00	233.28	

ı	RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 2	95
١	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CCL CONGREGATE CA	RE PROGRAM
				S	SALES REGISTER			BILL WEEK ENDING	5/18/12
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	195095	5/11/12	800000	VISITING NURSE SERVICE	YELLAPAH, DOLLI	12.00		174.96 I	
ı									
ı					CATEGORY	12.00	0.00	174.96	

			YSIDE CITYWIDE				PAGE 1 - 296	
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
				SALES REGISTER			BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195096	5/11/12	000008	VISITING NURSE SERVICE	ZAMBRANO, VICTO	3.00		43.74 I	
195097	5/11/12	800000	VISITING NURSE SERVICE	ZAMBRANO, VICTO	3.00		43.74 I	
				CUSTOMER	6.00	0.00	87.48	
				COSTONER	0.00	0.00	07.10	
				CATEGORY	6.00	0.00	87.48	

RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 297 SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY GUI GUILDNET SALES REGISTER BILL WEEK ENDING 5/18/12 REFERENCE HOURS TAX AMT AMOUNT TYP INVOICE# DATE CUST NO CUSTOMER NAME SURPLUS 195098 5/11/12 000010 195099 5/11/12 000010 195100 5/11/12 000010 195101 5/11/12 000010 195102 5/11/12 000010 195103 5/11/12 000010 195104 5/11/12 000010 195105 5/04/12 000010 5/11/12 195106 000010 195107 5/11/12 000010 195108 5/11/12 000010 195109 5/11/12 000010 195110 5/11/12 000010 195111 5/11/12 000010 195112 5/11/12 000010 195113 5/11/12 000010 195114 5/11/12 000010 195115 4/27/12 000010 195116 5/11/12 000010 195117 5/11/12 000010 195118 5/11/12 000010 195119 5/11/12 000010 195120 5/11/12 000010 195121 5/11/12 000010 195122 5/11/12 000010 195123 5/11/12 000010 195124 5/04/12 000010 195125 5/11/12 000010 195126 5/11/12 000010 195127 5/11/12 000010 195128 5/11/12 000010 195129 5/11/12 000010 195130 5/11/12 000010 195131 5/11/12 000010 195132 5/04/12 000010 195133 5/04/12 000010 195134 5/11/12 000010 195135 5/11/12 000010 195136 5/11/12 000010 GUILDNET 195137 000010 GUILDNET 5/11/12 195138 5/11/12 000010 GUILDNET 195139 000010 GUILDNET 5/11/12 000010 GUILDNET 195140 5/04/12 195141 5/04/12 000010 195142 5/11/12 000010 195143 5/11/12 000010 195144 5/11/12 000010 195145 5/11/12 000010 GUILDNET 5/11/12 000010 GUILDNET

195146

			YSIDE CITYWIDE				PAGE 2 -	29	8
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			GUI GUILDNET		
				REG NY NY SALES REGISTI	E R		BILL WEEK ENDI	NG	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	'YP	SURPLUS
195147	5/11/12	000010	GUILDNET	DENA WALESKA	56 00		813 12	I	
195148	5/11/12	000010	GUILDNET	DEDE7 MADIA	30.00		435 60	I	
195149	5/11/12	000010	GUILDNET	DICHARDO MARIA	63 00		914 76	Ī	
195150	5/11/12	000010	GUILDNET	DDONNO ALTOTA	21 00		325 92	I	
195151	5/11/12	000010	GUILDNET	DROAMO BRIMO	33 00		512 16	I	
195152	5/11/12	000010	GUILDNET	DEVCE CIVELA	16 00		222.10	I	
195152	5/04/12	000010	GUILDNET	DAMOS FSTUED	10.00		252.32	I	
195153	5/11/12	000010	GUILDNET	RAMOS, ESITER	19.00		301.30 261 26	I	
195154	5/11/12	000010	GUILDNET	RESIULA, VINCEN	20.00		201.30	I	
195155	5/04/12	000010	GUILDNET	DODDICHEZ EADI	20.00		290.40	I	
195156	5/11/12	000010	GUILDNET	RODRIGUEZ, FABI	49.00		014.76	I	
			GUILDNET	RODRIGUEZ, HOLG	03.00		914.76		
195158	5/11/12	000010	GUILDNET	ROJAS, ANGEL	15.00		232.80	I	
195159	5/11/12	000010	GUILDNET	ROJAS, HAYDEE	20.00		310.40	I	
195160	5/11/12	000010	GUILDNET	ROJO, MANUEL	17.00		332.32	I	
195161	5/04/12	000010	GUILDNET	RUBIANO, MARIA	28.00		406.56	I	
195162	5/11/12	000010	GUILDNET	SALJANIN, DILJA	61.00		885.72	I	
195163	5/11/12	000010	GUILDNET	SANCHEZ, ELIZAB	36.00		522.72	I	
195164	5/11/12	000010	GUILDNET	SHELTON, AGUEDA	35.00		508.20	I	
195165	5/11/12	000010	GUILDNET	SOMRAJ, UMILLA	8.00		116.16	I	
195166	5/11/12	000010	GUILDNET	TOROSSIAN, PARI	28.00		406.56	I	
195167	5/11/12	000010	GUILDNET	VLAHOS, MARIE	50.00		726.00	I	
195168	5/11/12	000010	GUILDNET	WEISZ, KLARA	8.00		116.16	I	
195169	5/11/12	000010	GUILDNET	WEST, BALDWIN	1.00		14.52	I	
195170	5/11/12	000010	GUILDNET	WHITLEY, MYRNA	20.00		290.40	I	
195171	5/11/12	000010	GUILDNET	YI, CARLOS	24.00		348.48	I	
195172	5/11/12	000010	GUILDNET	YIANTSELIS, VIR	6.00		1,132.32	I	
195173	5/11/12	000010	GUILDNET	ZARE, GLORIA	59.00		856.68	I	
195174	5/11/12	000010	GUILDNET	ZARE, GLORIA	16.00		232.32	I	
195175	5/11/12	000010	GUILDNET	ZUMAETA, FANNY	64.00		929.28	I	
				REFERENCE PENA, WALESKA PEREZ, MARIA PICHARDO, MARIA PROANO, ALICIA PROANO, BRUNO PRYCE, CLYDIA RAMOS, ESTHER RESTULA, VINCEN RIVAS, GERTRUDI RODRIGUEZ, FABI RODRIGUEZ, FABI RODRIGUEZ, HOLG ROJAS, ANGEL ROJAS, HAYDEE ROJO, MANUEL RUBIANO, MARIA SALJANIN, DILJA SANCHEZ, ELIZAB SHELTON, AGUEDA SOMRAJ, UMILLA TOROSSIAN, PARI VLAHOS, MARIE WEISZ, KLARA WEST, BALDWIN WHITLEY, MYRNA YI, CARLOS YIANTSELIS, VIR ZARE, GLORIA ZARE, GLORIA ZUMAETA, FANNY CUSTOMER	2,508.75	0.00	41,809.33		
				CATEGORY	2,508.75	0.00	41,809.33		

RUN DATE	05/16/12	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTE:			PAGE 1	- 29	99
SALES JRN	IL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HFS HEALTH FI	RST	
				SALES REGISTE:	R		BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
105176	F /11 /10	000100	HEALEH ETDOM	DECIM MANUADA	20.00		470 64	-	
195176 195177	5/11/12 5/11/12	000122 000122	HEALTH FIRST	BEGUM, MANWARA	28.00		4/2.64		
195177	5/11/12	000122	HEALIH FIRSI	BHAIRU, KUWSILI	36.00		945.28		
195178	5/11/12	000122	HEALIH FIRSI	CARMONA LUZ	40.00		675 20		
195179	5/11/12	000122	UPALIU LIKSI	CARMONA, LUZ	40.00		0/3.20		
195181	5/11/12	000122	HEALIH FIRSI	CERALLOG ANA	40.00		675 20	T	
195182	5/11/12	000122	HEALIN FIRST	CEDALLOS, ANA	30.00		506 40	T	
195183	5/11/12	000122	HEVILL LIKSI	COPTES DE CALTA	18 00		300.40		
195184	5/11/12	000122	HEALIN FIRST	DODNELLAC CTEL	24 00		405 12	T	
195185	5/11/12	000122	HEALIN FIRST	FCDATLLAT AMDA	28 00		472 64	T	
195186	5/11/12	000122	DEVILO ELDOA	ESTATION, AMEA	42.00		709 96		
195187	5/11/12	000122	HEALIN FIRST	FFPCFPCON TIME	35 00		590.90	T	
195188	5/11/12	000122	DEVILD EIDGE	FERGERSON, IINA	33.00		151 02		
195189	5/11/12	000122	HEALIN FIRST	FONTANES DEDEO	49 00		927 12	T	
195190	5/11/12	000122	DEVILD EIDGE	FONTANES, PEDRO	56 OO		045 20		
195191	5/11/12	000122	DEVILD EIDGE	FRANCISCO, RICH	12 00		202.20		
195191	5/11/12	000122	HEALTH FIRST	TRIAD, DARDARA	0.00		125 04		
195193	5/11/12	000122	DEVILD EIDGE	HENRI, BRENDA UPDDING CUADIF	12 00		202 56		
195194	5/11/12	000122	DEVILD EIDGE	MARING, CHARLE	12.00		202.30		
195195	5/11/12	000122	DEVILD EIDGE	TADA TOMACA	20 00		027.12 472 64		
195196	5/04/12	000122	DEVILD EIDGE	TAZATA CIADVO	122 00		2 220 16		
195197	5/11/12	000122	DEVILD EIDGE	IAZALA, GLADIS	77 00		1 200 76		
195198	5/11/12	000122	DEVILD EIDGE	MACADENA CAUAD	77.00 50 00		2// 00		
195196	5/11/12	000122	UEVILLI EIDOZ	MACARENA, SAHAR	11 00		105 60		
195200	5/11/12	000122	UEALIN FIRSI	MARIIN, ARIANA	11.00		105.00	± +	
195200	5/11/12	000122	UEALIN FIRSI	ORIIZ, IULA	25.00 1F 00		422.00	± +	
195201	5/11/12	000122	HEALIH FIRSI	RIVERA, CHRISIO	15.00		253.20		
195202	5/11/12	000122	HEALTH FIRST	DODDICHEZ MADC	20.00		233.20		
195204	5/11/12	000122	HEALTH FIRST	DILLY ID CAMILEI	17 00		337.00		
195204	5/11/12	000122	UEVILLI EIDOZ	RUIZ UR, SAMUEL	17.00		200.90 04E 20		
195205	5/11/12	000122	UEVILLI EIDOZ	SALAZAR, LUZ MA	40.00		943.40 67E 20		
195200	5/04/12	000122	UEVILLI EIDOZ	CDIVEY DATELOT	25 00		6/3.20 E00 00		
195207	5/11/12	000122	HEALIH FIRSI	SPIVEY, PAIRICI	35.00		1 147 04		
195208	5/11/12	000122	UEVILLI LIKOI	SI KUMAINE, CLA	20.00		1,147.84		
195210		000122	HEALIH FIRSI	SURIEL, GERIRUD	28.UU 40.00		4/2.04		
195210	5/11/12 5/11/12	000122 000122	UPWILL LIKOI	VEGA, GLUKIA	12 00		0/3.20		
195211	5/11/12	000122	HEALIH FIRSI	WILLIAMS, RODNE	12.00		202.50	Τ	
				REFERENCE BEGUM, MANWARA BHAIRO, KOWSILI BOCHENEC, JOLAN CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA CORTES DE GALIN DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH FRIAS, BARBARA HENRY, BRENDA HERRING, CHARLE KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA ORTIZ, TULA 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	1,289.00	0.00	21,758.32		
				CATEGORY	1,289.00	0.00	21,758.32		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1	- 30	00
SALES JRN	rL # 0281	LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			NHP NEIGHBORE	HOOD I	HEALTH
			SALE	S REGISTER			BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CHICT NO	CUSTOMER NAME	DEFEDENCE	TUILD G	ጥለሄ ለΜጥ	∧ MOTINT	TVD	SURPLUS
INVOICE#	DATE	COSI NO	COSTONER NAME	KEPEKENCE	1100105	IAA ANI	AMOUNT	III	SORFIOS
195212	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	AHMED, UMARA	56.00		945.28	I	
195213	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	AKHTER, SELINA	45.00		759.60	I	
195214	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	ARDITTO, PATRIC	30.00		506.40	I	
195215	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
195216	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
195217	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
195218	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	60.00		1,012.80	I	
195219	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	45.00		759.60	I	
195220	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHALIL, RASHAN	36.00		607.68	I	
195221	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KHAN, FARUQUE	81.00		1,367.28	I	
195222	4/13/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHERIN	14.00		236.32	I	
195223	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHERIN	38.00		641.44	I	
195224	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES FERNAD	43.00		725.84	I	
195225	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	36.00		607.68	I	
195226	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	22.00		371.36	I	
195227	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, JESS	25.00		422.00	I	
195228	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
195229	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	56.00		945.28	I	
195230	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
195231	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
195232	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
195233	5/11/12	000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	38.00		641.44	I	
			NEIGHBORHOOD HEALTH PROVIDERS NEIGHB						
				CATEGORY	845.00	0.00	14,263.60		

RUN DATE (05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30)1
SALES JRNI	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHOI	LIC/FI	IDELIS
				SALES REGISTER			BILL WEEK ENI	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195234	5/11/12	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	49.00		826.63	I	
195235	5/11/12	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	40.00		674.80	I	
195236	5/11/12	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	35.00		590.45	I	
195237	5/11/12	000126	NYS CATHOLIC/FIDELIS	LITMA, GAIL	25.00		421.75	I	
195238	5/11/12	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.08	I	
195239	5/11/12	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,062.81	I	
195240	4/27/12	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	31.00		586.10	I	
195241	5/11/12	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	33.00		556.71	I	
195242	5/11/12	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	63.00		1,062.81	I	
				, ~					
				CUSTOMER	423.00	0.00	7,199.14		
							,		
				CATEGORY	423.00	0.00	7,199.14		
							•		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - UHC UNITED HEALT	
Brillio Grav	1 0201	100 001	BOINTBIBE CITIMIBE	SALES REGISTER			BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195243	5/11/12	000128	UNITED HEALTH CARE	CALDERON, MIGDA	70.00		1,201.20 I	
195244	5/11/12	000128	UNITED HEALTH CARE	MUSHAYEV, BORIS	15.00		257.40 I	
195245	5/11/12	000128	UNITED HEALTH CARE	SAFOS, PATRA	56.00		960.96 I	
195246	5/11/12	000128	UNITED HEALTH CARE	YUSUPOV, PULAT	28.00		480.48 I	
				CUSTOMER	169.00	0.00	2,900.04	
				CATEGORY	169.00	0.00	2,900.04	

RUN DATE SALES JRN	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 EHP EMBLEM H	- 30 EALTH)3
511225 014	.2 0201	200 001		_	ISTER		BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENC	CE HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195247	5/11/12	000114	EMBLEM HEALTH	CAMPBELL	CAROL 26.00		364.00	I	
195248	5/11/12	000114	EMBLEM HEALTH	COPE, WII	LLIE 84.00		1,176.00	I	
195249	5/11/12	000114	EMBLEM HEALTH	GAFFNEY,	FREDER 20.00		280.00	I	
195250	5/11/12	000114	EMBLEM HEALTH	JACKSON,	FRANCE 35.00		490.00	I	
195251	5/11/12	000114	EMBLEM HEALTH	KEATON, O	CATHERI 84.00		1,176.00	I	
195252	5/11/12	000114	EMBLEM HEALTH	REYNOLDS,	HARRI 8.00		112.00	I	
195253	5/11/12	000114	EMBLEM HEALTH	WESTFIELI	O, BREN 48.00		672.00	I	
				CUS	STOMER 305.00	0.00	4,270.00		
				CAT	TEGORY 305.00	0.00	4,270.00		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG	NY NY			PAGE 1 HIP HEALTH II	- 3(NSURAN	
				SALE	S REGISTER	2		BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195254	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	AHMAD, AMATUL	20.00		337.60	I	
195255	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	CIPRIAN, JACQUE	8.00		135.04	I	
195256	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	DE JESUS, TIBUR	62.00		1,046.56	I	
195257	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	63.00		1,063.44	I	
195258	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	30.50		514.84	I	
195259	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	PARADISE, ANITA	24.00		405.12	I	
195260	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	SHAH, HANSIKABE	5.00		84.40	I	
195261	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	20.00		337.60	I	
195262	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	19.75		333.38	I	
195263	5/11/12	000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	12.00		202.56	Ι	
					CUSTOMER	264.25	0.00	4,460.54		
					CATEGORY	264.25	0.00	4,460.54		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 30)5
SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HPS HEALTH P	LUS	
				SALES REGISTER			BILL WEEK EN	DING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195264	5/11/12	000138	HEALTH PLUS PHSP, INC	DENNISON, KELVI	28.00		476.00	I	
195265	5/11/12	000138	HEALTH PLUS PHSP, INC	ESPERSON, CLAUD	12.00		204.00	I	
195266	5/11/12	000138	HEALTH PLUS PHSP, INC	HARDING, EDNA	30.00		510.00	I	
195267	5/11/12	000138	HEALTH PLUS PHSP, INC	WALTERS, BYRON	25.00		425.00	I	
195268	5/11/12	000138	HEALTH PLUS PHSP, INC	YOUNG, KALEILE	18.00		306.00	I	
				CUSTOMER	113.00	0.00	1,921.00		
				CATEGORY	113.00	0.00	1,921.00		

RUN DATE	05/16/12 ·	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 MPH METROPLUS	- 30 HEAL	6 .TH
	- "			SALES REGISTER			BILL WEEK END	ING	5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP	SURPLUS
195269	5/11/12	000130	METROPLUS HEALTH	ANDERSON, BETH	12.00		205.80	I	
195270	5/11/12	000130	METROPLUS HEALTH	ANDERSON, BETH	26.00		445.90	I	
195271	5/11/12	000130	METROPLUS HEALTH		68.00		1,166.20	I	
195272	5/11/12	000130	METROPLUS HEALTH METROPLUS HEALTH	BEDOYA, MONICA	35.00		600.25	I	
195273	5/11/12	000130	METROPLUS HEALTH	BRACERO, HELEN	56.00		960.40	I	
195274	5/11/12	000130	METROPLUS HEALTH	BRIGGS, LOUIS	22.00		377.30	I	
195275	5/11/12	000130	METROPLUS HEALTH METROPLUS HEALTH METROPLUS HEALTH METROPLUS HEALTH METROPLUS HEALTH	ARIAS, NORA BEDOYA, MONICA BRACERO, HELEN BRIGGS, LOUIS CORDERO, ROSEND DAVIS, ANGIE DEWANJEE, MIRA DURHAM, CYNTHIA GALAS, TERESA MURDOCK, GERTRU	70.00		1,200.50	I	
195276	5/11/12	000130	METROPLUS HEALTH	DAVIS, ANGIE	133.00		2,280.95	I	
195277	5/11/12	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
195278	5/11/12	000130	METROPLUS HEALTH	DURHAM, CYNTHIA	12.00		205.80	I	
195279	5/11/12	000130	METROPLUS HEALTH METROPLUS HEALTH	GALAS, TERESA	35.00		600.25	I	
195280	5/11/12	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I	
195281	5/11/12	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I	
195282	5/11/12	000130	MEDDODITIC TEXTOR	PUCHUELA, MARIA	53.00		908.95	I	
195283	5/11/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI	24.00		411.60	I	
195284	5/11/12	000130	METROPLUS HEALTH	RYALS, CHARLES	8.00		137.20	I	
195285	5/04/12	000130	METROPLUS HEALTH	SANTORO, MATTHE	48.00		823.20	I	
195286	5/11/12	000130	METROPLUS HEALTH	SHUMON, NUK-FNU	28.00		480.20	I	
195287	4/20/12	000130	METROPLUS HEALTH	RAMPERSAID, ALI RYALS, CHARLES SANTORO, MATTHE SHUMON, NUK-FNU VALLE, BLASINA	82.00		1,406.30	I 	
				CUSTOMER		0.00			
				CATEGORY	843.00	0.00	14,457.45		

RUN DATE SALES JRN			YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG	NY NY			PAGE 1 WEL WELCARE	- 3()7
SALES OWN	1 # 0201	100 001	SONNISIDE CITIWIDE	SALE		R		BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195288	5/11/12	000124	WELCARE OF NEW YORK,	INC.	GENAO, DANIELA	54.75		941.70	I	
195289	5/11/12	000124	WELCARE OF NEW YORK,	INC.	GUERRERO, MIRTH	42.00		722.40	I	
195290	5/11/12	000124	WELCARE OF NEW YORK,	INC.	MARTINEZ, MARIA	42.00		722.40	I	
195291	5/11/12	000124	WELCARE OF NEW YORK,	INC.	RAMIREZ, ALIDA	62.25		1,070.70	I	
					CUSTOMER	201.00	0.00	3,457.20		
					 CATEGORY	201.00	0.00	3,457.20		

RUN DATE	05/16/12 -	- SUP SUNN	YSIDE CITYWIDE					PAGE 1 -	308
SALES JRN	NL # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG				NPS NY PRESBYTI	
				SALE	S REGISTER			BILL WEEK ENDI	NG 5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
195292	5/11/12	000134	NY-PRESBYTERIAN SYSTE	M SELECT	KARASSAVIDIS, A	35.00		600.60	I
					CATEGORY	35.00	0.00	600.60	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 AMG AMERIGRO	- 30)9
DALLS OIL	1 # 0201	DOC 001	SOUNTSIDE CITIWIDE	SALES REGISTER			BILL WEEK EN		5/18/12
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195293	5/11/12	000132	AMERIGROUP	FERNANDEZ, NORK	41.00		691.67	I	
195294	5/11/12	000132	AMERIGROUP	GUERRA, LORRAIN	41.00		691.67	I	
195295	5/11/12	000132	AMERIGROUP	HAWKINS S, MA	60.00		1,012.20	I	
195296	5/11/12	000132	AMERIGROUP	LINARES, NANCY	18.00		303.66	I	
195297	4/06/12	000132	AMERIGROUP	PRUITT, JOHNNY	4.00		67.52	I	
195298	5/11/12	000132	AMERIGROUP	PRUITT, JOHNNY	8.00		135.04	I	
				CUSTOMER	172.00	0.00	2,901.76		
				CATEGORY	172.00	0.00	2,901.76		

	E 05/16/12 - RNL # 0281		TYSIDE CITYWIDE REG	NV NV			PAGE 1 PAR PRIVATE	- 33	LO
SALES	KNL # 0201	LOC 001	SONNISIDE CITIWIDE REG S A L E				BILL WEEK EN	DING	5/18/12
INVOICE	# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195299 195300 195301 195302	5/11/12 5/04/12 5/11/12 5/11/12	000002 000002 000002 000002	SUNNYSIDE COMMUNITY SERVICES SUNNYSIDE COMMUNITY SERVICES SUNNYSIDE COMMUNITY SERVICES SUNNYSIDE COMMUNITY SERVICES	GRECH, JANE TEODORU, MIRELL TEODORU, MIRELL TUCCI, DOROTHY	4.00		116.00 58.00 58.00 116.00	I I I	
				CUSTOMER	24.00	0.00	348.00		
195303	5/11/12	000040	DUISIN, CHRISTINE	DUISIN, XENIA	20.00		310.00	I	
195304 195305 195306 195307 195308	5/11/12 4/27/12 5/04/12 5/04/12 5/11/12	000049 000049 000049 000049 000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE MORSHELINA, NAS MORSHELINA, NAS MORSHELINA, NAS MORSHELINA, NAS	15.00 3.00		344.75 206.85 41.37 165.48 206.85	I I I I	
				CUSTOMER	70.00	0.00	965.30		
195309	5/11/12	000069	AMY L. WELTMAN	LUSKIND, FRANCE	7.00		1,338.00	I	
195310	5/11/12	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	8.00		124.00	I	
				CATEGORY	129.00	0.00	3,085.30		

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I S T E R			PAGE 1 CAS CHILDREN BILL WEEK EN		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195311 195312 195313 195314 195315 195316 195317	5/11/12 5/11/12 5/04/12 5/11/12 4/27/12 5/04/12 5/11/12	000088 000088 000088 000088 000088 000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA GIL, GENEVIEVE GIL, MARANGELI GIL, MARANGELI SALAS, HELENA SALAS, HELENA SALAS, HELENA	25.00 6.00 2.00 6.00 4.00 4.00 28.00		387.50 93.00 31.00 93.00 62.00 62.00 434.00	I I I I I	
				CUSTOMER	75.00	0.00	1,162.50		
				CATEGORY	75.00	0.00	1,162.50		

RUN DATE SALES JRN		- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - 312 PAR PRIVATE BILL WEEK ENDING 5/18/12	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
195318	5/11/12	000098	MILDRED PANSE	PANSE, MILDRED	18.25		282.88 I	
				CATEGORY	 18.25	0.00	282.88	

RUN DATE (SALES JRN)		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ELD ELDERSERVEHE BILL WEEK ENDING	EALTH
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
195319 195320	5/11/12 5/11/12	000101 000101	ELDERSERVEHEALTH ELDERSERVEHEALTH	BEAN, ELMIRA BLACK, DOROTHY	24.00 12.00		342.00 I 171.00 I	
				CUSTOMER	36.00	0.00	513.00	
				CATEGORY	36.00	0.00	513.00	

RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE								PAGE 1 - 314			
	SALES JRN	L # 0281	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAR PRIVATE		F /10 /10	
					SALES REGISTER			BILL WEEK ENI	JING	5/18/12	
	INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
	195321	5/11/12	000143	ETTORE COPPOLA	COPPOLA, ETTORE	19.75		313.63	I		
	195322	5/11/12	000145	LARRY EISENBERG	BERGER, TESS	53.00		848.50	I		
					CATEGORY	72.75	0.00	1,162.13			

RUN DATE 05/16 SALES JRNL # 0		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG S A L E				PAGE 1 CCM COMPREHE BILL WEEK EN		
INVOICE# DAT	E CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
195323 5/11 195324 5/11 195325 5/11	/12 000150	COMPREHENSIVE CARE N COMPREHENSIVE CARE N COMPREHENSIVE CARE N	MANAGEMENT	BONES, ANA GARCIA, MARIA ROSARIO, CELEST	20.00 24.00 36.00		282.00 338.40 507.60	I I I	
				CUSTOMER	80.00	0.00	1,128.00		
				CATEGORY	80.00	0.00	1,128.00		

RUN DATE 05/16/12 - SALES JRNL # 0281		SUP SUNN LOC 001		NY NY S REGISTE	SISTER			PAGE 1 - 316 PAR PRIVATE BILL WEEK ENDING 5/18/12		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
195326	5/11/12	000155	ROSEMARY JIBAJA	JIBAJA, ROSEMAR	168.00		2,676.00	I		
195327	5/11/12	000161	MR. BRUCE J. TUCCI	TUCCI, DOROTHY	4.00		62.00	I		
195328	5/11/12	002215	KEITH SALMON	LAWRANCE, LILLA	16.00		254.00	I		
195329	5/11/12	003108	NIGRO, CATHERINE	NIGRO, CATHERIN	20.00		310.00	I		
195330	5/11/12	003743	VICTOR NICASSIO	NICASSIO, VICTO	9.00		139.50	I		
195331	5/11/12	004784	CAMILLERI, JOSEPH	CAMILLERI, JOSE	25.00		337.50	I		
195332	5/11/12	006337	STEPHEN EDEL	EDEL, CANDACE	81.00		1,279.50	I		
195333	5/11/12	007630	MAUREEN MAIORANA	MAIORANA, MAURE	8.00		130.00	I		
195334	5/11/12	007631	MICHAEL MAIRANO	MAIORANA, MICHE	12.00		195.00	I		
195335	5/11/12	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	6.00		99.00	I		
195336	5/11/12	009498	LOUIS LE NOACH	LENOACH, LOUIS	9.00		148.50	I		
195337	5/11/12	009566	ELIZABETH CERNY	CERNY, ELIZABET	25.00		387.50	I		
195338	5/11/12	009605	OLGA OBYMAKO	OBYMAKO, OLGA	6.00		93.00	I		
195339	5/11/12	009752	PETER CAPORASO	CAPORASO, VINCE	24.00		408.00	I		
195340	5/11/12	009854	HELEN TAYLOR	HERNANDEZ, FRAN	4.00		62.00	I		
195341	5/11/12	010269	ANGELINA MARASA	MARASA, ANGELIN	9.00		139.50	I		
195342	5/11/12	010305	AZHEIMER'S ASSOCIATION	URRAYA, PIEDAD	12.00		186.00	I		
195343	5/11/12	010352	BETTIE GIACOMO	GIACOMO, BETTIE	4.00		62.00	I		
195344	5/11/12	010375	DOMINICA IRAOLA	IRAOLA, LILIAN	12.00		195.00	I		
195345	5/11/12	010377	DOMINICA IRAOLA	IRAOLA, ANTONIO	11.00		178.75	I		
				CATEGORY	465.00	0.00	7,342.75			
				LOCATION	22,514.50	0.00	347,879.75			
				COMPANY	22,514.50	0.00	347,879.75			

RUN DATE 05/16/12 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 317
SALES JRNL # 0281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

281 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE
SALES REGISTER BILL WEEK ENDING 5/18/12

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

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