RUN DATE 12/07/11 - SUP SUNNYSIDE CITYWIDE
SALES JRNL # 0258 LOC 001 SUNNYSIDE CITYWIDE REG NY NY

## E REGNY NY SALES REGISTER

PAGE 1 - 1 SHP SENIOR HEALTH PARTNERS BILL WEEK ENDING 12/09/11

INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175156	12/02/11	000082	SENIOR HEALTH	PARTNERS	BROOKS, NATALIE	14.00		183.40	I	
175157	12/02/11	000082	SENIOR HEALTH	PARTNERS	BROOKS, NATALIE	10.00		131.00	I	
175158	12/02/11	000082	SENIOR HEALTH	PARTNERS	CARRILLO, MARIA	20.75		271.83	I	
175159	12/02/11	000082	SENIOR HEALTH	PARTNERS	CARRILLO, MARIA	13.75		180.13	I	
175160	12/02/11	000082	SENIOR HEALTH	PARTNERS	COLON, RAYMUNDA	29.00		379.90	I	
175161	12/02/11	000082	SENIOR HEALTH	PARTNERS	COLON, RAYMUNDA	8.00		104.80	I	
175162	12/02/11	000082	SENIOR HEALTH	PARTNERS	DABU, JUANITA	12.00		157.20	I	
175163	12/02/11	000082	SENIOR HEALTH	PARTNERS	DABU, JUANITA	4.00		52.40	I	
175164	12/02/11	000082	SENIOR HEALTH	PARTNERS	DABU, JUANITA	4.00		52.40	I	
175165	12/02/11	000082	SENIOR HEALTH	PARTNERS	FENTON, JESSIE	4.00		52.40	I	
175166	12/02/11	000082	SENIOR HEALTH	PARTNERS	FENTON, JESSIE	1.00		13.10	I	
175167	12/02/11	000082	SENIOR HEALTH	PARTNERS	FENTON, JESSIE	3.75		49.13	I	
175168	12/02/11	000082	SENIOR HEALTH	PARTNERS	GUTIERREZ, LUCI	5.00		65.50	I	
175169	12/02/11	000082	SENIOR HEALTH	PARTNERS	GUTIERREZ, LUCI	10.00		131.00	I	
175170	12/02/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, KHAMAT	23.00		301.30	Ī	
175171	12/02/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, KHAMAT	10.00		131.00	Ī	
175172	12/02/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, RAMDIA	97.00		1,270.70	Ī	
175173	12/02/11	000082	SENIOR HEALTH	PARTNERS	HARIDIN, RAMDIA	38.00		497.80	I	
175174	12/02/11	000082	SENIOR HEALTH	PARTNERS	HERNANDEZ, FRAN	14.00		183.40	Ī	
175175	12/02/11	000082	SENTOR HEALTH	PARTNERS	HERNANDEZ, FRAN	8.00		104.80	Ī	
175176	12/02/11	000082	SENTOR HEALTH	PARTNERS	LEPORE, CLAIRE	2.50		32.75	Ī	
175177	12/02/11	000082	SENTOR HEALTH	PARTNERS	LEPORE, CLAIRE	2.50		32.75	Ī	
175178	12/02/11	000082	SENTOR HEALTH	PARTNERS	MOROCHO MANUEL	34 00		445 40	Ī	
175179	12/02/11	000082	SENTOR HEALTH	PARTNERS	MOROCHO MANUEL	20 00		262 00	Ī	
175180	12/02/11	000082	SENTOR HEALTH	PARTNERS	PERALTA RAMONA	51 00		668 10	Ī	
175181	12/02/11	000082	SENTOR HEALTH	PARTNERS	PERALTA RAMONA	24 00		314 40	Ī	
175182	12/02/11	000082	SENTOR HEALTH	PARTNERS	STERRA MIRIAM	10 00		131 00	Ī	
175183	12/02/11	000082	SENTOR HEALTH	PARTNERS	STERRA MIRIAM	10.00		131 00	Ī	
175184	12/02/11	000082	SENTOR HEALTH	PARTNERS	SIMON LUPE	4 00		52 40	Ī	
175185	12/02/11	000082	SENTOR HEALTH	DARTNERS	SIMON LUDE	4 00		52.10	Ī	
175186	12/02/11	000082	SENTOR HEALTH	DARTNERS	TORRESCAMPOS .T	24 00		314 40	Ī	
175187	12/02/11	000082	SENTOR HEALTH	DARTNERS	TORRESCAMPOS .T	16 00		209 60	Ī	
175188	12/02/11	000082	SENTOR HEALTH	DARTNERS	VASCUEZ CORNEL	4 00		52 40	Ī	
175189	12/02/11	000082	SENTOR HEALTH	PARTNERS	VASOUEZ CORNEL	4 00		52.10	Ī	
175190	12/02/11	000082	SENTOR HEALTH	DARTNERS	VIDOT-I.INARES	24 00		314 40	Ī	
175191	12/02/11	000082	SENTOR HEALTH	DARTNERS	VIDOT LINARES,	16 00		209 60	Ī	
175192	12/02/11	000082	SENTOR HEALTH	DARTNERS	WOO LUZ	4 00		52 40	Ī	
175193	12/02/11	000082	SENTOR HEALTH	DARTNERS	WOO, LUZ	4 00		52.10	Ī	
173133	12/02/11	000002	DENIOR HEADIN	TAKTINEKO	WOO, HOZ					
					REFERENCE  BROOKS, NATALIE BROOKS, NATALIE BROOKS, NATALIE CARRILLO, MARIA CARRILLO, MARIA COLON, RAYMUNDA COLON, RAYMUNDA COLON, RAYMUNDA DABU, JUANITA DABU, JUANITA DABU, JUANITA DABU, JUANITA DABU, JUANITA COLON, JESSIE FENTON, JESSIE FENTON, JESSIE FENTON, JESSIE GUTIERREZ, LUCI GUTIERREZ, LUCI GUTIERREZ, LUCI HARIDIN, KHAMAT HARIDIN, KHAMAT HARIDIN, RAMDIA HERNANDEZ, FRAN LEPORE, CLAIRE LEPORE, CLAIRE LEPORE, CLAIRE LEPORE, CLAIRE MOROCHO, MANUEL MOROCHO, MANUEL MOROCHO, MANUEL MOROCHO, MANUEL TORRESCAMPOS, J TORRES	587.25	0.00	7,692.99		
							0.00			
								,		

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	-	2
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
				SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175194	12/02/11	000008	VISITING NURSE SERVICE	ABBOTT, FAY	3.00		43.74	I	
175195	12/02/11	800000	VISITING NURSE SERVICE	ABBOTT, FAY	6.00		87.48	I	
							101 00		
				CUSTOMER	9.00	0.00	131.22		
				CATEGORY	9.00	0.00	131.22		

RUN DATE	12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE	1 -	3
SALES JRN	IL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE	LHCSA	
				SALES REGISTER			BILL WEEK E	NDING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175196	12/02/11	800000	VISITING NURSE SERVIC	E ABINANTI, IRENE	40.00		583.20	I	
175197	12/02/11	800000	VISITING NURSE SERVIC	E ABINANTI, IRENE	16.00		233.28	I	
175198	12/02/11	800000	VISITING NURSE SERVIC	E ABREU, ANA	8.00		116.64	I	
175199	12/02/11	800000	VISITING NURSE SERVIC	E ABREU, ANA	4.00		58.32	I	
				CUSTOMER	68.00	0.00	991.44		
				CATEGORY	68.00	0.00	991.44		

RUN DATE 12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	4
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW	O WALLS (LT
		S	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
185000 10/00/11	000000		3.67773	01 00		206 10	_	
175200 12/02/11	000008	VISITING NURSE SERVICE	ACUNA, JOSE	21.00		306.18	1	
175201 12/02/11	000008	VISITING NURSE SERVICE	ACUNA, JOSE	15.00		218.70	Τ	
			CUSTOMER	36.00	0.00	524.88		
			CATEGORY	36.00	0.00	524.88		

RUN DATE 12/07/13	- SUP SUNI	NYSIDE CITYWIDE				PAGE 1 -	5
SALES JRNL # 025	B LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	SA
		S	REG NY NY A L E S R E G I S T E R			BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175202 11/25/13	. 000008	VISITING NURSE SERVICE	ADAMES, OLGA	5.00		72.90	I
175203 12/02/1	000008	VISITING NURSE SERVICE		15.00		218.70	I
175204 12/02/13		VISITING NURSE SERVICE	ADAMES, OLGA				I
175205 11/18/13		VISITING NURSE SERVICE	ADAMES, RICARDO			72.90	I
175206 12/02/1		VISITING NURSE SERVICE	ADAMES, RICARDO	25.00		364.50	_ T
175207 12/02/1		VISITING NURSE SERVICE	ADAMES, RICARDO	10.00		145.80	т Т
175208 12/02/1		VISITING NURSE SERVICE	ADAMS, MYRIAM			707.13	т Т
175209 12/02/1		VISITING NURSE SERVICE	ADAMS, MYRIAM				T.
175210 12/02/13		VISITING NURSE SERVICE	ADUN, JEANETTE	16 00		233.28	т Т
175211 12/02/13		VISITING NURSE SERVICE		8.00		116.64	
175212 12/02/13		VISITING NURSE SERVICE					± T
175213 12/02/13		VISITING NURSE SERVICE	AFZAL, AMIR AFZAL, AMIR	4.00		58.32	<u>т</u>
1/3213 12/02/1.	. 000000	VISITING NURSE SERVICE	AFZAL, AMIK	4.00		30.32	1
			GUGEOMER	160 75	0.00	2 474 06	
			CUSTOMER	169.75	0.00	2,474.96	
				160 85	0.00		
			CATEGORY	169.75	0.00	2,474.96	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	_	6
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW	O WALLS (LT
		5	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175214 12/02/11	000008	VISITING NURSE SERVICE	AGUILAR, ZORAID	19.75		287.96	I	
175215 12/02/11	800000	VISITING NURSE SERVICE	AGUILAR, ZORAID	14.00		204.12	I	
			CUSTOMER	33.75	0.00	492.08		
			CATEGORY	33.75	0.00	492.08		

RUN DATE	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	7
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS.	A
			S	REG NY NY A L E S R E G I S T E R			BILL WEEK ENDIN	G 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175216	12/02/11	000008	VISITING NURSE SERVICE	AGUTLAR-PROCE.	18.00		262.44 I	
175217	12/02/11	000008	VISITING NURSE SERVICE	AGUILAR-PROCE, AGUILAR-PROCE, AKBAR, NASEEM	6.00		87.48 I	
175218	11/25/11	000008	VISITING NURSE SERVICE	AKBAR. NASEEM	3.50		51.03 I	
175219	12/02/11	000008	VISITING NURSE SERVICE	AKBAR, NASEEM	8.00		116.64 I	
175220	12/02/11	000008	VISITING NURSE SERVICE	AKBAR, NASEEM			14.58 I	
175221	12/02/11	000008	VISITING NURSE SERVICE	ALESSIU, AGRIPI	3.00		43.74 I	
175222	12/02/11	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA			218.70 I	
175223	12/02/11	000008	VISITING NURSE SERVICE	ALFEREZ, GLORIA			145.80 I	
175224	12/02/11	000008	VISITING NURSE SERVICE				58.32 I	
175225	11/04/11	000008	VISITING NURSE SERVICE	ALRAHEB, KALDAS			29.16 I	
175226	12/02/11	000008	VISITING NURSE SERVICE	ALVAREZ, NAZARE			583.20 I	
175227	12/02/11	000008	VISITING NURSE SERVICE	ALVAREZ, NAZARE	16.00		233.28 I	
175228	12/02/11	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	40.00		583.20 I	
175229	12/02/11	000008	VISITING NURSE SERVICE	ANDRADE, LOLA	16.00		233.28 I	
175230	12/02/11	000008	VISITING NURSE SERVICE	ANDREWS, JOHNNI	39.75		579.56 I	
175231	12/02/11	800000	VISITING NURSE SERVICE	ANDREWS, JOHNNI	16.00		233.28 I	
				CUSTOMER	238.25	0.00	3,473.69	
				CATEGORY	238.25	0.00	3,473.69	

RUN DATE 12/07/11 - SUP SUI	NNYSIDE CITYWIDE				PAGE 1 -	8
SALES JRNL # 0258 LOC 003	1 SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HO	MEW/O WALLS (LT
	S	ALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE CUST NO	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
185020 11/10/11 000000		337G777 0 FT GV	4 00		E0 20	-
175232 11/18/11 000008	VISITING NURSE SERVICE	ANGULO, ELCY	4.00		58.32	L
175233 12/02/11 000008	VISITING NURSE SERVICE	ANGULO, ELCY	12.00		174.96	Γ
175234 12/02/11 000008	VISITING NURSE SERVICE	ANGULO, ELCY	4.00		58.32	Γ
175235 12/02/11 000008	VISITING NURSE SERVICE	ANUT, ALICE	43.00		626.94	Γ
175236 12/02/11 000008	VISITING NURSE SERVICE	ANUT, ALICE	18.00		262.44	Ι
		CUSTOMER	81.00	0.00	1,180.98	
		CATEGORY	81.00	0.00	1,180.98	

		YSIDE CITYWIDE					PAGE 1	-	9
SALES JRNL # (	0258 LOC 001			NY			VCP CHOICE L		10/00/11
			SALES R	EGIST	⊈ R		BILL WEEK EN	DING	12/09/11
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175237 12/02	2/11 000008	VISITING NURSE SERVICE	AOUN,	ODETTE	8.00		116.64	I	
175238 12/02	2/11 000008	VISITING NURSE SERVICE	AOUN,	ODETTE	8.00		116.64	I	
				CUSTOMER	16.00	0.00	233.28		
				_					
				CATEGORY	16.00	0.00	233.28		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	10
	200 001		SALES REGISTER			BILL WEEK ENDING	3 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
175239 12/02/11 175240 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.25 8.00		178.61 I 116.64 I	
			CUSTOMER	20.25	0.00	295.25	
			CATEGORY	20.25	0.00	295.25	

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 11
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175241 12/02/11	000008	VISITING NURSE SERVICE	ARIAS, MAGDALEN	29.75		433.76 I
175242 12/02/11	800000	VISITING NURSE SERVICE	ARIAS, MAGDALEN	16.00		233.28 I
175243 12/02/11	800000	VISITING NURSE SERVICE	ASGHAR, MUHAMMA	2.00		29.16 I
175244 12/02/11	800000	VISITING NURSE SERVICE	ASGHAR, MUHAMMA	2.00		29.16 I
			CUSTOMER	49.75	0.00	725.36
			CATEGORY	49.75	0.00	725.36

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 12 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175245 12/02/11 175246 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	21.00 7.00		306.18 I 102.06 I
			CUSTOMER	28.00	0.00	408.24
			CATEGORY	28.00	0.00	408.24

	12/07/11 NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
			S	BALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
175247	12/02/11	000008	VISITING NURSE SERVICE	AVILA, ENIDIA	12.00		174.96	Ī
175248	12/02/11	800000	VISITING NURSE SERVICE	AVILA, ENIDIA	4.00		58.32	1
				CUSTOMER	16.00	0.00	233.28	
				CATEGORY	16.00	0.00	233.28	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - 14 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175249 12/02/11	000008 VISITING NURSE SERVICE	AZAD, ABUL	4.00		58.32 I	
		CATEGORY	4.00	0.00	58.32	

RUN DATE 12/07/11 SALES JRNL # 0258		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 ADU ADULT	-	15
STEED STATE II SES	200 001		SALES REGISTER			BILL WEEK END	OING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175250 12/02/11	000008	VISITING NURSE SERVICE	AZZARA, MICHELE	6.00		87.48	I	
175251 12/02/11		VISITING NURSE SERVICE	-,	6.50		94.77	I	
175252 12/02/11	000008	VISITING NURSE SERVICE	BADILLO, JOVITA	4.00		58.32	I	
			CUSTOMER	16.50	0.00	240.57		
			CATEGORY	16.50	0.00	240.57		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 - VCP CHOICE LHCS	16 A
		\$	SALES R	EGISTE	R		BILL WEEK ENDING	3 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
175253 12/02/11 175254 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	JUAN JUAN	18.50 14.00		269.73 I 204.12 I	
173231 12,02,11	000000	VIBILING NORDE BERVICE	211127	CUSTOMER	32.50	0.00	473.85	
				COSTOMER	32.30	0.00	173.03	
				CATEGORY	32.50	0.00	473.85	

RUN DATE 12/07/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 17
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT
		S	ALES REGISTER			BILL WEEK EN	DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175055 10/00/11	00000	THE THE MED CONTROL		20.00		201 60	-
175255 12/02/11	000008	VISITING NURSE SERVICE	BALLAS, VIOLA	20.00			I
175256 12/02/11	800000	VISITING NURSE SERVICE	BALLAS, VIOLA	10.00		145.80	I
175257 12/02/11	800000	VISITING NURSE SERVICE	BAQUERIZO, ANNA	39.50		575.91	I
175258 12/02/11	000008	VISITING NURSE SERVICE	BAQUERIZO, ANNA	15.50		225.99	I
175259 12/02/11	000008	VISITING NURSE SERVICE	BARDEANU, VICTO	29.00		422.82	I
175260 12/02/11	000008	VISITING NURSE SERVICE	BARDEANU, VICTO	14.00		204.12	I
175261 11/04/11	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		102.06	I
175262 11/18/11	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	7.00		102.06	I
175263 12/02/11	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	35.00		510.30	I
175264 12/02/11	000008	VISITING NURSE SERVICE	BATTLE, JEANETT	14.00		204.12	I
175265 12/02/11	000008	VISITING NURSE SERVICE	BECERRA, FELIPE	7.00		102.06	I
			·				
			CUSTOMER	198.00	0.00	2,886.84	
			CATEGORY	198.00	0.00	2,886.84	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 18 VCP CHOICE LHCSA BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175266 12/02/11 175267 12/02/11 175268 12/02/11 175269 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	BEGUM, IQBAL BEGUM, IQBAL BELLOROFONTE, M BELLOROFONTE, M	2.00 2.00 107.00 32.00		29.16 I 29.16 I 1,560.06 I 466.56 I	
			CUSTOMER	143.00	0.00	2,084.94	
			CATEGORY	143.00	0.00	2,084.94	

RUN DATE 1	2/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE	L –	19
SALES JRNL	# 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT		
			S	SALES REGISTER			BILL WEEK E	NDING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175270 1	2/02/11	800000	VISITING NURSE SERVICE	BERENBLIT, SARA	9.00		131.22	I	
				CATEGORY	9.00	0.00	131.22		

RUN DATE 12/0	7/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	20
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	EW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDIN	G 12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175271 12/0	2/11 000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	15.00		218.70 I	
175272 12/0	2/11 000008	VISITING NURSE SERVICE	BETHUNE, HARRYD	10.00		145.80 I	
175273 12/0	2/11 000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	18.00		262.44 I	
175274 12/0	2/11 000008	VISITING NURSE SERVICE	BHAWNANI, BISHU	12.00		174.96 I	
			CUSTOMER	55.00	0.00	801.90	
			CATEGORY	55.00	0.00	801.90	

RUN DATE 12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	21
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYI	P SURPLUS
175275 12/02/11	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	18.00		262.44 I	
175276 12/02/11	800000	VISITING NURSE SERVICE	BHULLA, JIWAN	12.00		174.96 I	
175277 12/02/11	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	12.00		174.96 I	
175278 12/02/11	800000	VISITING NURSE SERVICE	BIANCO HOPKINS,	4.00		58.32 I	
			CUSTOMER	46.00	0.00	670.68	
			CATEGORY	46.00	0.00	670.68	

RUN DATE 12/07/11 - SALES JRNL # 0258		IDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER	R NAME	REFERENCE	HOURS	TAX AMT	AMOUNT :	TYP SURPLUS
175279 12/02/11 175280 12/02/11		G NURSE SERVICE G NURSE SERVICE	BLANCAFLOR, PUR BLANCAFLOR, PUR	24.00 16.00		349.92 233.28	I I
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	23
DALLD OIG	νΔ <sub>π</sub> 0250	100 001		SALES REGISTER			BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	TYP SURPLUS
	12/02/11 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	BLUNNIE, ELIZAB BLUNNIE, ELIZAB	12.00 8.00		174.96 116.64	I I
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	 291.60	

	07/11 - SUP SUNN					PAGE 1 -	- 24
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	TATO 10/00/11
		5	ALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
175283 12/0	02/11 000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	10.00		145.80	I
175284 12/0	02/11 000008	VISITING NURSE SERVICE	BOCANEGRA, GLAD	6.00		87.48	I
175285 11/2	25/11 000008	VISITING NURSE SERVICE	BONILLA, ESPERA	21.00		306.18	I
	02/11 000008	VISITING NURSE SERVICE	BONILLA, ESPERA	28.00		408.24	I
175287 12/0	02/11 000008	VISITING NURSE SERVICE	BONILLA, ESPERA	13.75		200.48	I
				70 75	0.00	1 140 10	
			CUSTOMER	78.75	0.00	1,148.18	
			CATEGORY	78.75	0.00	1,148.18	

			YSIDE CITYWIDE	DEC NY NY					25
SALES UR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE S	REGNY NY BALES REGISTER			VCP CHOICE LI BILL WEEK ENI		12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175288 175289	11/04/11 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BONILLA, LYDIA BONILLA, LYDIA	2.25		32.81 43.74	I	
				CUSTOMER	5.25	0.00	76.55		
				CATEGORY	5.25	0.00	76.55		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 1	TYP SURPLUS
175290 12/02/11 175291 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		15.00 10.00		218.70 145.80	I I
			CUSTOMER	25.00	0.00	364.50	
			CATEGORY	25.00	0.00	 364.50	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 AUR ADULT REH	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
175292 12/02/11 175293 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	BOPP, ANNA BOPP, ANNA	6.00 3.00		87.48 43.74	I
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/11 -						PAGE 1 -	28
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			VCP CHOICE LHCS. BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175294 12/02/11 175295 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		8.00 2.50		116.64 I 36.45 I	
			CUSTOMER	10.50	0.00	153.09	
			CATEGORY	10.50	0.00	153.09	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 29 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175296 12/02/11 175297 12/02/11	800000 800000	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

			IYSIDE CITYWIDE						30
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LE		12/09/11
			'				DIDD WEEK EN	DING	12/05/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
155000	10/00/11				45.00		656.10	_	
175298	12/02/11	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	45.00		656.10	I	
175299	12/02/11	000008	VISITING NURSE SERVICE	BOYLAN, FRANK	18.00		262.44	I	
175300	12/02/11	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	6.00		87.48	I	
175301	12/02/11	000008	VISITING NURSE SERVICE	BURGOS, RAFAELA	3.00		43.74	I	
175302	12/02/11	000008	VISITING NURSE SERVICE	BURNS, MARGARET	40.00		583.20	I	
175303	12/02/11	000008	VISITING NURSE SERVICE	BURNS, MARGARET	16.00		233.28	I	
				CUSTOMER	128.00	0.00	1,866.24		
				CAERCODY.	100.00	0.00	1 066 04		
				CATEGORY	128.00	0.00	1,866.24		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 31 LAD NURSING HOME W/O BILL WEEK ENDING 12/	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	JRPLUS
175304 12/02/11 175305 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	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 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	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 TY	SURPLUS
175306 12/02/11 175307 12/02/11 175308 12/02/11 175309 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	CABA, PURA CABA, PURA CALABRO, JOSEPH CALABRO, JOSEPH	5.50 4.00 24.00 16.00		80.19 I 58.32 I 349.92 I 233.28 I	
			CUSTOMER	49.50	0.00	721.71	
			CATEGORY	49.50	0.00	721.71	

RUN DATE 12/07/11 SALES JRNL # 0258		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	33
DALLO ORNE # 0230	100 001		SALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175310 12/02/11 175311 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	CALDERON, ELISA CALDERON, ELISA	11.50 8.00		167.67 116.64	I I
			CUSTOMER	19.50	0.00	284.31	
			CATEGORY	19.50	0.00	284.31	

RUN DATE 12/07/11						-	34
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
		5	ALES REGISTER			BILL WEEK ENDING	G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
175312 12/02/11	000008	VISITING NURSE SERVICE	CALDERON, FRANC	35.75		521.24 I	
175313 12/02/11	800000	VISITING NURSE SERVICE	CALDERON, FRANC	8.00		116.64 I	
175314 11/04/11	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	6.00		87.48 I	
175315 12/02/11	000008	VISITING NURSE SERVICE	CALDERON, VIRGI	24.00		349.92 I	
175316 12/02/11	800000	VISITING NURSE SERVICE	CALDERON, VIRGI	12.00		174.96 I	
			CUSTOMER	85.75	0.00	1,250.24	
			CATEGORY	85.75	0.00	1,250.24	

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 3 HOA HOSPICE ADULT BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175317 12/02/11 175318 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CALKOSZ, JOSEFI CALKOSZ, JOSEFI	45.00 18.00		656.10 I 262.44 I	
			CUSTOMER	63.00	0.00	918.54	
			CATEGORY	63.00	0.00	918.54	

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 36
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175319 12/02/11	000008	VISITING NURSE SERVICE	CAMBARA, JOSEFA	40.00		583.20 I
175320 12/02/11	800000	VISITING NURSE SERVICE	CAMBARA, JOSEFA	16.00		233.28 I
			CUSTOMER	56.00	0.00	816.48
			CATEGORY	56.00	0.00	816.48

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY				PAGE 1 ADU ADULT	-	37
SALES URNL # U250	TOC 001			GISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERE	NCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175321 12/02/11 175322 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,		15.00 10.00		218.70 145.80	I	
			C	USTOMER	25.00	0.00	364.50		
			C	ATEGORY	25.00	0.00	364.50		

	SUP SUNNYSIDE CITYW	IDE				PAGE 1	- 3	8
SALES JRNL # 0258	LOC 001 SUNNYSIDE					VCP CHOICE L		
		SALES	REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO CUSTOMER N	AME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175323 12/02/11	000008 VISITING N	URSE SERVICE C	CAPORASO, VINCE	60.00		874.80	I	
175324 12/02/11	000008 VISITING N	URSE SERVICE C	CAPORASO, VINCE	24.00		349.92	I	
			CUSTOMER	84.00	0.00	1,224.72		
			CATEGORY	84.00	0.00	1,224.72		

RUN DATE 12/07/11 - SALES JRNL # 0258		UNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 39 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CU	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175325 12/02/11 175326 12/02/11		SITING NURSE SERVICE SITING 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

			YSIDE CITYWIDE						40
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			S Z	ALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175327	12/02/11	000008	VISITING NURSE SERVICE	CARDONA, MARIA	50.00		729.00	I	
175328	12/02/11	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	40.00		583.20	I	
175329	12/02/11	800000	VISITING NURSE SERVICE	CARDOSO, ORLAND	16.00		233.28	I	
175330	11/18/11	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
175331	12/02/11	800000	VISITING NURSE SERVICE	CARELA-REYES, M	5.00		72.90	I	
175332	12/02/11	800000	VISITING NURSE SERVICE	CARELA-REYES, M	10.00		145.80	I	
175333	12/02/11	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	18.00		262.44	I	
175334	12/02/11	800000	VISITING NURSE SERVICE	CARRALERO, ROSA	12.00		174.96	I	
				CUSTOMER	156.00	0.00	2,274.48		
				CATEGORY	156.00	0.00	2,274.48		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	41
SALES URNL # 0250	LOC 001		SALES REGISTER			BILL WEEK ENDING	G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	SURPLUS
175335 12/02/11 175336 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		49.75 20.00		725.36 I 291.60 I	
173330 12,02,11	000000	VIBITING NORDE BERVICE	CUSTOMER	69.75	0.00	1,016.96	
			COSTOMER	05.75		1,010.90	
			CATEGORY	69.75	0.00	1,016.96	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 42 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175337 12/02/11 175338 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		39.50 16.00		575.91 I 233.28 I
			CUSTOMER	55.50	0.00	809.19
			CATEGORY	55.50	0.00	809.19

RUN DATE 12/07/11						-	43
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/09/11
			SALES REGISIER			RILL MEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175220 10/00/11	000000	WIGHTING MUDGE CERVICE	CACHANO MARTA	4 00		F0 30 F	
175339 12/02/11 175340 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CASTANO, MARIA CASTANO, MARIA	4.00		58.32 I 29.16 I	
1,3310 12, 32, 11	00000	VIBITING NONDE DERVIGE					
			CUSTOMER	6.00	0.00	87.48	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 12/07/11 -						PAGE 1 - 44	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	_ , _ , _ ,
		\$	SALES REGISTER			BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175341 12/02/11	000008	VISITING NURSE SERVICE	CEBALLOS, CLEME	12.00		174.96 I	
175342 12/02/11	800000	VISITING NURSE SERVICE	CEBALLOS, CLEME	8.00		116.64 I	
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - ADU ADULT	45
SALES UNIL # U230	LOC UUI		SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175343 12/02/11	800000	VISITING NURSE SERVICE	CELIO, MARION	6.00		87.48 I	
			CATEGORY	6.00	0.00	87.48	

			YSIDE CITYWIDE				PAGE 1 -	46
SALES JRI	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
				SALES REGISTER			BILL WEEK ENDING	G 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
175344	12/02/11	000008	VISITING NURSE SERVICE	CERNILLI, MARIA	6.00		87.48 I	
175345	12/02/11	800000	VISITING NURSE SERVICE	CERNILLI, MARIA	6.00		87.48 I	
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE CAN BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175346 12/02/11 175347 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	3.00 6.00		43.74 I 87.48 I	
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/1 SALES JRNL # 025	l - SUP SUNNYSIDE CITYWI 3 LOC 001 SUNNYSIDE					LTC NURSING F	- 48 HOMEW/O WALLS (LT DING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NA	ME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175348 12/02/1 175349 12/02/1			CHAPPLE, VICKIE CHAPPLE, VICKIE	11.50 7.00		167.68 102.06	I I
			CUSTOMER	18.50	0.00	269.74	
			 CATEGORY	18.50	0.00	269.74	

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 49	1
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		\$	SALES REGISTER			BILL WEEK ENDING 1	.2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175350 12/02/11	000008	VISITING NURSE SERVICE	CHARLES PIERRE,	18.00		262.44 I	
175351 12/02/11	800000	VISITING NURSE SERVICE	CHARLES PIERRE,	12.00		174.96 I	
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/0	7/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 50
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LAD NURSING H	OME W/O WALLS LT
		5	SALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175352 11/2	5/11 000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		145.80	I
175353 12/0	2/11 000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		145.80	I
175354 12/0	2/11 000008	VISITING NURSE SERVICE	CHARLES, JOSE	10.00		145.80	I
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

			YSIDE CITYWIDE				11102		51
SALES JRN	L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI		10/00/11
			:	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175355	12/02/11	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	40.00		583.20	I	
175356	12/02/11	800000	VISITING NURSE SERVICE	CHAUCA, PEDRO	16.00		233.28	I	
				CUSTOMER	56.00	0.00	816.48		
				CATEGORY	56.00	0.00	816.48		

RUN DATE 12/07/11 -			DEC NY NY			PAGE 1 -	52
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175357 12/02/11	000008	VISITING NURSE SERVICE	CHEN, ELLIE	6.00		87.48	I
175358 12/02/11	000008	VISITING NURSE SERVICE	CHEN, ELLIE	3.00		43.74	I
175359 12/02/11	800000	VISITING NURSE SERVICE	CHINGA, CELESTE	9.25		134.87	I
			CUSTOMER	18.25	0.00	266.09	
			CATEGORY	18.25	0.00	266.09	

RUN DATE SALES JRN		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		53
DALLO ORIV	ш н 0230	100 001		SALES REGISTER			BILL WEEK ENI		12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	12/02/11 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	CHIPA, PANAGIOT CHIPA, PANAGIOT	9.00 6.00		131.22 87.48	I	
				CUSTOMER	15.00	0.00	218.70		
				CATEGORY	15.00	0.00	218.70		

RUN DATE 12/07/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	_	54
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY	NY			LTC NURSING	HOMEW	/O WALLS (LT
		:	SALES R	EGISTE	R		BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REF	ERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175362 11/25/11	800000	VISITING NURSE SERVICE	CHO,	MOGEE	6.00		87.48	I	
175363 12/02/11	000008	VISITING NURSE SERVICE	CHO,	MOGEE	12.00		174.96	I	
175364 12/02/11	000008	VISITING NURSE SERVICE	CHO,	MOGEE	12.00		174.96	I	
				-					
				CUSTOMER	30.00	0.00	437.40		
				_					
				CATEGORY	30.00	0.00	437.40		

			YSIDE CITYWIDE	DEC MY MY			11102		55
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			VCP CHOICE LE		12/09/11
			5				DIED WEEK EN	71110	12/05/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175365	12/02/11	000008	VISITING NURSE SERVICE	CHOUDHURY, SHAM	34.75		506.66	т	
175366	12/02/11	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	CHOUDHURY, SHAM	14.00		204.12		
175367	12/02/11	000008		•			349.92		
	, - ,		VISITING NURSE SERVICE	CHU, MOLLY	24.00			Τ.	
175368	12/02/11	800000	VISITING NURSE SERVICE	CHU, MOLLY	16.00		233.28	I	
175369	12/02/11	800000	VISITING NURSE SERVICE	CHUCK, ENA	21.75		317.12	I	
175370	12/02/11	800000	VISITING NURSE SERVICE	CHUCK, ENA	6.25		91.13	I	
				 CUSTOMER	116.75	0.00	1,702.23		
				COSTOMER	110./5	0.00	1,702.23		
				CATEGORY	116.75	0.00	1,702.23		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 56 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT TYP SURPLUS
175371 12/02/11 175372 12/02/11	000008 VISITING NURSE SERVIOUS VISITING NURSE SERVIOUS	•	39.75 16.00	579.56 I 233.28 I
		CUSTOMER	55.75 0	.00 812.84
		CATEGORY	55.75 0	.00 812.84

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	57
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175373 12/02/11	000008	VISITING NURSE SERVICE	COLBERG, ALUIS	2.00		29.16 I	
175374 11/25/11	000008	VISITING NURSE SERVICE	COLEMAN, JAMES	2.00		29.16 I	
175375 12/02/11	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	4.00		58.32 I	
175376 12/02/11	800000	VISITING NURSE SERVICE	COLEMAN, JAMES	2.00		29.16 I	
			CUSTOMER	10.00	0.00	145.80	
			CATEGORY	10.00	0.00	145.80	

			YSIDE CITYWIDE					11101		58
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				LTC NURSING	HOMEW	/O WALLS (LT
				SALES REG	ISTER			BILL WEEK EN	DING	12/09/11
								D122 ((221)	J	12/07/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENC	CE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
111101011	2	0001 1.0	000101111111111111111111111111111111111	TET EIGH	02	1100110		11100111		50111 205
175377	12/02/11	000008	VISITING NURSE SERVIC	E COLLER, I	FELISA	12.00		174.96	I	
175378	12/02/11	800000	VISITING NURSE SERVIC	E COLLER, I	FELISA	8.00		116.64	I	
175379	12/02/11	800000	VISITING NURSE SERVIC	COLLER, C	JOSE	9.00		131.22	I	
175380	12/02/11	800000	VISITING NURSE SERVIC	COLLER, C	JOSE	6.00		87.48	I	
175381	12/02/11	800000	VISITING NURSE SERVIC	COLON, A	NTONIA	30.00		437.40	I	
175382	12/02/11	800000	VISITING NURSE SERVIC	E COLON, AI	NTONIA	12.00		174.96	I	
175383	12/02/11	800000	VISITING NURSE SERVIC	COLON, IS	SABEL	12.00		174.96	I	
175384	12/02/11	800000	VISITING NURSE SERVIC	E COLON, IS	SABEL	12.00		174.96	I	
				CIIS	STOMER 1	 L01.00	0.00	1,472.58		
				00.	3101111		0.00	1,172.30		
				CA	TEGORY 1	 L01.00	0.00	1,472.58		
				CA.	IEGOKI I	101.00	0.00	1,4/2.58		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGA		59 RE PROGRAM
			SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175385 12/02/11 175386 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		120.00 48.00		1,749.60 699.84	I	
			CUSTOMER	168.00	0.00	2,449.44		
			CATEGORY	168.00	0.00	2,449.44		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWI	DE REGNY NY SALES REGISTEI	₹	PAGE 1 - 60 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175387 12/02/11 175388 12/02/11	000008 VISITING NURSE SE 000008 VISITING NURSE SE	· · · · · · · · · · · · · · · · · · ·	12.00 12.00	174.96 I 174.96 I
		CUSTOMER	24.00 0.00	349.92
		CATEGORY	24.00 0.00	349.92

RUN DATE	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	61
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175389	12/02/11	000008	VISITING NURSE SERVICE	COSTA, ANTOINET	12.00		174.96 I	
175390	12/02/11	800000	VISITING NURSE SERVICE	COSTA, ANTOINET	8.00		116.64 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 62 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175391 12/02/11 175392 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	18.00 12.00		262.44 I 174.96 I	
		CUSTOMER	30.00	0.00	437.40	
		CATEGORY	30.00	0.00	437.40	

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 63 ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/0	9/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
175393 10/07/11	000008	VISITING NURSE SERVICE	COTTON, MARCUS	4.00		58.32 I	
175394 12/02/11	800000	VISITING NURSE SERVICE	COTTON, MARCUS	7.75		113.00 I	
175395 12/02/11	800000	VISITING NURSE SERVICE	COTTON, MARCUS	3.75		54.68 I	
			CUSTOMER	15.50	0.00	226.00	
			CATEGORY	15.50	0.00	226.00	

RUN DATE 12/07/11 SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 64 CGD
BALLO OIGIL # 0250	100 001		SALES REGISTER			BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175396 12/02/11	000008	VISITING NURSE SERVICE	COVALIU, SAVETA	9.00		101.00	I
175397 12/02/11 175398 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	COVALIU, SIMION COVALIU, SIMION	12.00 8.50		174.96 123.93	I I
						420 11	
			CUSTOMER	29.50	0.00	430.11	
			CATEGORY	29.50	0.00	430.11	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 HOA HOSPICE A BILL WEEK ENI	-	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP :	SURPLUS
175399 12/02/11 175400 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	COX, PETRA COX, PETRA	16.00 3.00		233.28 43.74	I I	
			CUSTOMER	19.00	0.00	277.02		
			CATEGORY	19.00	0.00	277.02		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 66 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AN	T AMOUNT TYP SURPLUS
175401 12/02/11 175402 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	28.75 10.00	419.18 I 145.80 I
		CUSTOMER	38.75 0.0	564.98
		CATEGORY	38.75 0.0	 10 564.98

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 6	7
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175403 12/02/11	800000	VISITING NURSE SERVICE	CRUZ, JUANA	12.00		174.96 I	
175404 12/02/11	000008	VISITING NURSE SERVICE	CRUZ, JUANA	7.75		113.00 I	
175405 12/02/11	800000	VISITING NURSE SERVICE	CURLEY, INGEBOR	15.00		218.70 I	
175406 12/02/11	800000	VISITING NURSE SERVICE	CURLEY, INGEBOR	11.00		160.38 I	
			CUSTOMER	45.75	0.00	667.04	
			CATEGORY	45.75	0.00	667.04	

RUN DATE SALES JRN		- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOMEW BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
	12/02/11 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	15.00 10.00		218.70 I 145.80 I	
				CUSTOMER	25.00	0.00	364.50	
				CATEGORY	25.00	0.00	 364.50	

			YSIDE CITYWIDE				PAGE 1 -	69
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDIN	a 10/00/11
			5	SALES REGISIER			BILL MEEK ENDIN	G 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175409	12/02/11	000008	VISITING NURSE SERVICE	DAMICO, THERESA	1.00		14.58 I	
175410	12/02/11	000008	VISITING NURSE SERVICE	DAMICO, THERESA	1.00		14.58 I	
				CUSTOMER	2.00	0.00	29.16	
				COSTONER	2.00	0.00	29.10	
				CATEGORY	2.00	0.00	29.16	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 70 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175411 12/02/11 175412 12/02/11	000008 VISITING NURSE SERVI 000008 VISITING NURSE SERVI	·	39.50 16.00	575.91 I 233.28 I
		CUSTOMER	55.50 0.00	809.19
		CATEGORY	55.50 0.00	809.19

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	71 NG 12/09/11
INVOICE# DATE	CUST NO C	USTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	P SURPLUS
175413 12/02/11	000008 V	ISITING NURSE SERVICE	DAVILA, TOMASA	6.00		87.48	[
			CATEGORY	6.00	0.00	87.48	

RUN DATE 12/07/11 - SALES JRNL # 0258			EG NY NY			PAGE 1 - VCP CHOICE LHCS	72
SALES URNL # U230	LOC UUI SUNNISII	S A L	_			BILL WEEK ENDI	
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	TY TYUOMA	P SURPLUS
175414 12/02/11 175415 12/02/11		NURSE SERVICE NURSE SERVICE	DAVIS, LOUELLEN DAVIS, LOUELLEN	12.00 12.00		174.96 174.96	[ [
			CUSTOMER	24.00	0.00	349.92	
			CATEGORY	24.00	0.00	349.92	

RUN DATE 12/07/11 - SALES JRNL # 0258		DE CITYWIDE	REG NY NY LES REGISTER			PAGE 1 - LAD NURSING HON BILL WEEK ENDIN	73 ME W/O WALLS LT NG 12/09/11
INVOICE# DATE	CUST NO CUSTOMER	NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175416 12/02/11 175417 12/02/11		NURSE SERVICE NURSE SERVICE	DEL CARPIO, FEL DEL CARPIO, FEL	24.00 16.00		349.92 233.28	[ [
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	74
SALES JF	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	
				SALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175418	12/02/11	000008	VISITING NURSE SERVICE	DELACRUZ, MANUE	24.00		349.92	Ε
175419	12/02/11	800000	VISITING NURSE SERVICE	DELACRUZ, MANUE	8.00		116.64	[
				CUSTOMER	32.00	0.00	466.56	
				CATEGORY	32.00	0.00	466.56	

RUN DATE 12/07/11 -						PAGE 1 -	75
SALES JRNL # 0258	LOC 001		REG NY NY			LTC NURSING HOM	
		2	SALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175420 12/02/11	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	26.00		379.08	г
175421 12/02/11	000008	VISITING NURSE SERVICE	DELACRUZ, SEFER	12.00		174.96	[
175422 12/02/11	800000	VISITING NURSE SERVICE	DELAROSA, CORAL	20.00		291.60	Ε
175423 12/02/11	800000	VISITING NURSE SERVICE	DELAROSA, CORAL	10.00		145.80	[
			CUSTOMER	68.00	0.00	991.44	
			CATEGORY	68.00	0.00	991.44	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	76
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175424 12/02/11	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	12.00		174.96 I	
175425 12/02/11	000008	VISITING NURSE SERVICE	DELOSSANTOS, MA	13.50		196.83 I	
175426 12/02/11	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	12.00		174.96 I	
175427 12/02/11	800000	VISITING NURSE SERVICE	DELPOZO, MIGUEL	8.00		116.64 I	
			CUSTOMER	45.50	0.00	663.39	
			CATEGORY	45.50	0.00	663.39	

RUN DATE 12/07/11 SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 77 ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 1:	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175428 11/18/11	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	4.00		58.32 I	
175429 12/02/11	000008	VISITING NURSE SERVICE		20.00		291.60 I	
175430 12/02/11	800000	VISITING NURSE SERVICE	DELUCA, ANTIONE	7.00		102.06 I	
			CUSTOMER	31.00	0.00	451.98	
			CATEGORY	31.00	0.00	451.98	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 78 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175431 12/02/11 175432 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	19.00 12.00		277.02 I 174.96 I
			CUSTOMER	31.00	0.00	451.98
			CATEGORY	31.00	0.00	451.98

RUN DATE 12/07/11 - SALES JRNL # 0258			REG NY NY			PAGE 1 - ADU ADULT	79
BILLED CILLE II 0250	200 001		SALES REGISTER			BILL WEEK ENDIN	IG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175433 12/02/11	800000	VISITING NURSE SERVICE	DESPOTAKIS, ALE	2.50		36.45	:
			CATEGORY	2.50	0.00	36.45	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 80	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/09/1	1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
175434 12/02/11	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	25.75		375.44 I	
175435 12/02/11	800000	VISITING NURSE SERVICE	DEZUMARAN, REBE	18.00		262.44 I	
			CUSTOMER	43.75	0.00	637.88	_
							_
			CATEGORY	43.75	0.00	637.88	

RUN DATE 12/0° SALES JRNL #	7/11 - SUP SUNN 0258 LOC 001	SUNNYSIDE CITYWIDE		NY E G I S T E :	R		PAGE 1 LTC NURSING BILL WEEK EN	HOMEW/	•
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175436 12/03 175437 12/03		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	HILDA HILDA	15.00 12.00		218.70 174.96	I I	
				CUSTOMER	27.00	0.00	393.66		
				CATEGORY	27.00	0.00	393.66		

	12/07/11 NL # 0258	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE		82
SALES UK	ML # 0236	HOC 001		LES REGISTER			BILL WEEK ENI		12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175438	12/02/11	000008	VISITING NURSE SERVICE	DIAZ, MARIA	21.00		306.18	I	
175439	12/02/11	800000	VISITING NURSE SERVICE	DIAZ, MARIA	13.75		200.48	I	
175440	12/02/11	800000	VISITING NURSE SERVICE	DIAZ, OLGA	30.00		437.40	I	
175441	12/02/11	800000	VISITING NURSE SERVICE	DIAZ, OLGA	13.00		189.54	I	
175442	12/02/11	800000	VISITING NURSE SERVICE	DIAZ, ROSA	24.00		349.92	I	
175443	12/02/11	800000	VISITING NURSE SERVICE	DIAZ, ROSA	12.00		174.96	I	
175444	12/02/11	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	41.00		758.16	I	
175445	12/02/11	800000	VISITING NURSE SERVICE	DILLUVIO, MATTI	20.00		291.60	I	
				CUSTOMER	174.75	0.00	2,708.24		
				CATEGORY	 174.75	0.00	2,708.24		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 83 ADU ADULT	
	200 001		SALES REGISTER				09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP ST	JRPLUS
175446 12/02/11 175447 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	DOMINGUEZ, ANA DOMINGUEZ, ANA	3.75 4.00		54.68 I 58.32 I	
			CUSTOMER	7.75	0.00	113.00	
			CATEGORY	7.75	0.00	113.00	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 84	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175448 12/02/11	000008	VISITING NURSE SERVICE	DOMINGUEZ, MARI	30.00		437.40 I	
175449 12/02/11	800000	VISITING NURSE SERVICE	DOMINGUEZ, MARI	12.00		174.96 I	
			CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	85
SALES JRNL # 0258	LOC 001		REG NY NY			LTC NURSING HOME	
			SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175450 11/25/11	000008	VISITING NURSE SERVICE	DOMINICK, GINA	8.00		116.64 I	
175451 12/02/11	800000	VISITING NURSE SERVICE	DOMINICK, GINA	24.00		349.92 I	
175452 12/02/11	800000	VISITING NURSE SERVICE	DOMINICK, GINA	16.00		233.28 I	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	

RUN DATE 12/07/11 -							86
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	10/00/11
		5	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175453 12/02/11	000008	VISITING NURSE SERVICE	DUGLUS, MAY RUT	24.00		349.92 I	
175454 12/02/11	800000	VISITING NURSE SERVICE	DUGLUS, MAY RUT	12.00		174.96 I	
			CUSTOMER	36.00	0.00	524.88	
			COBTOLLIC	30.00	0.00	321.00	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 12/07/11 - SALES JRNL # 0258		IDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - LTC NURSING HO BILL WEEK ENDI	87 MEW/O WALLS (LT NG 12/09/11
INVOICE# DATE	CUST NO CUSTOME	R NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175455 12/02/11 175456 12/02/11		G NURSE SERVICE	DUTAN, SELINDA DUTAN, SELINDA	26.00 14.00		379.08 204.12	I I
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

	12/07/11 NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 8 CCL CONGREGATE CAR BILL WEEK ENDING	RE PROGRAM
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175457	12/02/11	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	6.00		87.48 I	
175458	12/02/11	800000	VISITING NURSE SERVICE	DUVERGE, MARIA	6.00		87.48 I	
				CUSTOMER	12.00	0.00	174.96	
				CATEGORY	12.00	0.00	174.96	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	0,5
			SALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
175459 12/02/11	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	22.00		320.76	I
175460 12/02/11	000008	VISITING NURSE SERVICE	ECHEGARAY, MARI	14.00		204.12	I
175461 12/02/11	000008	VISITING NURSE SERVICE	EMILIAN, SIRPOO	4.00		58.32	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/07/11 - SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - CCL CONGREGATE	, ,
		:	SALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
175462 12/02/11 175463 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	12.00		174.96 116.64	I
1/3403 12/02/11	000000	VISITING NORSE SERVICE	EPSIEIN, GEORGE	0.00			
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 9 VCP CHOICE LHCSA BILL WEEK ENDING	1 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175464 12/02/11 175465 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	ESPINOSA, CLORI ESPINOSA, CLORI	7.75 4.00		113.00 I 58.32 I	
			CUSTOMER	11.75	0.00	171.32	
			CATEGORY	11.75	0.00	 171.32	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001		REG NY NY			PAGE 1 - 92 ADU ADULT	2
SALES UNIT # 0250	100 001		SALES REGISTER				2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175466 12/02/11 175467 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00		43.74 I 43.74 I	
			CUSTOMER	6.00	0.00	87.48	
			CATEGORY	6.00	0.00	87.48	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 93 VCP CHOICE LHCSA	
SALES URNL # U250	LOC 001		SALES REGISTER			BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175468 12/02/11 175469 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	10.00 10.00		145.80 I 145.80 I	
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

			YSIDE CITYWIDE	DEG 3777				-	94
SALES JRI	NL # 0258	LOC 001		REG NY NY LES REGISTER			ADU ADULT BILL WEEK EN	DINC	12/09/11
			5 A	TES KEGISIEK			DILL MEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175470	12/02/11	800000	VISITING NURSE SERVICE	FADEN, ROBIN	39.25			I	
175471	12/02/11	800000	VISITING NURSE SERVICE	FADEN, ROBIN	16.00		233.28	I	
175472	12/02/11	800000	VISITING NURSE SERVICE	FAMBIATOS, PARA	6.00		87.48	I	
175473	12/02/11	800000	VISITING NURSE SERVICE	FAMBIATOS, PARA	6.00		87.48	I	
175474	12/02/11	800000	VISITING NURSE SERVICE	FAY, JULIA	1.00		14.58	I	
175475	12/02/11	800000	VISITING NURSE SERVICE	FERMIN, OROUIDI	44.50		648.82	I	
175476	12/02/11	800000	VISITING NURSE SERVICE	FERMIN, OROUIDI	18.00		262.44	I	
175477	12/02/11	000008	VISITING NURSE SERVICE	FERNANDEZ, ENRI	14.00		204.12	I	
175478	12/02/11	000008	VISITING NURSE SERVICE	FERNANDEZ, ENRI	1.00		14.58	I	
				CUSTOMER	145.75	0.00	2,125.05		
				CATEGORY	145.75	0.00	2,125.05		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE C BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175479 12/02/11 175480 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	5.75 6.00		83.84 I 87.48 I	
			CUSTOMER	11.75	0.00	171.32	
			CATEGORY	11.75	0.00	171.32	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 96
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		i	SALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175481 11/25/11	800000	VISITING NURSE SERVICE	FERNANDEZ, MATI	8.00		116.64	I
175482 12/02/11	800000	VISITING NURSE SERVICE	FERNANDEZ, MATI	40.00		583.20	I
175483 12/02/11	800000	VISITING NURSE SERVICE	FERNANDEZ, MATI	16.00		233.28	I
			CUSTOMER	64.00	0.00	933.12	
			CATEGORY	64.00	0.00	933.12	

RUN DATE 12/07/11 -						11100	- 97	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LH BILL WEEK END		11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPL	US
175484 12/02/11 175485 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	FERREIRO, JOSEP	9.00 6.00		131.22 87.48	I	
1/5485 12/02/11	000008	VISITING NURSE SERVICE	FERREIRO, JOSEP	0.00		87.48		
			CUSTOMER	15.00	0.00	218.70		
			CATEGORY	15.00	0.00	218.70		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWID	E REGNY NY SALES REGIST:	E R		PAGE 1 - LTC NURSING HOMEN BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175486 12/02/11 175487 12/02/11	000008 VISITING NURSE SER 000008 VISITING NURSE SER		28.00 16.00		408.24 I 233.28 I	
		CUSTOMER	44.00	0.00	641.52	
		CATEGORY	44.00	0.00	641.52	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 99 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175488 12/02/11 175489 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	•	4.00		58.32 I 29.16 I
			CUSTOMER	6.00	0.00	87.48
			CATEGORY	6.00	0.00	87.48

RUN DATE 12/0	7/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 100
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA
		:	SALES REGISTER			BILL WEEK EN	DING 12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175490 12/0	2/11 000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	12.00		174.96	I
175491 12/0	2/11 000008	VISITING NURSE SERVICE	FOLLETTO, ROSIN	14.00		204.12	I
			CUSTOMER	26.00	0.00	379.08	
			CATEGORY	26.00	0.00	379.08	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 101 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175492 12/02/11 175493 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	14.00 14.00		204.12 I 204.12 I
			CUSTOMER	28.00	0.00	408.24
			CATEGORY	28.00	0.00	408.24

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 VCP CHOICE LHCSA BILL WEEK ENDING	02 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175494 12/02/11 175495 12/02/11 175496 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	FONTEBOA, GUILL FONTEBOA, GUILL FRAGALE, CONCET	25.00 10.00 1.00		364.50 I 145.80 I 14.58 I	
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	103
			SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175497 12/02/11 175498 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 3.00		87.48 I 43.74 I	
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY :	NY E G I S T E	E R		PAGE 1 LTC NURSING 1 BILL WEEK EN		•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP S	SURPLUS
175499 12/02/11 175500 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	EULALIA EULALIA	39.00 8.00		568.62 116.64	I I	
				CUSTOMER	47.00	0.00	685.26		
				CATEGORY	47.00	0.00	685.26		

	12/07/11 - NL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY ALES REGIS	TER		PAGE 1 VCP CHOICE LI BILL WEEK ENI		
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175501	11/25/11	800000	VISITING NURSE SERVICE	FREDERICK, A	MEL 5.00		72.90	I	
				CATEGO	RY 5.00	0.00	72.90		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEF	र		PAGE 1 - LTC NURSING HON BILL WEEK ENDIN	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175502 12/02/11 175503 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		30.00		437.40 116.64	[ [
		CUSTOMER	38.00	0.00	554.04	
		CATEGORY	38.00	0.00	554.04	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 107 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175504 12/02/11 175505 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	*	4.00		58.32 I 29.16 I
			CUSTOMER	6.00	0.00	87.48
			CATEGORY	6.00	0.00	87.48

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN	SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			LTC NURSING	- 108 HOMEW/O WALLS (LT DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175506 12/02/11	000008	VISITING NURSE SERVICE	FUNES, GEORGINA	25.00	IAX ANI	364.50	T SORFEOS
175507 12/02/11	000008	VISITING NURSE SERVICE	FUNES, GEORGINA	10.00		145.80	Ī
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 12/07/						PAGE 1 -	
SALES JRNL # 02	58 LOC 001		REG NY NY	_		VCP CHOICE LHCS	
		S	SALES REGISTE	R		BILL WEEK ENDIN	G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175508 11/25/	11 000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	6.00		87.48 I	
175509 12/02/	11 000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	30.00		437.40 I	
175510 12/02/	11 000008	VISITING NURSE SERVICE	GALLARDO, ZOILA	12.00		174.96 I	
175511 12/02/	11 000008	VISITING NURSE SERVICE	GALLINA, VIRGIN	6.00		87.48 I	
175512 12/02/	11 000008	VISITING NURSE SERVICE	GALLINA, VIRGIN	3.00		43.74 I	
			CUSTOMER	57.00	0.00	831.06	
			CATEGORY	57.00	0.00	831.06	

RUN DATE 12/07/1	1 - SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 110	
SALES JRNL # 025	8 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O W	ALLS (LT
			SALES REGISTER			BILL WEEK ENDING 12/	09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SU	RPLUS
175513 12/02/1	1 000008	VISITING NURSE SERVICE	GALLO, BENJAMIN	15.00		218.70 I	
175514 12/02/1	1 000008	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32 I	
175515 12/02/1	1 000008	VISITING NURSE SERVICE	GARAY, ANGELES	4.00		58.32 I	
			CUSTOMER	23.00	0.00	335.34	
			CATEGORY	23.00	0.00	335.34	

RUN DATE 12/07/11 -	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 111
SALES JRNL # 0258	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY		ADU ADULT
	:	SALES REGISTER		BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
175516 12/02/11	000008 VISITING NURSE SERVICE	GARCIA, ADRIANO	25.00	364.50 I
175517 12/02/11	000008 VISITING NURSE SERVICE	GARCIA, ADRIANO	9.75	142.16 I
		CUSTOMER	34.75 0.	00 506.66
		CATEGORY	34.75 0.	00 506.66

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 11 VCP CHOICE LHCSA BILL WEEK ENDING	.2 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175518 12/02/11 175519 12/02/11 175520 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GARCIA, JOSEFIN	1.00 39.75 16.00		14.58 I 579.56 I 233.28 I	
			CUSTOMER	56.75	0.00	827.42	
			CATEGORY	56.75	0.00	827.42	

			YSIDE CITYWIDE	222				- 13	
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			LTC NURSING DELL WEEK END	,	
									, ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175521	12/02/11	800000	VISITING NURSE SERVICE	GARCIA, OLGA	18.00		262.44	I	
175522	12/02/11	800000	VISITING NURSE SERVICE	GARCIA, OLGA	12.00		174.96	I	
175523	12/02/11	000008	VISITING NURSE SERVICE	GARY, MIKE	21.00		306.18	I	
175524	12/02/11	000008	VISITING NURSE SERVICE	GARY, MIKE	14.00		204.12	I	
175525	12/02/11	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	16.00		233.28	T	
175526	12/02/11	000008	VISITING NURSE SERVICE	GEBHARDT, DOROT	16.00		233.28	T	
173320	12/02/11	000000	VIBITING NORDE BERVICE	GEBINNEDI, BONGI					
				CUSTOMER	97.00	0.00	1,414.26		
				CATEGORY	97.00	0.00	1,414.26		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER		PAGE 1 - 114 VCP CHOICE LHCSA BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175527 12/02/11 175528 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	GEORGE, MERCEDE GEORGE, MERCEDE	27.75 14.00	404.60 I 204.12 I
		CUSTOMER	41.75 0.00	608.72
		CATEGORY	41.75 0.00	608.72

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER				- 115 HOMEW/O WALLS (LT DING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175529 12/02/11 175530 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		32.75 11.75		477.50 171.32	I I
		CUSTOMER	44.50	0.00	648.82	
		CATEGORY	44.50	0.00	648.82	

		PAGE 1 - 116	
		ADU ADULT	
R		BILL WEEK ENDING 12/09/11	
HOURS	TAX AMT	AMOUNT TYP SURPLUS	
3.00		43.74 I	
3.00	0.00	43.74	
	HOURS 3.00	HOURS TAX AMT	ADU ADULT BILL WEEK ENDING 12/09/11 HOURS TAX AMT AMOUNT TYP SURPLUS 3.00 43.74 I

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 117 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175532 12/02/11 175533 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	40.00		583.20 I 116.64 I
			CUSTOMER	48.00	0.00	699.84
			CATEGORY	48.00	0.00	699.84

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 118
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
			SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175534 12/02/11	000008	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	15.00		218.70 I
175535 12/02/11	800000	VISITING NURSE SERVICE	GOMEZ, JOSEFINA	10.00		145.80 I
			CUSTOMER	25.00	0.00	364.50
			CATEGORY	25.00	0.00	364.50

RUN DATE 12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	119
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOM	MEW/O WALLS (LT
		S	SALES REGISTER			BILL WEEK ENDIN	IG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	TP SURPLUS
175536 12/02/11	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	21.00		306.18 I	
175537 12/02/11	000008	VISITING NURSE SERVICE	GOMEZ, ROSANA	14.00		204.12 I	• •
175538 12/02/11	000008	VISITING NURSE SERVICE	GOMEZ, VICTORIA	23.00		335.34 I	• •
175539 12/02/11	800000	VISITING NURSE SERVICE	GOMEZ, VICTORIA	10.00		145.80 I	· ·
			CUSTOMER	68.00	0.00	991.44	
			CATEGORY	68.00	0.00	991.44	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 120	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		5	SALES REGISTER			BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175540 12/02/11	000008	VISITING NURSE SERVICE	GONZALEZ, DOLOR	29.75		433.76 I	
175541 12/02/11	800000	VISITING NURSE SERVICE	GONZALEZ, DOLOR	10.00		145.80 I	
			CUSTOMER	39.75	0.00	579.56	
			CODIONEIC	32.73	0.00	3.3.30	
			CATEGORY	39.75	0.00	579.56	

RUN DATE 12/07/11 SALES JRNL # 0258		NYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEN BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTO	OMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175542 12/02/11 175543 12/02/11		TING NURSE SERVICE TING NURSE SERVICE	,	18.00 11.00		262.44 I 160.38 I	
			CUSTOMER	29.00	0.00	422.82	
			CATEGORY	29.00	0.00	422.82	

			YSIDE CITYWIDE	DEG NV NV			PAGE 1 -	122
SALES JRN	L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			ADU ADULT BILL WEEK ENDI	NG 12/09/11
			5 1	ALES KEGISIEK			PILL MEEK ENDI	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175544	11/18/11	800000	VISITING NURSE SERVICE	GONZALEZ, JENNY	1.25		18.23	I
175545	12/02/11	800000	VISITING NURSE SERVICE	GONZALEZ, JENNY	9.00		131.22	I
175546	12/02/11	800000	VISITING NURSE SERVICE	GONZALEZ, JENNY	8.50		123.93	I
175547	12/02/11	800000	VISITING NURSE SERVICE	GONZALEZ, NITZA	4.00		58.32	I
175548	12/02/11	800000	VISITING NURSE SERVICE	GOULD, RUTH	1.25		18.23	I
				CUSTOMER	24.00	0.00	349.93	
				CATEGORY	24.00	0.00	349.93	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	- 123
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	CSA
		S	ALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
175549 12/02/11	000008	VISITING NURSE SERVICE	GOYES, ELBA	12.00		174.96	I
175550 12/02/11	000008	VISITING NURSE SERVICE	GOYES, ELBA	8.00		116.64	I
175551 12/02/11	000008	VISITING NURSE SERVICE	GRAVER, EDNA	24.00		349.92	I
175552 12/02/11	800000	VISITING NURSE SERVICE	GRAVER, EDNA	16.00		233.28	I
			CUSTOMER	60.00	0.00	874.80	
			CATEGORY	60.00	0.00	874.80	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 124 LAA LOMBARDI AIDS ADULT POPUL BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	AMOUNT TYP SURPLUS
175553 12/02/11 175554 12/02/11	000008 VISITING NURSE SERVIOUS VISITING NURSE SERVIOUS	·	34.75 14.00	506.66 I 204.12 I
		CUSTOMER	48.75 0.00	710.78
		CATEGORY	48.75 0.00	710.78

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	125 IG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175555 12/02/11 175556 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUERRERO, SUSAN GUERRERO, SUSAN	6.00 3.00		87.48 I 43.74 I	
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175557 12/02/11 175558 12/02/11 175559 12/02/11 175560 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	GUEVARA, ELENA GUEVARA, ELENA GUTIERREZ, ANGE GUTIERREZ, ANGE	59.00 23.75 24.00 16.00		860.22 I 346.28 I 349.92 I 233.28 I	
			CUSTOMER	122.75	0.00	1,789.70	
			CATEGORY	122.75	0.00	1,789.70	

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 127 ADU ADULT BILL WEEK ENDING 12/0	9/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUR	PLUS
175561 12/02/11 175562 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	GUTIERREZ, JOSE GUTIERREZ, JOSE	12.00 7.75		174.96 I 113.00 I	
			CUSTOMER	19.75	0.00	287.96	
			CATEGORY	19.75	0.00	 287.96	

	07/11 - SUP SUNN					PAGE 1 -	
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175563 12/0	02/11 000008	VISITING NURSE SERVICE	HENDY, BERNICE	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
175564 12/02/11 175565 12/02/11 175566 12/02/11 175567 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	HENRIQUEZ, MARI HERNANDEZ, MARI	40.00 16.00 23.25 15.75		583.20 233.28 338.99 229.64	I I I
			CUSTOMER	95.00	0.00	1,385.11	
			CATEGORY	95.00	0.00	1,385.11	

			YSIDE CITYWIDE				PAGE 1 -	
SALES JRN	IL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			AUR ADULT REHAE	
			S	SALES REGISTER			BILL WEEK ENDIN	IG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175568	12/02/11	800000	VISITING NURSE SERVICE	HERNANDEZ, MARI	1.00		14.58 I	
				CATEGORY	1.00	0.00	14.58	

			YSIDE CITYWIDE					- 131
SALES JRI	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER				OMEW/O WALLS (LT OING 12/09/11
				SALES REGISIER			BILL MEEK END	JING 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175569	12/02/11	800000	VISITING NURSE SERVICE	HERRERA, ANGELA	18.00		262.44	I
175570	12/02/11	000008	VISITING NURSE SERVICE	HERRERA, ANGELA	12.00		174.96	I
175571	12/02/11	800000	VISITING NURSE SERVICE	HERRERA, HORACI	30.00		437.40	I
175572	12/02/11	800000	VISITING NURSE SERVICE	HERRERA, HORACI	12.00		174.96	I
175573	12/02/11	800000	VISITING NURSE SERVICE	HUNGRIA, SABINA	26.00		379.08	I
175574	12/02/11	000008	VISITING NURSE SERVICE	HUNGRIA, SABINA	14.00		204.12	I
				CUSTOMER	112.00	0.00	1,632.96	
				CATEGORY	112.00	0.00	1,632.96	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1: CCL CONGREGATE CAN BILL WEEK ENDING	RE PROGRAM
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175575 12/02/11 175576 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	6.00		87.48 I 43.74 I	
			CUSTOMER	9.00	0.00	131.22	
			CATEGORY	9.00	0.00	131.22	

RUN DATE	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	133
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			i	SALES REGISTER			BILL WEEK ENDIN	G 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175577	12/02/11	000008	VISITING NURSE SERVICE	IBASCO, SOFIA	1.00		14.58 I	
175578	12/02/11	800000	VISITING NURSE SERVICE	IBASCO, SOFIA	8.00		116.64 I	
				CUSTOMER	9.00	0.00	131.22	
				COSTOMER	9.00	0.00	131.22	
				CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/11 - SALES JRNL # 0258		JNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 134 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUS	STOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175579 12/02/11 175580 12/02/11		SITING NURSE SERVICE SITING NURSE SERVICE		15.00 9.50		218.70 I 138.51 I
			CUSTOMER	24.50	0.00	357.21
			CATEGORY	24.50	0.00	357.21

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	35
SALES JRNL # 0258	LOC 001		REG NY NY			LAA LOMBARDI		
		\$	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175581 12/02/11	000008	VISITING NURSE SERVICE	INOSTROZA, RAPH	21.00		306.18	I	
175582 12/02/11	800000	VISITING NURSE SERVICE	INOSTROZA, RAPH	16.00		233.28	I	
						520.46		
			CUSTOMER	37.00	0.00	539.46		
			CATEGORY	37.00	0.00	539.46		

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 136
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		5	SALES REGISTER			BILL WEEK ENI	DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175583 12/02/11	000008	VISITING NURSE SERVICE	INSERRA, CATHER	28.00		408.24	I
175584 12/02/11	800000	VISITING NURSE SERVICE	INSERRA, CATHER	14.00		204.12	I
			CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	
			CITEOUTT	00	0.00	312.50	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 137 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175585 12/02/11 175586 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		3.00		43.74 I 43.74 I
			CUSTOMER	6.00	0.00	87.48
			CATEGORY	6.00	0.00	87.48

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175587 12/02/11 175588 12/02/11 175589 12/02/11 175590 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	JAGDE, MARIA JAKLITSCH, ELIZ	25.00 10.00 30.00 14.00		364.50 I 145.80 I 437.40 I 204.12 I	
			CUSTOMER	79.00	0.00	1,151.82	
			CATEGORY	79.00	0.00	1,151.82	

RUN DATE 12/07/11 - SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - VCP CHOICE LHO	
		\$	SALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175591 12/02/11	000008	VISITING NURSE SERVICE	- ,	5.00		72.90	I
175592 12/02/11 175593 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	5.00 4.00		72.90 58.32	I
1/5595 12/02/11	000008	VISITING NURSE SERVICE	JARAMILLO PAL,	4.00		50.32	
			CUSTOMER	14.00	0.00	204.12	
			CATEGORY	14.00	0.00	204.12	

	- SUP SUNNYSIDE CITYWID					111011 1	- 140	
SALES JRNL # 0258	LOC 001 SUNNYSIDE C	ITYWIDE REG NY S A L E S	NY REGISTER			ADU ADULT BILL WEEK ENI	TNG 12	/09/11
			KEGIBIEK			DIDD WEEK BIN	JINO 12	7 0 0 7 1 1
INVOICE# DATE	CUST NO CUSTOMER NAM	A 5	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP S	URPLUS
175594 12/02/11 175595 12/02/11	000008 VISITING NUR:		HAVERI, RAMESH HAVERI, RAMESH	12.00 4.00		174.96 58.32	I I	
			CUSTOMER	16.00	0.00	233.28		
			CATEGORY	16.00	0.00	233.28		

RUN DATE	12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	141
SALES JRN	IL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			2	SALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175596	12/02/11	800000	VISITING NURSE SERVICE	JHAVERI, RAMESH	4.00		58.32	I
				CATEGORY	4.00	0.00	58.32	

	E 12/07/11 - RNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 HOA HOSPICE A BILL WEEK END	-	
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175597 175598	12/02/11 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	JIANNARAS, ANNA JIANNARAS, ANNA	50.00		729.00 291.60	I	
				CUSTOMER	70.00	0.00	1,020.60		
				CATEGORY	70.00	0.00	1,020.60		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			11102	- 143 OMEW/O WALLS (LT ING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175599 12/02/11 175600 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	15.00 10.00		218.70 145.80	I I
		CUSTOMER	25.00	0.00	364.50	
		CATEGORY	25.00	0.00	364.50	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 144 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175601 12/02/11 175602 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 8.00		174.96 I 116.64 I
			CUSTOMER	20.00	0.00	291.60
			CATEGORY	20.00	0.00	291.60

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			145 HOMEW/O WALLS (LT IDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	AMT AMOUNT	TYP SURPLUS
175603 12/02/11 175604 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	,	15.00 10.00	218.70 145.80	I I
		CUSTOMER	25.00	364.50	
		CATEGORY	25.00	364.50	

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	46
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			5	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175605	12/02/11	000008	VISITING NURSE SERVICE	KAUR, SARD	4.00		58.32	I	
175606	11/25/11	800000	VISITING NURSE SERVICE	KAUR, SHARAN	8.00		116.64	I	
175607	12/02/11	800000	VISITING NURSE SERVICE	KAUR, SHARAN	32.00		466.56	I	
175608	12/02/11	800000	VISITING NURSE SERVICE	KAUR, SHARAN	16.00		233.28	I	
175609	12/02/11	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	12.00		174.96	I	
175610	12/02/11	800000	VISITING NURSE SERVICE	KEARNEY, LORRAI	8.00		116.64	I	
				CUSTOMER	80.00	0.00	1,166.40		
				CATEGORY	80.00	0.00	1,166.40		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 147 LAD NURSING HOME W/O WALLS LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175611 12/02/11 175612 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		16.00 8.00		233.28 I 116.64 I
			CUSTOMER	24.00	0.00	349.92
			CATEGORY	24.00	0.00	349.92

			YSIDE CITYWIDE				PAGE 1 - 148	
SALES	JRNL # 0258	TOG 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			AUR ADULT REHAB ONLY BILL WEEK ENDING 12	
							BILL WELK ENDING IZ	, 00, 11
INVOIC	E# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
175613	12/02/11	800000	VISITING NURSE SERVICE	KOSSMANN, CAROL	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

RUN DATE 12/07/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 14	19
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175614 12/02/11	000008	VISITING NURSE SERVICE	KOUTROUBAS, THE	40.00		583.20 I	
175615 12/02/11	800000	VISITING NURSE SERVICE	KOUTROUBAS, THE	16.00		233.28 I	
			CUSTOMER	56.00	0.00	816.48	
			CATEGORY	56.00	0.00	816.48	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 150 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175616 12/02/11 175617 12/02/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	•	8.00 24.00		116.64 I 349.92 I	
		CUSTOMER	32.00	0.00	466.56	
		CATEGORY	32.00	0.00	466.56	

RUN DATE 12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	151
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
		S	ALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175618 12/02/11	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	16.00		233.28	I
175619 12/02/11	800000	VISITING NURSE SERVICE	LARA-MORA, BELE	16.00		233.28	I
175620 12/02/11	800000	VISITING NURSE SERVICE	LE, HO	11.50		167.67	I
175621 12/02/11	800000	VISITING NURSE SERVICE	LE, HO	8.00		116.64	I
			CUSTOMER	51.50	0.00	750.87	
			CATEGORY	51.50	0.00	750.87	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 152 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175622 12/02/11 175623 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	3.00 6.00	43.74 I 87.48 I
		CUSTOMER	9.00 0.00	131.22
		CATEGORY	9.00 0.00	131.22

RUN DATE 12/07/11						_	53
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW	
		•	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175624 12/02/11	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	8.00		116.64 I	
175625 12/02/11	000008	VISITING NURSE SERVICE	LEE, KATHLEEN	8.00		116.64 I	
175626 12/02/11	000008	VISITING NURSE SERVICE	LEGASPI, CECILI	12.00		174.96 I	
175627 12/02/11	800000	VISITING NURSE SERVICE	LEGASPI, CECILI	8.00		116.64 I	
				26.00	0.00		
			CUSTOMER	36.00	0.00	524.88	
			CATEGORY	36.00	0.00	524.88	

RUN DATE 12/07	7/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 154
SALES JRNL # (	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	ICSA
		:	SALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DAT	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175628 12/02	2/11 000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	40.00		583.20	I
175629 12/02	2/11 000008	VISITING NURSE SERVICE	LEWIS, CATHERIN	16.00		233.28	I
			CUSTOMER	56.00	0.00	816.48	
			CATEGORY	56.00	0.00	816.48	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNYSIDE CITYWI LOC 001 SUNNYSIDE					PAGE 1 - ADU ADULT BILL WEEK ENDING	155
INVOICE# DATE	CUST NO CUSTOMER NA	ME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175630 12/02/11 175631 12/02/11	000008 VISITING NU 000008 VISITING NU		LINARES, MYRIAM LINARES, MYRIAM	8.00		116.64 I 116.64 I	
			CUSTOMER	16.00	0.00	233.28	
			CATEGORY	16.00	0.00	233.28	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 156 VCP CHOICE LHCSA BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	I AMOUNT TYP SURPLUS
175632 12/02/11 175633 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	-,	50.00 20.00	729.00 I 291.60 I
		CUSTOMER	70.00 0.0	0 1,020.60
		CATEGORY	70.00 0.0	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 157 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175634 12/02/11 175635 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	11.25 8.00		164.03 I 116.64 I
			CUSTOMER	19.25	0.00	280.67
			CATEGORY	19.25	0.00	280.67

RUN DATE 12/0	7/11 - SUP SUNN	TYSIDE CITYWIDE				PAGE 1	- 158
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING F	HOMEW/O WALLS (LT
		5	SALES REGISTER			BILL WEEK ENI	DING 12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175636 12/0	2/11 000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	40.00		583.20	I
175637 12/0	2/11 000008	VISITING NURSE SERVICE	LOCORRIERE, JOS	16.00		233.28	I
175638 12/0	2/11 000008	VISITING NURSE SERVICE	LOGAN, ADELE	24.00		349.92	I
175639 12/0	2/11 000008	VISITING NURSE SERVICE	LOGAN, ADELE	8.00		116.64	I
			CUSTOMER	88.00	0.00	1,283.04	
			CATEGORY	88.00	0.00	1,283.04	

			YSIDE CITYWIDE				PAGE 1	
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
			\$	SALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT '	TYP SURPLUS
175640	12/02/11	000008	VISITING NURSE SERVICE	LONDONO, AMIRA	50.00		729.00	I
175641	12/02/11	800000	VISITING NURSE SERVICE	LONDONO, AMIRA	20.00		291.60	I
				CUSTOMER	70.00	0.00	1,020.60	
				CATEGORY	70.00	0.00	1,020.60	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWID	E REGNY NY SALES REGISTE	: R		PAGE 1 LTC NURSING H BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175642 12/02/11 175643 12/02/11	000008 VISITING NURSE SER VISITING NURSE SER	•	18.00 12.00		262.44 174.96	I I
		CUSTOMER	30.00	0.00	437.40	
		- CATEGORY	30.00	0.00	437.40	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 16 VCP CHOICE LHCSA BILL WEEK ENDING	1 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175644 12/02/11 175645 12/02/11 175646 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LOPEZ, ANGELICA	12.00 25.00 10.00		174.96 I 364.50 I 145.80 I	
			CUSTOMER	47.00	0.00	685.26	
			CATEGORY	47.00	0.00	685.26	

	- SUP SUNNYSIDE CITYWIDE			PAGE 1 - 162
SALES JRNL # 0258	LOC 001 SUNNYSIDE CITYWID			LTC NURSING HOMEW/O WALLS (LT
		SALES REGISTER		BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AI	AT AMOUNT TYP SURPLUS
175647 12/02/11	000008 VISITING NURSE SER	/ICE LOPEZ, MARIA	22.00	320.76 I
175648 12/02/11	000008 VISITING NURSE SER	/ICE LOPEZ, MARIA	12.00	174.96 I
		CUSTOMER	34.00 0.0	00 495.72
		CATEGORY	34.00 0.0	00 495.72

	12/07/11 - NL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REG NY NY A L E S R E G I	STER		HOA HOSPICE	- 163 ADULT DING 12/09/11	L
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	3
175649	12/02/11	000008	VISITING NURSE SERVICE	LOPEZ, RAFA	EL 11.00		160.38	I	
				CA EE C	ORY 11.00	0.00	160.38		-
1				CATEG	OR1 11.00	0.00	160.38		

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE					PAGE 1	- 164	
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY I	NΥ			VCP CHOICE LH	.CSA	
			:	SALES RI	EGISTE	R		BILL WEEK END	ING 12/09/1	.1
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLU	JS
155650						0.00			_	
175650	11/04/11	000008	VISITING NURSE SERVICE	LOPEZ	, VIDA	8.00		116.64	I	
										-
					CATEGORY	8.00	0.00	116.64		

			YSIDE CITYWIDE				PAGE 1 -	165
SALES JRN	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
			S	SALES REGISTED	R		BILL WEEK ENDI	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175651	11/25/11	000008	VISITING NURSE SERVICE	LOPEZ, VIDA	8.00		116.64	Ι
175652	12/02/11	800000	VISITING NURSE SERVICE	LOPEZ, VIDA	40.75		594.14	1
175653	12/02/11	800000	VISITING NURSE SERVICE	LOPEZ, VIDA	16.00		233.28	1
175654	12/02/11	800000	VISITING NURSE SERVICE	LORIA, DIANA	23.75		346.28	1
175655	12/02/11	800000	VISITING NURSE SERVICE	LORIA, DIANA	12.00		174.96	1
				CUSTOMER	100.50	0.00	1,465.30	
				CATEGORY	100.50	0.00	1,465.30	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 166 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175656 12/02/11 175657 12/02/11 175658 12/02/11 175659 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	LUCES, LETICIA LUCES, LETICIA LYMN, ANGIE LYMN, ANGIE	11.50 8.00 13.50 10.00		167.67 I 116.64 I 196.83 I 145.80 I
			CUSTOMER	43.00	0.00	626.94
			CATEGORY	43.00	0.00	626.94

	07/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 1	L67
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# D	PATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175660 12/	02/11 000008	VISITING NURSE SERVICE	MACCHIA, CATHY	31.00		451.98 I	
175661 12/	02/11 000008	VISITING NURSE SERVICE	MACCHIA, CATHY	10.00		145.80 I	
			CUSTOMER	41.00	0.00	597.78	
			CATEGORY	41.00	0.00	597.78	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	-	NY E G I S T E	: R		LTC NURSING	- 168 HOMEW/O WALLS (LT DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175662 11/25/11 175663 12/02/11 175664 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MACK,	BETTY BETTY BETTY	5.00 25.00 10.00		72.90 364.50 145.80	I I
				CUSTOMER	40.00	0.00	583.20	
				CATEGORY	40.00	0.00	583.20	

			YSIDE CITYWIDE				PAGE 1 - 1	
SALES JE	RNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			CCL CONGREGATE CA	
							DIDD WEEK ENDING	,,
INVOICE	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175665	12/02/11	000008	VISITING NURSE SERVICE	MAGILLIGAN, LOR	10.00		145.80 I	
				CATEGORY	10.00	0.00	145.80	

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	70
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175666	12/02/11	000008	VISITING NURSE SERVICE	MAGNANI, VINCEN	60.00		874.80	I	
175667	12/02/11	800000	VISITING NURSE SERVICE	MAGNANI, VINCEN	24.00		349.92	I	
175668	12/02/11	800000	VISITING NURSE SERVICE	MANGAN, JOHN	9.75		142.16	I	
175669	12/02/11	800000	VISITING NURSE SERVICE	MANGAN, JOHN	8.00		116.64	I	
175670	12/02/11	800000	VISITING NURSE SERVICE	MANNINO, FRANCE	55.00		801.90	I	
175671	12/02/11	800000	VISITING NURSE SERVICE	MANNINO, FRANCE	22.00		320.76	I	
				CUSTOMER	178.75	0.00	2,606.18		
				CATEGORY	178.75	0.00	2,606.18		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 1 LTC NURSING HOMEW BILL WEEK ENDING	/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175672 12/02/11 175673 12/02/11 175674 12/02/11 175675 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MANOS, ARCHIE MANOS, ARCHIE MANOS, VASILIKE MANOS, VASILIKE	30.00 6.00 12.00 3.00		437.40 I 87.48 I 174.96 I 43.74 I	
			CUSTOMER	51.00	0.00	743.58	
			CATEGORY	51.00	0.00	743.58	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 172 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175676 12/02/11 175677 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	7.25 8.50		105.71 I 123.93 I
			CUSTOMER	15.75	0.00	229.64
			CATEGORY	15.75	0.00	229.64

RUN DATE	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	173
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
			\$	SALES REGISTER			BILL WEEK ENDI	ING 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	T TRUOMA	YP SURPLUS
175678	12/02/11	000008	VISITING NURSE SERVICE	MARMOL ESPINAL,	15.00		218.70	I
175679	12/02/11	800000	VISITING NURSE SERVICE	MARMOL ESPINAL,	10.00		145.80	I
				CUSTOMER	25.00	0.00	364.50	
				CATEGORY	25.00	0.00	364.50	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	: R		PAGE 1 - 174 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175680 12/02/11 175681 12/02/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	- ,	29.00 13.00		422.82 I 189.54 I
		CUSTOMER	42.00	0.00	612.36
		- CATEGORY	42.00	0.00	612.36

RUN DATE 1 SALES JRNL	2/07/11 - SUP SUNN # 0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE#	DATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175683 1 175684 1	2/02/11 000008 2/02/11 000008 2/02/11 000008 2/02/11 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MARTIN, ELAUCAD MARTIN, ELAUCAD MARTINEZ, CAMIL MARTINEZ, CAMIL	9.00 6.00 9.00 6.00		131.22 87.48 131.22 87.48	I I I
			CUSTOMER	30.00	0.00	437.40	
			CATEGORY	30.00	0.00	437.40	

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - CCL CONGREGATE BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175686 12/02/11 175687 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	•	50.00		729.00 I 291.60 I	
			CUSTOMER	70.00	0.00	1,020.60	
			CATEGORY	70.00	0.00	1,020.60	

			YSIDE CITYWIDE					- 1	77
SALES UK	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			VCP CHOICE LI BILL WEEK ENI		12/09/11
			'	SALES KEGISIEK			DILL WEEK EM	JING	12/03/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
								_	
175688	12/02/11	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	18.00		262.44	I	
175689	12/02/11	800000	VISITING NURSE SERVICE	MARTINEZ, MARGA	12.00		174.96	I	
175690	12/02/11	000008	VISITING NURSE SERVICE	MARTINEZ, MARTA	18.00		262.44	I	
175691	12/02/11	000008	VISITING NURSE SERVICE	MARTINEZ, MARTA	12.00		174.96	I	
175692	12/02/11	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	60.00		874.80	I	
175693	12/02/11	800000	VISITING NURSE SERVICE	MARTINEZ, ROSA	24.00		349.92	I	
				CUSTOMER	144.00	0.00	2,099.52		
				CATEGORY	144.00	0.00	2,099.52		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175694 12/02/11 175695 12/02/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	,	26.00 12.00		379.08 I 174.96 I	
		CUSTOMER	38.00	0.00	554.04	
		CATEGORY	38.00	0.00	554.04	

NY REGISTER			HOA HOSPICE A	DULT	
FERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
I, RAFFAELE	3.00		43.74	I	
CATEGORY	3 00	0.00	43 74		
C	NY REGISTER  EFERENCE EI, RAFFAELE  CATEGORY	REGISTER  FERENCE HOURS  SI, RAFFAELE 3.00	REGISTER  FERENCE HOURS TAX AMT  SI, RAFFAELE 3.00	NY REGISTER HOA HOSPICE A BILL WEEK END SFERENCE HOURS TAX AMT AMOUNT SI, RAFFAELE 3.00 43.74	NY REGISTER HOA HOSPICE ADULT BILL WEEK ENDING  FERENCE HOURS TAX AMT AMOUNT TYP  SI, RAFFAELE 3.00 43.74 I

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 180
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		5	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175697 11/18/11	000008	VISITING NURSE SERVICE	MATOS, ROSA	5.00		72.90 I
175698 11/25/11	000008	VISITING NURSE SERVICE	MATOS, ROSA	5.25		76.55 I
175699 12/02/11	800000	VISITING NURSE SERVICE	MATOS, ROSA	23.50		342.64 I
175700 12/02/11	800000	VISITING NURSE SERVICE	MATOS, ROSA	11.50		167.67 I
			CUSTOMER	45.25	0.00	659.76
			CATEGORY	45.25	0.00	659.76

RUN DATE 12/07/1						-	181
SALES JRNL # 025	8 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		2	SALES REGISTER	{		BILL WEEK ENDING	3 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175701 12/02/1	.1 000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	43.75		637.88 I	
175702 12/02/1	.1 000008	VISITING NURSE SERVICE	MAZZONE, FRANCE	18.00		262.44 I	
175703 12/02/1	.1 000008	VISITING NURSE SERVICE	MCBRAYER, SYLVI	120.00		1,749.60 I	
175704 12/02/1	.1 000008	VISITING NURSE SERVICE	MCBRAYER, SYLVI	48.00		699.84 I	
			CUSTOMER	229.75	0.00	3,349.76	
			CATEGORY	229.75	0.00	3,349.76	

RUN DATE 12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 1	82
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE	HCSA	
		\$	SALES REGISTER			BILL WEEK ENI	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175705 12/02/11	000008	VISITING NURSE SERVICE	MCGUIRE, HELEN	16.00		233.28	I	
175706 12/02/11	800000	VISITING NURSE SERVICE	MCGUIRE, HELEN	16.00		233.28	I	
			CUSTOMER	32.00	0.00	466.56		
			CATEGORY	32.00	0.00	466.56		

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE C		NY		PAGE 1 - 183 ADU ADULT	
SALES URNL # U236	LOC UUI SUNNISIDE C.	S A L E S	REGISTER		BILL WEEK ENDING 12/	09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	E R	EFERENCE	HOURS TAX A	MT AMOUNT TYP SU	RPLUS
175707 12/02/11 175708 12/02/11	000008 VISITING NURS		PARTLAN, CATH PARTLAN, CATH	2.00	29.16 I 29.16 I	
			CUSTOMER	4.00 0.	00 58.32	
			CATEGORY	4.00 0.	00 58.32	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 184 VCP CHOICE LHCSA BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175709 12/02/11 175710 12/02/11 175711 12/02/11 175712 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MEJIA, DINORAH MEJIA, DINORAH MEJIA, MARINA MEJIA, MARINA	8.00 8.00 16.00 8.00		116.64 I 116.64 I 233.28 I 116.64 I
			CUSTOMER	40.00	0.00	583.20
			CATEGORY	40.00	0.00	583.20

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 185 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175713 12/02/11 175714 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	- ,	25.00 13.75		364.50 I 200.48 I
		CUSTOMER	38.75	0.00	564.98
		CATEGORY	 38.75	0.00	 564.98

RUN DATE 1	L2/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	186
SALES JRNL	L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCS	A
			\$	SALES REGISTER			BILL WEEK ENDIN	G 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175715 1	L2/02/11	800000	VISITING NURSE SERVICE	MELILLO, GRACE	12.00		174.96 I	
175716 1	12/02/11	800000	VISITING NURSE SERVICE	MELILLO, GRACE	8.00		116.64 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	291.60	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITY	WIDE REGNY NY SALES REGIST	E R	PAGE 1 - 187 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175717 12/02/11 175718 12/02/11	000008 VISITING NURSE 0000008 VISITING NURSE		12.25 4.50	178.61 I 65.61 I
		CUSTOMER	16.75 0.00	244.22
		CATEGORY	16.75 0.00	244.22

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK ENI	- 18	12/09/11
								, ,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175719 12/02/11	800000	VISITING NURSE SERVICE		6.00		87.48	I	
175720 12/02/11	000008	VISITING NURSE SERVICE	MENDOLIA, ANTOI	3.00		43.74		
			CUSTOMER	9.00	0.00	131.22		
			CATEGORY	9.00	0.00	131.22		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 189 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175721 12/02/11 175722 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		27.00 12.00		393.66 I 174.96 I
		CUSTOMER	39.00	0.00	568.62
		CATEGORY	39.00	0.00	 568.62

RUN DATE	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	190
SALES JRN	IL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHC	
			:	SALES REGISTER			BILL WEEK ENDI	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175723	12/02/11	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	12.00		174.96	I
175724	12/02/11	800000	VISITING NURSE SERVICE	MENDOZA, VALENT	8.50		123.93	I
				CUSTOMER	20.50	0.00	298.89	
				CATEGORY	20.50	0.00	298.89	

RUN DATE 12/07/11 - SUP SALES JRNL # 0258 LOC	001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 19 ADU ADULT BILL WEEK ENDING	
INVOICE# DATE CUST	_	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
INVOICE# DATE COST	I NO CUSTOMER NAME	REFERENCE	HOURS	IAX AMI	AMOUNI IIP	SURPLUS
175725 12/02/11 0000 175726 12/02/11 0000		MILEO, MARY MILEO, MARY	17.00 6.00		247.86 I 87.48 I	
173720 12702711 0000	VIBILING NORDE BERVICE	·				
		CUSTOMER	23.00	0.00	335.34	
		 CATEGORY	23.00	0.00	335.34	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 192 CCL CONGREGATE CARE PF	ROGRAM
			SALES REGISTER			BILL WEEK ENDING 12/0	09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
175727 12/02/11 175728 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	- ,	12.00		174.96 I 116.64 I	
1/3/20 12/02/11	000000	VISITING NORSE SERVICE	HOLLINA, ANA				
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 12/07/1 SALES JRNL # 025		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
175729 12/02/1 175730 12/02/1 175731 12/02/1 175732 12/02/1	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	MONTES, MARTA	6.00 4.00 18.00 12.00		87.48 58.32 262.44 174.96	I I I
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	194
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGIS	TER		BILL WEEK ENDING	G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	P SURPLUS
175733 12/02/11	000008	VISITING NURSE SERVICE	MOORE, ALISON	4.00		58.32 I	
175734 12/02/11	800000	VISITING NURSE SERVICE	MOORE, ALISON	7.00		102.06 I	
			CUSTOME	R 11.00	0.00	160.38	
			COSTOME	K 11.00	0.00	100.30	
			CATEGOR	Y 11.00	0.00	160.38	

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1	- 1	95
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LE		
		\$	SALES REGISTER			BILL WEEK ENI	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175735 12/02/11	000008	VISITING NURSE SERVICE	MORAITIS, AGATH	25.00		364.50	I	
175736 12/02/11	800000	VISITING NURSE SERVICE	MORAITIS, AGATH	10.00		145.80	I	
			CUSTOMER	35.00	0.00	510.30		
			CATEGORY	35.00	0.00	510.30		

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 19	96
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING H		•
		2	SALES REGISTER			BILL WEEK END	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175737 11/11/11	800000	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		87.48	I	
175738 11/18/11	000008	VISITING NURSE SERVICE	MORALES, ANGELI	6.00		87.48	I	
175739 12/02/11	000008	VISITING NURSE SERVICE	MORALES, ANGELI	24.00		349.92	I	
175740 12/02/11	800000	VISITING NURSE SERVICE	MORALES, ANGELI	12.00		174.96	I	
			CUSTOMER	48.00	0.00	699.84		
			CATEGORY	48.00	0.00	699.84		

	12/07/11 - NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDI	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT I	YP SURPLUS
175741 175742	12/02/11 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	MORALES, GENERO MORALES, GENERO	59.25 24.00		863.87 349.92	I I
				CUSTOMER	83.25	0.00	1,213.79	
				CATEGORY	83.25	0.00	1,213.79	

RUN DATE 12/07/11 -			DEC NV NV			PAGE 1 -	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGI	STER		VCP CHOICE LHO BILL WEEK ENDI	· · · ·
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	TYP SURPLUS
175743 12/02/11	000008	VISITING NURSE SERVICE	MOREL, JUA	NA 9.00		131.22	I
175744 12/02/11	800000	VISITING NURSE SERVICE	NAGY, GEOR	GE 30.00		437.40	I
175745 12/02/11	800000	VISITING NURSE SERVICE	NAGY, GEOR	GE 12.00		174.96	I
			CUST	OMER 51.00	0.00	743.58	
			CATE	GORY 51.00	0.00	743.58	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 199
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175746 12/02/11	000008	VISITING NURSE SERVICE	NARANJO, HENRY	30.00		437.40 I
175747 12/02/11	800000	VISITING NURSE SERVICE	NARANJO, HENRY	6.00		87.48 I
			CUSTOMER	36.00	0.00	524.88
			CATEGORY	36.00	0.00	524.88

RUN DATE 12/07/11 -	SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 200	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/09	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPI	JUS
175748 12/02/11	800000	VISITING NURSE SERVICE	NARANJO, HENRY	7.00		102.06 I	
			CATEGORY	7.00	0.00	102.06	

RUN DATE 12/0' SALES JRNL #		NYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGAT	- 201 E CARE PROGRAM
		S	GALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DA	re cust no	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175749 12/0: 175750 12/0:		VISITING NURSE SERVICE	NAVARRO, MARIA	12.00		174.96	I
175750 12/0	2/11 000008	VISITING NURSE SERVICE	NAVARRO, MARIA	8.00		116.64	
			CUSTOMER	20.00	0.00	291.60	
			CATEGORY	20.00	0.00	291.60	

RUN DATE 1 SALES JRNI		SUNNYSIDE CITYW 001 SUNNYSIDE	E CITYWIDE	-	TY EGISTE	R		PAGE 1 VCP CHOICE L BILL WEEK EN		02 12/09/11
INVOICE#	DATE CUST	NO CUSTOMER N	NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	12/02/11 0000 12/02/11 0000		NURSE SERVICE NURSE SERVICE		NI, MARY NI, MARY	12.00 8.00		174.96 116.64	I	
					CUSTOMER	20.00	0.00	291.60		
					- CATEGORY	20.00	0.00	291.60		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 203 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX A	MT AMOUNT TYP SURPLUS
175753 12/02/11 175754 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· · · · · · · · · · · · · · · · · · ·	35.00 13.75	510.30 I 200.48 I
		CUSTOMER	48.75 0.	00 710.78
		CATEGORY	48.75 0.	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 204 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175755 12/02/11 175756 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE		45.00 18.00		656.10 I 262.44 I
			CUSTOMER	63.00	0.00	918.54
			CATEGORY	63.00	0.00	918.54

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 20 VCP CHOICE LHCSA	)5
DALLO GIAVE # 0250	HOC 001		SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175757 12/02/11 175758 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	24.00 16.00		349.92 I 233.28 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 206
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175759 12/02/11	000008	VISITING NURSE SERVICE	NIGRO, CATHERIN	9.00		131.22 I
175760 12/02/11	800000	VISITING NURSE SERVICE	NIGRO, CATHERIN	6.00		87.48 I
			CUSTOMER	15.00	0.00	218.70
			COSTOMER	13.00	0.00	210.70
			CATEGORY	15.00	0.00	218.70

		12/07/11 - NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE		NY EGIST:	E R		PAGE 1 VCP CHOICE L BILL WEEK EN		
I	NVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	75761 75762	12/02/11 12/02/11	000008 000008	VISITING NURSE SERVIC	,	CARMEN CARMEN	12.00 8.00		174.96 116.64	I	
						CUSTOMER	20.00	0.00	291.60		
						CATEGORY	20.00	0.00	291.60		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 -	208 MEW/O WALLS (LT
BIEDS SIGNE II 0230	100 001		SALES REGISTER			BILL WEEK ENDI	,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175763 12/02/11	000008	VISITING NURSE SERVICE	NOBLIN, ELOISE	15.25		222.35	I
175764 12/02/11	800000	VISITING NURSE SERVICE	NOBLIN, ELOISE	10.00		145.80	I
175765 12/02/11	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	18.00		262.44	I
175766 12/02/11	800000	VISITING NURSE SERVICE	NOBOADESALAZAR,	15.75		229.64	I
			CUSTOMER	59.00	0.00	860.23	
			CATEGORY	59.00	0.00	860.23	

			YSIDE CITYWIDE						09
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
			S	ALES REGISTER			BILL WEEK EN	DING	12/09/11
		GTTGT 170	GUGEOVER MANGE		******		22407777	<b></b>	GIID DI IIG
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175767	12/02/11	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	35.00		510.30	т	
175768	12/02/11	000008	VISITING NURSE SERVICE	NUZIALE, CONCET	13.75		200.48	T	
175769	12/02/11	000008	VISITING NURSE SERVICE	OCHOA, LUIS	21.00		306.18	± +	
175770				•					
	12/02/11	800000	VISITING NURSE SERVICE	OCHOA, LUIS	14.00		204.12	Τ_	
175771	11/18/11	000008	VISITING NURSE SERVICE	ORTEGA, CARLOS	6.00		87.48	Τ	
175772	12/02/11	800000	VISITING NURSE SERVICE	ORTEGA, CARLOS	28.00		408.24	I	
175773	12/02/11	000008	VISITING NURSE SERVICE	ORTEGA, CARLOS	12.00		174.96	I	
175774	12/02/11	800000	VISITING NURSE SERVICE	ORTIZ, LILIA	18.00		262.44	I	
175775	12/02/11	800000	VISITING NURSE SERVICE	ORTIZ, LILIA	12.00		174.96	I	
				 CUSTOMER	159.75	0.00	2,329.16		
				CATEGORY	159.75	0.00	2,329.16		

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 210	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		:	SALES REGISTER			BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175776 12/02/11	000008	VISITING NURSE SERVICE	ORTIZ, MARIA	3.00		43.74 I	
175777 12/02/11	000008	VISITING NURSE SERVICE	ORTIZ, MARIA	3.00		43.74 I	
175778 12/02/11	800000	VISITING NURSE SERVICE	ORTIZ, TULA	6.00		87.48 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 1	12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 2	11
SALES JRNI	L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
1			S	SALES REGISTER			BILL WEEK EN	DING	12/09/11
I									
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
l									
	, - ,		VISITING NURSE SERVICE	OSPINA, ANA				I	
175780 1	12/02/11	800000	VISITING NURSE SERVICE	OSPINA, ANA	4.00		58.32	I	
175781 1	12/02/11	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	25.00		364.50	I	
175782 1	12/02/11	800000	VISITING NURSE SERVICE	PANASKAROLIDIS,	15.75		229.64	I	
175783 1	12/02/11	800000	VISITING NURSE SERVICE	PAPADOPOULOS, M	8.00		116.64	I	
175784 1	12/02/11	800000	VISITING NURSE SERVICE	PAPADOPOULOS, M	8.00		116.64	I	
			VISITING NURSE SERVICE	•				I	
								Ī	
				•				T	
				•				T	
				•				T	
				•				T	
				,				T	
				,					
1/3/92 1	12/02/11	000008	VISITING NURSE SERVICE	PAREIII, MARIE	10.00		433.40	1	
1				CUSTOMER	179 75	0 00	2 620 76		
1				CODIONEIC	1,,,,,	0.00	2,020.70		
I									
I				CATEGORY	179.75	0.00	2,620.76		
175779 1 175780 1 175781 1 175782 1 175783 1 175784 1 175785 1 175786 1 175787 1 175788 1 175788 1 175789 1 175790 1	12/02/11 12/02/11 12/02/11 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	OSPINA, ANA OSPINA, ANA PANASKAROLIDIS, PANASKAROLIDIS, PAPADOPOULOS, M PAPADOPOULOS, M PAPAZIAN, MANNI PAPAZIAN, MANNI PAPAZIAN, MANNI PAPOUTSIS, MARY PAPP, TEREZIA PAPP, TEREZIA PARETTI, MARIE PARETTI, MARIE PARETTI, MARIE PARETTI, MARIE	4.00 4.00 25.00 15.75 8.00 8.00 30.00 20.00 3.00 3.00 16.00 24.00 16.00	0.00	58.32 58.32 364.50 229.64 116.64 116.64 437.40 291.60 43.74 43.74 43.74 233.28 349.92 233.28		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTI	₹ R		1 - 212 G HOMEW/O WALLS (LT ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	AX AMT AMOUN	T TYP SURPLUS
175793 12/02/11 175794 12/02/11	000008 VISITING NURSE SERV. 000008 VISITING NURSE SERV.	,	12.00 8.00	174.90 116.6	
		CUSTOMER	20.00	0.00 291.6	)
		CATEGORY	20.00	0.00 291.6	 )

			YSIDE CITYWIDE	222			PAGE 1 - 21	13
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			ADU ADULT BILL WEEK ENDING	12/09/11
			5	HILD KICIDIEK			DIEE WEEK ENDING	12/03/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175795 175796	12/02/11 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PARTAGAS, ANA PARTAGAS, ANA	12.00		174.96 I 116.64 I	
				CUSTOMER	20.00	0.00	291.60	
				CATEGORY	20.00	0.00	 291.60	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCSA BILL WEEK ENDING	<del>J</del>
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
175797 12/02/11 175798 12/02/11 175799 12/02/11 175800 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PENA, VICTORIA PENA, VICTORIA PENAGOS, MARIA PENAGOS, MARIA	10.50 13.00 14.75 10.00		153.09 I 189.54 I 215.06 I 145.80 I	
			CUSTOMER	48.25	0.00	703.49	
			CATEGORY	48.25	0.00	703.49	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER	2		PAGE 1 - 2 LTC NURSING HOME BILL WEEK ENDING	
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175801 12/02/11 175802 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	· ·	29.25 12.00		426.47 I 174.96 I	
		CUSTOMER	41.25	0.00	601.43	
		CATEGORY	41.25	0.00	601.43	

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LE BILL WEEK ENI		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS	
175803 12/02/11 175804 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	PEREZ, GLADYS PEREZ, GLADYS	17.25 6.00		251.51 87.48	I	
			CUSTOMER	23.25	0.00	338.99		
			CATEGORY	23.25	0.00	338.99		

RUN DATE 12/07/13 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	- 217
			SALES REGISTER			BILL WEEK EN	,,
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175805 12/02/13 175806 12/02/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	PERSAUD, RITA PERSAUD, RITA	6.00 12.00		87.48 174.96	I I
			CUSTOMER	18.00	0.00	262.44	
			CATEGORY	18.00	0.00	262.44	

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 218	3
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LI	HCSA	
			S A	ALES REGISTER			BILL WEEK EN	DING 1	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175807	12/02/11	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	40.00		583.20	I	
175808	12/02/11	800000	VISITING NURSE SERVICE	PHILIPPS, MARY	16.00		233.28	I	
175809	12/02/11	000008	VISITING NURSE SERVICE	PLACIDO, GENARO	6.75		98.42	I	
175810	12/02/11	800000	VISITING NURSE SERVICE	PLACIDO, GENARO	10.00		145.80	I	
175811	12/02/11	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	10.50		153.09	I	
175812	12/02/11	800000	VISITING NURSE SERVICE	PLACIDO, MERCED	12.00		174.96	I	
175813	12/02/11	000008	VISITING NURSE SERVICE	POGGI, EMERITA	18.00		262.44	I	
175814	12/02/11	800000	VISITING NURSE SERVICE	POGGI, EMERITA	12.00		174.96	I	
				CUSTOMER	125.25	0.00	1,826.15		
				CATEGORY	125.25	0.00	1,826.15		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 219 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AM	AMOUNT TYP SURPLUS
175815 12/02/11 175816 12/02/11	000008 VISITING NURSE SERVI	•	24.00 16.00	349.92 I 233.28 I
		CUSTOMER	40.00 0.00	583.20
		CATEGORY	40.00 0.00	583.20

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 220 VCP CHOICE LHCSA BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175817 12/02/11 175818 12/02/11 175819 12/02/11 175820 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	PUISELLO, CIRA PUISELLO, CIRA PULLIZA, DIANNE PULLIZA, DIANNE	20.00 4.00 24.50 10.50		291.60 I 58.32 I 357.21 I 153.09 I
			CUSTOMER	59.00	0.00	860.22
			CATEGORY	59.00	0.00	860.22

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDIN	221 IG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175821 12/02/11	800000	VISITING NURSE SERVICE	QUARTUCCIA, ELI	2.00		29.16	
			CATEGORY	2.00	0.00	29.16	

RUN DATE 12/07/11	- SUP SUN	NYSIDE CITYWIDE				PAGE 1 - 222	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O	WALLS (LT
		:	SALES REGISTER	-		BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175822 12/02/11	. 000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	30.00		437.40 I	
175823 12/02/11	. 000008	VISITING NURSE SERVICE	QUIZHPI, MARIA	12.00		174.96 I	
			CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	

RUN DATE I		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 - : ADU ADULT BILL WEEK ENDING	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175824	12/02/11	800000	VISITING NURSE SERVICE	RAFFELLINI, MAR	2.00		29.16 I	
				CATEGORY	2.00	0.00	29.16	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY ALES REGISTER			PAGE 1 - 224 LAP LOMBARDI AIDES PEDIATRIC BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175825 12/02/11 175826 12/02/11		SITING NURSE SERVICE	RAMIREZ, ANA RAMIREZ, ANA	24.00 16.00		349.92 I 233.28 I
			CUSTOMER	40.00	0.00	583.20
			CATEGORY	40.00	0.00	583.20

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HO BILL WEEK END	OMEW/O WALLS (LT
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
175827 12/02/11 175828 12/02/11 175829 12/02/11 175830 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMIREZ, JUANA RAMIREZ, JUANA RAMLALL, LILOWT RAMLALL, LILOWT	29.00 16.00 15.50 10.00		422.82 233.28 225.99 145.80	I I I
			CUSTOMER	70.50	0.00	1,027.89	
			CATEGORY	70.50	0.00	1,027.89	

RUN DATE 12/07/11 - SALES JRNL # 0258			REG NY NY			PAGE 1 - 22 VCP CHOICE LHCSA	6
			SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175831 12/02/11	000008	VISITING NURSE SERVICE	RAMOS, IRIS	10.00		145.80 I	
			CATEGORY	10.00	0.00	145.80	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 AUR ADULT REF BILL WEEK ENI	-
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175832 12/02/11 175833 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMOS, JENNIFER RAMOS, JENNIFER	29.00 16.00		422.82 233.28	I
			CUSTOMER	45.00	0.00	656.10	
			CATEGORY	45.00	0.00	656.10	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 22 VCP CHOICE LHCSA BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175834 12/02/11 175835 12/02/11 175836 12/02/11 175837 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RAMPHAL, INDRIA RAMPHAL, INDRIA RANDAZZO, ROSAL RANDAZZO, ROSAL	8.00 4.00 11.25 8.00		116.64 I 58.32 I 164.03 I 116.64 I	
			CUSTOMER	31.25	0.00	455.63	
			CATEGORY	31.25	0.00	455.63	

RUN DATE 12/07/ SALES JRNL # 02		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - ADU ADULT BILL WEEK ENDIN	229 IG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175838 12/02/	11 000008	VISITING NURSE SERVICE	RANSOM, JAN	3.75		54.68 I	
			CATEGORY	3.75	0.00	54.68	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LEBILL WEEK EN		12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175839 12/02/11 175840 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	REINA, JOSE REINA, JOSE	11.75 7.75		171.32 113.00	I	
			CUSTOMER	19.50	0.00	284.32		
			CATEGORY	19.50	0.00	284.32		

	07/11 - SUP SUNN					PAGE 1 -	231
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	ALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175841 11/0	04/11 000008	VISITING NURSE SERVICE	RICCARDELLO, SI	1.00		14.58 I	
175842 11/2	25/11 000008	VISITING NURSE SERVICE	RICCARDELLO, SI	3.00		43.74 I	
175843 12/0	02/11 000008	VISITING NURSE SERVICE	RICCARDELLO, SI	3.00		43.74 I	
175844 12/0	02/11 000008	VISITING NURSE SERVICE	RICCARDELLO, SI	3.00		43.74 I	
			CUSTOMER	10.00	0.00	145.80	
			CATEGORY	10.00	0.00	145.80	

RUN DATE	12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 232
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
			·	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175845	12/02/11	000008	VISITING NURSE SERVICE	RIVADENEIRA, OL	11.25		164.03 I
175846	12/02/11	800000	VISITING NURSE SERVICE	RIVADENEIRA, OL	8.00		116.64 I
				CUSTOMER	19.25	0.00	280.67
				CATEGORY	19.25	0.00	280.67

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			1 - 233 HOMEW/O WALLS (LT NDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX	TRUOMA TMA 2	TYP SURPLUS
175847 12/02/11 175848 12/02/11	000008 VISITING NURSE SERV VISITING NURSE SERV	· · · · · · · · · · · · · · · · · · ·	40.00 16.00	583.20 233.28	
		CUSTOMER	56.00	0.00 816.48	
		CATEGORY	56.00	0.00 816.48	

	07/11 - SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 234
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH	
		S	ALES REGISTER			BILL WEEK END	ING 12/09/11
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175849 12/0	02/11 000008	VISITING NURSE SERVICE	RIVERA, CARMEN	10.00		145.80	I
175850 12/0	02/11 000008	VISITING NURSE SERVICE	RIVERA, CARMEN	5.00		72.90	I
175851 11/1	18/11 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	4.00		58.32	I
175852 12/0	02/11 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	8.00		116.64	I
175853 12/0	02/11 000008	VISITING NURSE SERVICE	RIVERA, ERNESTO	8.00		116.64	I
			CUSTOMER	35.00	0.00	510.30	
			CATEGORY	35.00	0.00	510.30	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 235 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175854 12/02/11 175855 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE	,	12.00 8.00		174.96 I 116.64 I
			CUSTOMER	20.00	0.00	291.60
			CATEGORY	20.00	0.00	 291.60

RUN DATE 12/07/11 -						PAGE 1 - 236
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT
		5	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175856 12/02/11	000008	VISITING NURSE SERVICE	RIVERA, RAQUEL	20.00		291.60 I
175857 12/02/11	800000	VISITING NURSE SERVICE	RIVERA, RAQUEL	8.00		116.64 I
			CUSTOMER	28.00	0.00	408.24
			CUSTOMER	28.00	0.00	408.24
			CATEGORY	28.00	0.00	408.24

RUN DATE 12/07/11	- SUP SUNN	NYSIDE CITYWIDE				PAGE 1 - 237	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (L'	Τ
		i	SALES REGISTER	•		BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
185050 10/00/11	000000		D.T.I.D.D. 113.1D.3	01 50		212 40 -	
175858 12/02/11	000008	VISITING NURSE SERVICE	RIVERA, WANDA	21.50		313.48 I	
175859 12/02/11	000008	VISITING NURSE SERVICE	RIVERA, WANDA	15.00		218.70 I	
175860 11/25/11	000008	VISITING NURSE SERVICE	ROBERTS, SARAH	4.00		58.32 I	
175861 12/02/11	000008	VISITING NURSE SERVICE	ROBERTS, SARAH	7.50		109.35 I	
175862 12/02/11	000008	VISITING NURSE SERVICE	ROBERTS, SARAH	4.00		58.32 I	
			CUSTOMER	52.00	0.00	758.17	
			CATEGORY	52.00	0.00	758.17	

			YSIDE CITYWIDE				PAGE 1 - 238	
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	0 (00 (11
			2	SALES REGISTER			BILL WEEK ENDING 12	2/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175863	12/02/11	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	27.75		404.60 I	
175864	12/02/11	800000	VISITING NURSE SERVICE	ROBINSON, MARGA	14.00		204.12 I	
				CUSTOMER	41.75	0.00	608.72	
				CATEGORY	41.75	0.00	608.72	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 239 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175865 12/02/11 175866 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		32.00 16.00		466.56 I 233.28 I
			CUSTOMER	48.00	0.00	699.84
			CATEGORY	48.00	0.00	699.84

			YSIDE CITYWIDE				PAGE 1		40
SALES JRN	L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LH		10/00/11
			:	SALES REGISTER			BILL WEEK END	ING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175867	12/02/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	12.00		174.96	I	
175868	12/02/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, FERM	8.00		116.64	I	
				CUSTOMER	20.00	0.00	291.60		
				CATEGORY	20.00	0.00	291.60		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 241 CCL CONGREGATE CARE PROGRA BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
175869 12/02/11 175870 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	RODRIGUEZ, MARC RODRIGUEZ, MARC	60.00 23.75		874.80 I 346.28 I	
			CUSTOMER	83.75	0.00	1,221.08	•
			CATEGORY	83.75	0.00	1,221.08	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNNY LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 242 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175871 12/02/11 175872 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE		15.00 10.00		218.70 I 145.80 I
			CUSTOMER	25.00	0.00	364.50
			CATEGORY	25.00	0.00	364.50

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 243
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175873 12/02/11	000008	VISITING NURSE SERVICE	RODRIGUEZ, PORF	35.00		510.30 I
175874 12/02/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, PORF	14.00		204.12 I
			CUSTOMER	49.00	0.00	714.42
			CATEGORY	49.00	0.00	714.42

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - LTC NURSING HOM	244
BIEDS CIAVE    0230	100 001		SALES REGISTER			BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175875 12/02/11	000008	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	27.75		404.60 I	
175876 12/02/11	800000	VISITING NURSE SERVICE	RODRIGUEZ, ROQU	14.50		211.41 I	
175877 12/02/11	800000	VISITING NURSE SERVICE	ROLON, JUANITA	24.00		349.92 I	
175878 12/02/11	800000	VISITING NURSE SERVICE	ROLON, JUANITA	16.00		233.28 I	
			CUSTOMER	82.25	0.00	1,199.21	
			CATEGORY	82.25	0.00	1,199.21	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 245	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175879 12/02/11	000008	VISITING NURSE SERVICE	ROMERO, SANTHY	40.00		583.20 I	
175880 12/02/11	800000	VISITING NURSE SERVICE	ROMERO, SANTHY	8.00		116.64 I	
			CUSTOMER	48.00	0.00	699.84	
			CATEGORY	48.00	0.00	699.84	

	7/11 - SUP SUNN					PAGE 1	- 246
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY				HOMEW/O WALLS (LT
		S	SALES REGIS	STER		BILL WEEK ENI	DING 12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175881 11/2	5/11 000008	VISITING NURSE SERVICE	ROMO, FLOR	8.00		116.64	I
175882 12/0	2/11 000008	VISITING NURSE SERVICE	ROMO, FLOR	39.75		579.56	I
175883 12/0	2/11 000008	VISITING NURSE SERVICE	ROMO, FLOR	16.00		233.28	I
175884 12/0	2/11 000008	VISITING NURSE SERVICE	ROSA, ANA	24.00		349.92	I
175885 12/0	2/11 000008	VISITING NURSE SERVICE	ROSA, ANA	16.00		233.28	I
			CUSTON	MER 103.75	0.00	1,512.68	
			CATEGO	DRY 103.75	0.00	1,512.68	

		SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY	NY			PAGE 1 ADU ADULT	- 24	7	
SALES UKI	NL # UZ56	TOC 001			EGISTE	R		BILL WEEK EN	DING 3	12/09/11	
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
175886	12/02/11	000008	VISITING NURSE SERVICE	ROSA,	LUZ E	40.00		583.20	I		
175887	12/02/11	800000	VISITING NURSE SERVICE	ROSA,	LUZ E	16.00		233.28	I		
					CUSTOMER	56.00	0.00	816.48			
					CATEGORY	56.00	0.00	816.48			

			YSIDE CITYWIDE				PAGE 1	- 2	48
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		
			S	ALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175888	12/02/11	000008	VISITING NURSE SERVICE	ROSA, MANOLO	12.00		174.96	I	
175889	12/02/11	800000	VISITING NURSE SERVICE	ROSA, MANOLO	4.00		58.32	I	
175890	12/02/11	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	24.00		349.92	I	
175891	12/02/11	800000	VISITING NURSE SERVICE	ROSARIO, ELSA	12.00		174.96	I	
175892	12/02/11	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	10.00		145.80	I	
175893	12/02/11	800000	VISITING NURSE SERVICE	ROSARIO, MARIA	10.00		145.80	I	
				CUSTOMER	72.00	0.00	1,049.76		
				CATEGORY	72.00	0.00	1,049.76		

			YSIDE CITYWIDE				-	249
SALES JRN	1L # U258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING	12/09/11
							5111 W211 2115111	, 12,00,11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYPE	SURPLUS
	12/02/11 12/02/11	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	ROSEN, BESSIE ROSEN, BESSIE	12.00		174.96 I 43.74 I	
173033	12/02/11	000000	VIBILING NORDE BERVIOL	CUSTOMER	15.00	0.00	218.70	
				COSTORER	13.00	0.00	210.70	
				CATEGORY	15.00	0.00	218.70	

RUN DATE	12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 250	)
SALES JRN	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADULT	
			\$	SALES REGISTER			BILL WEEK ENDING 1	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175896	12/02/11	800000	VISITING NURSE SERVICE	RUBERTO, MARY	1.00		14.58 I	
				CATECODY	1 00		11 50	
				CATEGORY	1.00	0.00	14.58	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 251 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175897 12/02/11 175898 12/02/11 175899 12/02/11 175900 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	RUBIN, EVGENY RUBIN, EVGENY RUECKHER, PATRI RUECKHER, PATRI	6.00 4.00 9.00 6.00		87.48 I 58.32 I 131.22 I 87.48 I
			CUSTOMER	25.00	0.00	364.50
			CATEGORY	25.00	0.00	364.50

RUN DATE 12/07/11 -	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	252
SALES JRNL # 0258	LOC 001 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175901 12/02/11	000008 VISITING NURSE SERVICE	RUEDA, INES	31.75		462.92 I	
175902 12/02/11	000008 VISITING NURSE SERVICE	RUEDA, INES	13.75		200.48 I	
		CUSTOMER	45.50	0.00	663.40	
		CATEGORY	45.50	0.00	663.40	

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTEI	₹		1 - 253 ING HOMEW/O WALLS (LT K ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS T	AX AMT AMO	JNT TYP SURPLUS
175903 12/02/11 175904 12/02/11	000008 VISITING NURSE SERVIC 000008 VISITING NURSE SERVIC	- ,	18.00 12.00	262 174	
		CUSTOMER	30.00	0.00 437	.40
		 CATEGORY	30.00	0.00 437	.40

RUN DATE 12/07/13 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - ADU ADULT BILL WEEK ENDIN	254 G 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
175905 12/02/13	000008	VISITING NURSE SERVICE	RUSSO, MONICA	17.50		255.15 I	
			CATEGORY	17.50	0.00	255.15	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - LTC NURSING HOI BILL WEEK ENDII	255 MEW/O WALLS (LT NG 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT T	YP SURPLUS
175906 11/25/11 175907 12/02/11 175908 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SAAVEDRA, STELL SAAVEDRA, STELL SAAVEDRA, STELL	6.00 19.75 12.00		87.48 287.96 174.96	[ [ [
			CUSTOMER	37.75	0.00	550.40	
			CATEGORY	37.75	0.00	550.40	

RUN DATE 12/07/11 SALES JRNL # 0258			REG NY NY			PAGE 1 - 25 CCL CONGREGATE CAR	
BALLS GIAVE # 0250	100 001		SALES REGISTER			BILL WEEK ENDING	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175909 12/02/11 175910 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	30.00 12.00		437.40 I 174.96 I	
			CUSTOMER	42.00	0.00	612.36	
			CATEGORY	42.00	0.00	612.36	

RUN DATE 12/07/11 - SUP SU	NNYSIDE CITYWIDE				PAGE 1 - 257
SALES JRNL # 0258 LOC 00	1 SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
	S	ALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE CUST N	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175911 12/02/11 000008	VISITING NURSE SERVICE	SALADIN, MARIA	46.00		670.68 I
175912 12/02/11 000008	VISITING NURSE SERVICE	SALADIN, MARIA	16.00		233.28 I
		CUSTOMER	62.00	0.00	903.96
		CATEGORY			002.06
		CATEGORY	62.00	0.00	903.96

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 LTC NURSING 1 BILL WEEK EN	HOMEW	•
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175913 12/02/11 175914 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		23.75 11.75		346.28 171.32	I I	
			CUSTOMER	35.50	0.00	517.60		
			CATEGORY	35.50	0.00	517.60		

	E 12/07/11 -	- SUP SUNN	TYSIDE CITYWIDE	DEC MY MY			-	- 25	59
SALES UR	ML # 0258	TOC 001	SUNNYSIDE CITYWIDE	REGNY NY ALES REGISTER			VCP CHOICE LE		12/09/11
			2				5111 M111 1111	-11.0	12/05/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175915	12/02/11	000008	VISITING NURSE SERVICE	SALVUCCI, YOLAN	8.00		116.64	т	
175916	12/02/11	000008	VISITING NURSE SERVICE	SALVUCCI, YOLAN	8.00		116.64	T	
175917	12/02/11	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	12.00		174.96	Ī	
175918	12/02/11	000008	VISITING NURSE SERVICE	SAMPOGNA, LUCY	8.00		116.64	I	
175919	12/02/11	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	28.00		408.24	I	
175920	12/02/11	800000	VISITING NURSE SERVICE	SANCHEZ, LIDIA	14.00		204.12	I	
				CUSTOMER	78.00	0.00	1,137.24		
				CATECODY	79 00	0.00	1 127 24		
1				CATEGORY	78.00	0.00	1,137.24		

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 260 CCL CONGREGATE CARE PROGRAM BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175921 11/11/11 175922 12/02/11 175923 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SANCHEZ, MARIA	6.00 18.00 12.00		87.48 I 262.44 I 174.96 I
			CUSTOMER	36.00	0.00	524.88
			CATEGORY	36.00	0.00	 524.88

RUN DATE 12	/07/11 - SUP SUN	NNYSIDE CITYWIDE				PAGE 1	- 2	61
SALES JRNL	# 0258 LOC 001		REG NY NY			VCP CHOICE L		
		\$	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE CUST NO	O CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175924 12	2/02/11 000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	13.75		200.48	I	
175925 12	2/02/11 000008	VISITING NURSE SERVICE	SANCHEZ, NILSA	8.00		116.64	I	
			CUSTOMER	21.75	0.00	317.12		
			CATEGORY	21.75	0.00	317.12		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 ADU ADULT BILL WEEK EN	- 2 DING	62 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175926 12/02/11 175927 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	SANDOVAL, FANNY SANDOVAL, FANNY	11.75 6.00		171.32 87.48	I I	
			CUSTOMER	17.75	0.00	258.80		
			CATEGORY	17.75	0.00	258.80		

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 263 VCP CHOICE LHCSA
		5	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175928 11/25/11	800000	VISITING NURSE SERVICE	SCOTT, CATHERIN	3.75		54.68 I
175929 12/02/11 175930 12/02/11	800000 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	SCOTT, CATHERIN SCOTT, CATHERIN	12.00 11.00		174.96 I 160.38 I
175931 12/02/11	000008	VISITING NURSE SERVICE	SEGOVIA, BEATRI	1.00		14.58 I
			CUSTOMER	27.75	0.00	404.60
			CATEGORY	27.75	0.00	404.60

RUN DATE 12/07/11 - SUP SU	UNNYSIDE CITYWIDE				PAGE 1 - 264
SALES JRNL # 0258 LOC 00	01 SUNNYSIDE CITYWIDE REG 1	NY NY			ADU ADULT
	SALES	SREGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE CUST N	NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175932 12/02/11 000008	8 VISITING NURSE SERVICE	SEGOVIA, BEATRI	6.00		87.48 I
		CATEGORY	6.00	0.00	87.48

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 265
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT
			SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175933 11/25/11	000008	VISITING NURSE SERVICE	SEO, INJA	6.00		87.48 I
175934 12/02/11	800000	VISITING NURSE SERVICE	SEO, INJA	24.00		349.92 I
175935 12/02/11	800000	VISITING NURSE SERVICE	SEO, INJA	12.00		174.96 I
			CUSTOMER	42.00	0.00	612.36
			CATEGORY	42.00	0.00	612.36

			YSIDE CITYWIDE				11102	- 2	66
SALES JR	NL # 0258	TOG 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L		10/00/11
			S	ALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175936	11/11/11	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	7.75		113.00	I	
175937	12/02/11	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	39.75		579.56	I	
175938	12/02/11	000008	VISITING NURSE SERVICE	SERAFIN, WALTER	7.75		113.00	I	
175939	12/02/11	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	40.00		583.20	I	
175940	12/02/11	800000	VISITING NURSE SERVICE	SERRANO, AGUEDA	16.00		233.28	I	
175941	11/25/11	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	7.00		102.06	I	
175942	12/02/11	800000	VISITING NURSE SERVICE	SHANNON, ELNORA	27.25		397.31	I	
175943	12/02/11	000008	VISITING NURSE SERVICE	SHANNON, ELNORA	14.00		204.12	I	
175944	12/02/11	800000	VISITING NURSE SERVICE	SIFFETI, ROHAFZ	4.00		58.32	I	
				CUSTOMER	163.50	0.00	2,383.85		
				CATEGORY	163.50	0.00	2,383.85		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 267 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
175945 12/02/11 175946 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		30.00 12.00	437.40 I 174.96 I
		CUSTOMER	42.00 0.00	612.36
		CATEGORY	42.00 0.00	612.36

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - VCP CHOICE LHCS BILL WEEK ENDIN	SA
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	YP SURPLUS
175947 12/02/11 175948 12/02/11 175949 12/02/11 175950 12/02/11	000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	SINGH, BADREE SINGH, BADREE SINGH, JAMOONIE SINGH, JAMOONIE	18.00 12.00 9.00 6.00		262.44 1 174.96 1 131.22 1 87.48 1	[ [ ] [
			CUSTOMER	45.00	0.00	656.10	
			CATEGORY	45.00	0.00	656.10	

			YSIDE CITYWIDE				PAGE 1 - 269	
SALES JRN	IL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			ADU ADULT BILL WEEK ENDING 12/09/1	1
TATIOTORU	DAME	CHICE NO	CHICHOMED NAME	DEFEDENCE	HOHDG	max ave	AMOUNTE THE GLIDDLIN	a
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	5
175951	12/02/11	800000	VISITING NURSE SERVICE	SMELTZER, ESTEL	9.00		131.22 I	
								_
				CATEGORY	9.00	0.00	131.22	

RUN DATE 12/07/11 - SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 CCL CONGREGAT	- 2	
	200 001		SALES REGISTER			BILL WEEK EN		
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175952 12/02/11	000008	VISITING NURSE SERVICE		4.00		58.32	I	
175953 12/02/11	800000	VISITING NURSE SERVICE	SOPCHEK, SAMUEL	4.00		58.32	Т	
			CUSTOMER	8.00	0.00	116.64		
			CATEGORY	8.00	0.00	116.64		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	R		PAGE 1 - 271 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175954 12/02/11 175955 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE		18.00 12.00		262.44 I 174.96 I
		CUSTOMER	30.00	0.00	437.40
		- CATEGORY	30.00	0.00	437.40

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 272 ADU ADULT BILL WEEK ENDING 12	/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP S	URPLUS
175956 12/02/11 175957 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	6.00 6.00		87.48 I 87.48 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 273 VCP CHOICE LHCSA BILL WEEK ENDING	3 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175958 11/18/11 175959 12/02/11 175960 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	STAMBOULIDIS, V	6.50 40.00 16.00		94.77 I 583.20 I 233.28 I	
			CUSTOMER	62.50	0.00	911.25	
			CATEGORY	62.50	0.00	911.25	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 HOA HOSPICE A BILL WEEK ENI	-	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPL	US
175961 12/02/11 175962 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	STEIN, STEPHANI STEIN, STEPHANI	15.00 6.00		218.70 87.48	I I	
			CUSTOMER	21.00	0.00	306.18		
			CATEGORY	21.00	0.00	306.18		

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 275 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175963 12/02/11 175964 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	•	6.00 2.00		87.48 I 29.16 I
		CUSTOMER	8.00	0.00	116.64
		CATEGORY	8.00	0.00	116.64

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 276
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175965 12/02/11	000008	VISITING NURSE SERVICE	STICKELL, BLANC	20.50		298.90 I
175966 12/02/11	800000	VISITING NURSE SERVICE	STICKELL, BLANC	7.00		102.06 I
175967 12/02/11	800000	VISITING NURSE SERVICE	STROBL, ALFRED	24.00		349.92 I
175968 12/02/11	800000	VISITING NURSE SERVICE	STROBL, ALFRED	6.00		87.48 I
			CUSTOMER	57.50	0.00	838.36
			CATEGORY	57.50	0.00	838.36

RUN DATE 12/07/11	- SUP SUNN	TYSIDE CITYWIDE				PAGE 1 - 277	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOMEW/O WALLS (LT	
		:	SALES REGISTE	R		BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
175969 11/25/11	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	4.00		58.32 I	
175970 12/02/11	000008	VISITING NURSE SERVICE	SUAREZ, TULIA	16.00		233.28 I	
175971 12/02/11	800000	VISITING NURSE SERVICE	SUAREZ, TULIA	8.00		116.64 I	
			CUSTOMER	28.00	0.00	408.24	
			CATEGORY	28.00	0.00	408.24	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 278 ADU ADULT BILL WEEK ENDING 12/09/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
175972 12/02/11 175973 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		6.00 5.00		87.48 I 72.90 I	
			CUSTOMER	11.00	0.00	160.38	
			CATEGORY	11.00	0.00	160.38	

RUN DATE 12/07/11 -						PAGE 1 - 279	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	0.400.411
			SALES REGISTER			BILL WEEK ENDING 1	2/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175974 12/02/11	000008	VISITING NURSE SERVICE	TABOADA, ELIZAB	39.75		579.56 I	
175975 12/02/11	800000	VISITING NURSE SERVICE	TABOADA, ELIZAB	15.75		229.64 I	
			CUSTOMER	55.50	0.00	809.20	
			002101111	22.50	0.00		
			CATEGORY	55.50	0.00	809.20	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 28 CCL CONGREGATE CAR BILL WEEK ENDING	E PROGRAM
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175976 12/02/11 175977 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	6.00 5.25		87.48 I 76.55 I	
			CUSTOMER	11.25	0.00	164.03	
			CATEGORY	11.25	0.00	164.03	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 281
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING	HOMEW/O WALLS (LT
		5	SALES REGISTER			BILL WEEK EN	DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
175978 12/02/11	000008	VISITING NURSE SERVICE	TADDEO, LENA	40.00		583.20	I
175979 12/02/11	800000	VISITING NURSE SERVICE	TADDEO, LENA	15.75		229.64	I
			CUSTOMER	55.75	0.00	812.84	
			CATEGORY	55.75	0.00	812.84	

RUN DATE 12/07/11	- SUP SUNNYSIDE CITYWIDE				PAGE 1 -	282
SALES JRNL # 0258	LOC 001 SUNNYSIDE CITY	WIDE REG NY N	Y		VCP CHOICE LHCSA	L
		SALES RE	GISTER		BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFER	ENCE HOURS	TAX AMT	AMOUNT TYP	SURPLUS
175980 12/02/11	000008 VISITING NURSE	SERVICE TAVANO	, SILVIA 40.00		583.20 I	
175981 12/02/11	000008 VISITING NURSE	SERVICE TAVANO	, SILVIA 16.00		233.28 I	
			CUSTOMER 56.00	0.00	816.48	
		(	CATEGORY 56.00	0.00	816.48	

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNN	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 283 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
		•	SALES REGISIER			BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175982 12/02/11 175983 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 8.00		174.96 I 116.64 I
			CUSTOMER	20.00	0.00	291.60
			CATEGORY	20.00	0.00	291.60

			YSIDE CITYWIDE				PAGE 1 -	284
SALES	JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
			:	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOI	CE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
17598	4 12/02/11	800000	VISITING NURSE SERVICE	TAWADROUS, ZENA	2.00		29.16 I	
				CATEGORY	2.00	0.00		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 285 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175985 12/02/11 175986 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	TEJADA, BALDOME TEJADA, BALDOME	12.00 8.00		174.96 I 116.64 I
			CUSTOMER	20.00	0.00	291.60
			CATEGORY	20.00	0.00	291.60

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 HOA HOSPICE . BILL WEEK EN	-	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175987 12/02/11 175988 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	TEMBELIS, DAPHN TEMBELIS, DAPHN	9.00 6.00		131.22 87.48	I	
			CUSTOMER	15.00	0.00	218.70		
			CATEGORY	15.00	0.00	218.70		

RUN DATE 12/07/11 SALES JRNL # 0258	- SUP SUNN LOC 001	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
175989 12/02/11 175990 12/02/11 175991 12/02/11 175992 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TERZIAN, ASDGHI TERZIAN, ASDGHI TINOCO, INES TINOCO, INES	25.00 10.00 35.00 7.00		364.50 I 145.80 I 510.30 I 102.06 I	
			CUSTOMER	77.00	0.00	1,122.66	
			CATEGORY	77.00	0.00	1,122.66	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 288 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
175993 12/02/11 175994 12/02/11 175995 12/02/11 175996 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	TISHCOFF, HERTA TISHCOFF, HERTA TORO VEGA, LUZV TORO VEGA, LUZV	3.00 6.00 12.00 8.00		43.74 I 87.48 I 174.96 I 116.64 I
			CUSTOMER	29.00	0.00	422.82
			CATEGORY	29.00	0.00	422.82

	12/07/11 NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LE	- 2	89
SALES UK	тип # 0230	TOC 001		ALES REGISTER			BILL WEEK ENI		12/09/11
			2				D111 (1111 1111	2110	12,00,11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
175007	10/00/11	000000	VICIALNO MIDOR CEDVICE	MODO DIDA	FO 7F		071 16	_	
175997	12/02/11	000008	VISITING NURSE SERVICE	TORO, PURA	59.75		871.16	Т	
175998	12/02/11	800000	VISITING NURSE SERVICE	TORO, PURA	24.00		349.92	I	
175999	12/02/11	800000	VISITING NURSE SERVICE	TORRES, EMELINA	15.00		218.70	I	
176000	12/02/11	000008	VISITING NURSE SERVICE	TORRES, EMELINA	10.00		145.80	I	
176001	12/02/11	800000	VISITING NURSE SERVICE	TORRES, LUZ M	38.50		561.33	I	
176002	12/02/11	000008	VISITING NURSE SERVICE	TORRES, LUZ M	19.75		287.96	I	
				CUSTOMER	167.00	0.00	2,434.87		
				COSTONER	107.00	0.00	2,134.07		
				CATEGORY	167.00	0.00	2,434.87		

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTE	l R		PAGE 1 - 290 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176003 12/02/11 176004 12/02/11	000008 VISITING NURSE SERVICE 0000008 VISITING NURSE SERVICE	,	30.00 12.00		437.40 I 174.96 I
		CUSTOMER	42.00	0.00	612.36
		- CATEGORY	42.00	0.00	612.36

RUN DATE 12/07/11 -						-	91
SALES JRNL # 0258	TOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	12/09/11
		· ·	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176005 12/02/11	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	12.00		174.96 I	
176006 12/02/11	000008	VISITING NURSE SERVICE	TRUJILLO, AMPAR	8.00		116.64 I	
176007 12/02/11	000008	VISITING NURSE SERVICE	TSOLISOS, FOTIN	32.00		466.56 I	
176008 12/02/11	800000	VISITING NURSE SERVICE	TSOLISOS, FOTIN	16.00		233.28 I	
			CUSTOMER	68.00	0.00	991.44	
			CATEGORY	68.00	0.00	991.44	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 292 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO C	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176009 12/02/11 176010 12/02/11		VISITING NURSE SERVICE VISITING NURSE SERVICE		12.00 8.00		174.96 I 116.64 I
			CUSTOMER	20.00	0.00	291.60
			CATEGORY	20.00	0.00	 291.60

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	293
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176011 11/25/11	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	8.00		116.64 I	
176012 12/02/11	800000	VISITING NURSE SERVICE	TZOUMAS, EFFIE	40.00		583.20 I	
176013 12/02/11	000008	VISITING NURSE SERVICE	TZOUMAS, EFFIE	16.00		233.28 I	
176014 12/02/11	000008	VISITING NURSE SERVICE	UGURLUYAN, KARA	24.00		349.92 I	
			CUSTOMER	88.00	0.00	1,283.04	
			CATEGORY	88.00	0.00	1,283.04	

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 294 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176015 12/02/11 176016 12/02/11		ISITING NURSE SERVICE	URBINA, ANA URBINA, ANA	20.00		291.60 I 145.80 I
			CUSTOMER	30.00	0.00	437.40
			CATEGORY	30.00	0.00	437.40

RUN DATE I		SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	REGNY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END		/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURP	LUS
	12/02/11 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENCIANO-ROJ, VALENCIANO-ROJ,	16.00 8.00		233.28 116.64	I I	
				CUSTOMER	24.00	0.00	349.92		
				CATEGORY	24.00	0.00	349.92		

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 296 CCL CONGREGATE CARE PROGRA BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	3
176019 11/11/11 176020 12/02/11 176021 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VALENTI, HELEN	2.00 6.00 2.00		29.16 I 87.48 I 29.16 I	
			CUSTOMER	10.00	0.00	145.80	-
			CATEGORY	10.00	0.00	145.80	-

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY			LTC NURSING HOME	
		\$	SALES REGISTE	R		BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176022 12/02/11	000008	VISITING NURSE SERVICE	VAROL, ELMAS	4.00		58.32 I	
176023 12/02/11	800000	VISITING NURSE SERVICE	VAROL, ELMAS	2.00		29.16 I	
176024 12/02/11	800000	VISITING NURSE SERVICE	VAROL, MUSTAFA	4.00		58.32 I	
176025 12/02/11	000008	VISITING NURSE SERVICE	VAROL, MUSTAFA	2.00		29.16 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

	12/07/11 - NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHO	
				SALES REGISTER			BILL WEEK END	, ,
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT 7	TYP SURPLUS
176026 176027	12/02/11 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	~ ~ ,	28.00 14.00		408.24 204.12	I
170027	12/02/11	000000	VISITING NORSE SERVICE	~ '				
				CUSTOMER	42.00	0.00	612.36	
				CATEGORY	42.00	0.00	612.36	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 - 299 LTC NURSING HOMEW/O WALL	S (LT
		\$	SALES REGISTER			BILL WEEK ENDING 12/09/	11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPL	JUS
176028 12/02/11	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	23.00		335.34 I	
176029 12/02/11	000008	VISITING NURSE SERVICE	VASQUEZ, EUSTAG	10.00		145.80 I	
176030 12/02/11	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	15.00		218.70 I	
176031 12/02/11	800000	VISITING NURSE SERVICE	VASQUEZ, RAPHAE	3.00		43.74 I	
			CUSTOMER	51.00	0.00	743.58	
			CATEGORY	51.00	0.00	743.58	

	12/07/11 - NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE S	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
176032 176033 176034	11/25/11 12/02/11 12/02/11	000008 000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE VISITING NURSE SERVICE	VAZIRANI, CHAND VAZIRANI, CHAND VAZIRANI, CHAND	4.00 11.50 7.75		58.32 167.68 113.00	I I I
				CUSTOMER	23.25	0.00	339.00	
				CATEGORY	23.25	0.00	339.00	

	- SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTI	E R		PAGE 1 - 301 LTC NURSING HOMEW/O WALLS (LT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176035 12/02/11 176036 12/02/11	000008 VISITING NURSE SERV	~ ~ ,	28.00 12.00		408.24 I 174.96 I
		CUSTOMER	40.00	0.00	583.20
		CATEGORY	40.00	0.00	583.20

	12/07/11 - 2NL # 0258	- SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE LH	- 30 CSA	2
	,, , , , ,		S	SALES REGISTER			BILL WEEK END	ING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176037 176038	12/02/11 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	VELASQUEZ, NELL VELASQUEZ, NELL	12.00 8.00		174.96 116.64	I I	
				CUSTOMER	20.00	0.00	291.60		
				CATEGORY	20.00	0.00	291.60		

RUN DATE 12/07/11 - SALES JRNL # 0258		PAGE 1 - 3 LTC NURSING HOMEW BILL WEEK ENDING				
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176039 12/02/11 176040 12/02/11	000008 VISITING NURSE SERVICE 000008 VISITING NURSE SERVICE	- ,	25.00 14.00		364.50 I 204.12 I	
		CUSTOMER	39.00	0.00	568.62	
		CATEGORY	39.00	0.00	568.62	

RUN DATE 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE				PAGE 1 - 30	4
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE LHCSA	
		S	SALES REGISTER			BILL WEEK ENDING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176041 12/02/11	000008	VISITING NURSE SERVICE	VERAS, JUANA	24.00		349.92 I	
176042 12/02/11	800000	VISITING NURSE SERVICE	VERAS, JUANA	16.00		233.28 I	
			CUSTOMER	40.00	0.00	583.20	
			CATEGORY	40.00	0.00	583.20	

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 305	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/09/1	1
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLU	S
176043 12/02/11	000008	VISITING NURSE SERVICE	VIGGIANO, DOROT	4.00		58.32 I	
176044 12/02/11	800000	VISITING NURSE SERVICE	VIGGIANO, DOROT	4.00		58.32 I	
			CUSTOMER	8.00	0.00	116.64	_
			CATEGORY	8.00	0.00	116.64	_

RUN DATE	12/07/11 -	SUP SUNN	YSIDE CITYWIDE				PAGE 1 -	306
SALES JRN	1L # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			HOA HOSPICE ADU	
			\$	SALES REGIS	TER		BILL WEEK ENDIN	NG 12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176045	12/02/11	800000	VISITING NURSE SERVICE	VIGORITO, ANN	18.50		269.73	<u>.</u> -
				CATEGOR	 RY 18.50	0.00	269.73	

RUN DATE 12/07/11 - SALES JRNL # 0258	SUP SUNNYSIDE CITYWI LOC 001 SUNNYSIDE					PAGE 1 ADU ADULT BILL WEEK END		)7 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NA	AME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176046 12/02/11 176047 12/02/11 176048 12/02/11	000008 VISITING NU	URSE SERVICE	VILLA, AGNES VILLA, AGNES VILLADA, MARIA	3.00 3.00 1.00		43.74 43.74 14.58	I I I	
			CUSTOMER	7.00	0.00	102.06		
			CATEGORY	7.00	0.00	102.06		

RUN DATE 12/0	7/11 - SUP SUNN	NYSIDE CITYWIDE				PAGE 1	- 3	08
SALES JRNL #	0258 LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			VCP CHOICE L	HCSA	
		:	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DA	TE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176049 12/0	2/11 000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	18.00		262.44	I	
176050 12/0	2/11 000008	VISITING NURSE SERVICE	VILLAPOL, ANNA	6.00		87.48	I	
			CUSTOMER	24.00	0.00	349.92		
			CATEGORY	24.00	0.00	349.92		

RUN DATE 12/07/13						11102	- 30	
SALES JRNL # 0258	B LOC 001		REG NY NY			CCL CONGREGAT		
			SALES REGISTER			BILL WEEK ENI	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176051 12/02/13	1 000008	VISITING NURSE SERVICE	VISCONTI, JASON	2.00		29.16	I	
176052 12/02/13	1 000008	VISITING NURSE SERVICE	VISCONTI, JASON	2.00		29.16	I	
			CUSTOMER	4.00	0.00	58.32		
			COSTOMER	4.00	0.00	30.32		
			CATEGORY	4.00	0.00	58.32		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	-	NY E G I S T E	R		LTC NURSING H	- 310 HOMEW/O WALLS (LT DING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFE	RENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176053 12/02/11 176054 12/02/11	000008 000008	VISITING NURSE SERVICE VISITING NURSE SERVICE	,	CARMEN CARMEN	18.00 6.00		262.44 87.48	I I
				CUSTOMER	24.00	0.00	349.92	
				 CATEGORY	24.00	0.00	349.92	

		12/07/11 - L # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 3 ADU ADULT BILL WEEK ENDING	12/09/11
INV	VOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP	SURPLUS
176	6055 1	12/02/11	000008	VISITING NURSE SERVICE	VIVACQUA, EMMA	33.00		481.14 I	
					CATEGORY	33.00	0.00	481.14	

-	12/07/11 - NL # 0258	- SUP SUNN LOC 001	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY			PAGE 1 VCP CHOICE L	- 3 HCSA	12
			S	ALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176056	12/02/11	800000	VISITING NURSE SERVICE	VIVACOUA, EMMA	20.00		291.60	I	
176057	10/28/11	800000	VISITING NURSE SERVICE	WALLE, ILEANA	6.50		94.77	I	
176058	12/02/11	800000	VISITING NURSE SERVICE	WALLE, ILEANA	12.00		174.96	I	
176059	12/02/11	800000	VISITING NURSE SERVICE	WALLE, ILEANA	8.00		116.64	I	
176060	12/02/11	000008	VISITING NURSE SERVICE	WEBB, ANA	18.00		262.44	I	
176061	12/02/11	800000	VISITING NURSE SERVICE	WEBB, ANA	11.50		167.68	I	
				CUSTOMER	76.00	0.00	1,108.09		
				CATEGORY	 76.00	0.00	1,108.09		

RUN DATE 12/07/11 -		YSIDE CITYWIDE				PAGE 1 - 313	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			ADU ADULT	
		S	SALES REGISTER			BILL WEEK ENDING 12/09/11	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS	
176062 12/02/11	000008	VISITING NURSE SERVICE	WEINHAUS, SUSAN	9.50		138.51 I	
176063 12/02/11	800000	VISITING NURSE SERVICE	WEINHAUS, SUSAN	10.00		145.80 I	
176064 12/02/11	800000	VISITING NURSE SERVICE	WERNER, PHYLLIS	6.00		87.48 I	
176065 12/02/11	800000	VISITING NURSE SERVICE	WERNER, PHYLLIS	2.75		40.10 I	
			CUSTOMER	28.25	0.00	411.89	
			CATEGORY	28.25	0.00	411.89	

RUN DATE 12/07/11 SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 VCP CHOICE LH BILL WEEK END	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176066 12/02/13 176067 12/02/13		VISITING NURSE SERVICE VISITING NURSE SERVICE	YAGHDJIAN, SIRA YAGHDJIAN, SIRA	8.00		116.64 116.64	I
			CUSTOMER	16.00	0.00	233.28	
			CATEGORY	16.00	0.00	233.28	

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1 - 315 CCL CONGREGATE CARE PR BILL WEEK ENDING 12/0	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SUF	RPLUS
176068 12/02/11 176069 12/02/11	800000 800000	VISITING NURSE SERVICE VISITING NURSE SERVICE	, -	9.00 3.00		131.22 I 43.74 I	
			CUSTOMER	12.00	0.00	174.96	
			CATEGORY	12.00	0.00	174.96	

RUN DATE 1 SALES JRNI	12/07/11 - SUP L # 0258 LOC		ITYWIDE SIDE CITYWIDE	REG NY S A L E S	NY REGIS	STER			PAGE 1 VCP CHOICE L BILL WEEK EN		16 12/09/11
INVOICE#	DATE CUS	T NO CUSTOME	ER NAME	I	REFERENCE		HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
	, . ,		NG NURSE SERVIC		OUSSEFF, NA		5.00 2.50		72.90 36.45	I	
					CUSTO	MER	7.50	0.00	109.35		
					CATEG	ORY	7.50	0.00	109.35		

RUN DATE 12/07/11 - SALES JRNL # 0258	- SUP SUNN LOC 001	SUNNYSIDE CITYWIDE	REG NY NY A L E S R E G I S T E R			PAGE 1 - 317 ADU ADULT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176072 12/02/11 176073 12/02/11 176074 11/25/11 176075 12/02/11 176076 12/02/11	000008 000008 000008 000008	VISITING NURSE SERVICE	ZAMBRANO, CRUZ ZAMBRANO, CRUZ ZAMBRANO, VICTO ZAMBRANO, VICTO ZAMBRANO, VICTO	6.00 4.00 3.00 16.00 4.00		87.48 I 58.32 I 43.74 I 233.28 I 58.32 I
			CUSTOMER	33.00	0.00	481.14
			CATEGORY	33.00	0.00	481.14

RUN DATE 12/07/11 - SUP SUNNYSIDE CITYWIDE

SALES JRNL # 0258 LOC 001 SUNNYSIDE CITYWIDE REG NY NY

GUI GUILDNET

SALES DE CISTER

PILL MEEK ENDING 12/09/11

011220 014	,, 0230	200 001	5011115151 011111151	SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE  ACERNO, CLAIRE ALI, AMRUNISSA AMABILE, ANTOIN AYALA, ENRIQUE BEGUM, JAMILA BRADLEY, MARGAR BUCARO, CONCETT CEPEDA, TOMASA COLAVITTI, JEAN DIAZ, ALICIA DONOSO, MARGARE EARLINGTON, ALB ECKMAN, LOIS ESCOBAR, DOMING ESPINOZA, MARIA EXPOSITO, ALFON FELICIANO, JOAN FELICIANO, JOAN FELICIANO, JOAN FELICIANO, JOAN FERNANDEZ, ANA GREENSPAN, ALIC JIMENEZ, EUGENI JIMENEZ, EUGENI JIMENEZ, EUGENI JIMENEZ, EUGENI JOHNSON, DOROTH LATVIS, CHARLES MANGRAY, KARMAD MARTINEZ, EMMA MARTINEZ, EMMA MARTINEZ, CHORI MICHEL, DOROTHY MOSCICKA, JADWI MUSCAT, CARMEN NETTLES, DONNA NEWBOLD, RAMONA NEWBOLLD, RAMONA NEWBO	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176077	11/11/11	000010	GUILDNET	ACERNO, CLAIRE	20.00		265.60	I	
176078	12/02/11	000010	GUILDNET	ALI, AMRUNISSA	20.00		265.60	I	
176079	12/02/11	000010	GUILDNET	AMABILE, ANTOIN	2.00		360.00	I	
176080	11/25/11	000010	GUILDNET	AYALA, ENRIQUE	64.00		849.92	I	
176081	12/02/11	000010	GUILDNET	BEGUM, JAMILA	72.00		956.16	I	
	12/02/11	000010	GUILDNET	BRADLEY, MARGAR	7.00		1,260.00	I	
	12/02/11	000010	GUILDNET	BUCARO, CONCETT	45.00		597.60	I	
176084	12/02/11	000010	GUILDNET	CEPEDA, TOMASA	30.00		398.40	I	
176085	12/02/11	000010	GUILDNET	COLAVITTI, JEAN	56.00		743.68	I	
	12/02/11	000010	GUILDNET	DIAZ, ALICIA	31.00		411.68	I	
	12/02/11	000010	GUILDNET	DIAZ, ALICIA	14.00		185.92	I	
	12/02/11	000010	GUILDNET	DONOSO, MARGARE	24.00		318.72	I	
	12/02/11	000010	GUILDNET	EARLINGTON, ALB	41.00		544.48	I	
	12/02/11	000010	GUILDNET	ECKMAN, LOIS	1.00		180.00	I	
	11/25/11	000010	GUILDNET	ESCOBAR, DOMING	6.00		79.68	I	
	12/02/11	000010	GUILDNET	ESPINOZA, MARIA	45.00		597.60	I	
	12/02/11	000010	GUILDNET	EXPOSITO, ALFON	38.00		504.64	I	
	12/02/11	000010	GUILDNET	FELICIANO, JOAN	26.00		345.28	Ī	
	12/02/11	000010	GUILDNET	FELICIANO, JOAN	12.00		159.36	I	
	12/02/11	000010	GUILDNET	FERNANDEZ. ANA	28.00		371.84	Ī	
	12/02/11	000010	GUILDNET	GREENSPAN ALIC	38.00		504.64	Ī	
	11/18/11	000010	CULLDNET	TIMENEZ EUGENI	79 50		1 055 76	Ī	
	12/02/11	000010	GUILDNET	JIMENEZ, EUGENI	22.00		292.16	Ī	
	12/02/11	000010	CULLDNET	JOHNSON DOROTH	64 00		849 92	Ī	
	12/02/11	000010	GUILDNET	LATVIS. CHARLES	7.00		1.260.00	Ī	
	12/02/11	000010	GUILDNET	MANGRAY, KARMAD	40.00		531.20	Ī	
	12/02/11	000010	GUILDNET	MARTINEZ, EMMA	36.00		478.08	Ī	
	11/18/11	000010	GUILDNET	MARTINEZ, GLORI	35.00		464.80	I	
	12/02/11	000010	GUILDNET	MICHEL, DOROTHY	56.00		743.68	I	
	12/02/11	000010	GUILDNET	MOSCICKA, JADWI	32.00		424.96	I	
	12/02/11	000010	GUILDNET	MUSCAT. CARMEN	25.00		332.00	I	
	12/02/11	000010	GUILDNET	NETTLES DONNA	12.00		159.36	I	
	12/02/11	000010	GUILDNET	NEWBOLD RAMONA	15.00		199.20	Ī	
	12/02/11	000010	GUILDNET	NEWBOLD RAMONA	10.00		132.80	Ī	
	11/25/11	000010	GUILDNET	NISHIMURA ALBE	72.00		956.16	Ī	
	12/02/11	000010	GUILDNET	NUNEZ. ANGELINA	20.00		265.60	Ī	
	12/02/11	000010	GUILDNET	ORTIZ, LAURA	63.00		836.64	I	
	12/02/11	000010	GUILDNET	PAPHITIS, RICHA	40.00		531.20	Ī	
	12/02/11	000010	GUILDNET	PAZIOULIS, GEOR	18.00		239.04	Ī	
	12/02/11	000010	GUILDNET	PAZTOULIS, KLEO	15.00		199.20	Ī	
	12/02/11	000010	CULLDNET	DENA WALESKA	40 00		531 20	Ī	
	12/02/11	000010	GUILDNET	PEREZ. MARTA	24.00		318.72	I	
	12/02/11	000010	GUILDNET	PICHARDO MARTA	54.00		717.12	I	
	12/02/11	000010	GUILDNET	PROANO. ALICTA	15.00		199.20	Ī	
	12/02/11	000010	GUILDNET	PROANO, ALICIA	6.00		79.68	I	
	12/02/11	000010	GUILDNET	PROANO BRIINO	33.00		438.24	Ī	
	12/02/11	000010	GUILDNET	PRYCE CLYDIA	16.00		212.48	Ī	
	12/02/11	000010	GUILDNET	RIVAS. GERTRIDI	20.00		265.60	Ī	
	12/02/11	000010	GUILDNET	RODRIGUEZ, HOLG	49.00		650.72	Ī	
0110	,,			1102112022, 11020	12.00		333.72	_	

			YSIDE CITYWIDE	556.15					- 33	19
SALES JRNL	# 0258	TOG 001	SUNNYSIDE CITYWIDE	REG NY		D.		GUI GUILDNET	TNG	10/00/11
				SALES	REGISTE	R		BILL WEEK ENI	JING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176126 1	12/02/11	000010	GUILDNET	F	ROJAS, ANGEL	9.00		119.52	I	
176127 1	12/02/11	000010	GUILDNET	F	ROJAS, ANGEL	6.00		79.68	I	
176128 1	12/02/11	000010	GUILDNET	F	ROJAS, HAYDEE	12.00		159.36	I	
176129 1	12/02/11	000010	GUILDNET	F	ROJAS, HAYDEE			106.24	I	
	12/02/11	000010	GUILDNET	S	SALJANIN, DILJA			810.08	I	
176131 1	1/25/11	000010	GUILDNET	S	SANCHEZ, ELIZAB	49.25		654.04	I	
176132 1	12/02/11	000010	GUILDNET	S	SHELTON, AGUEDA	35.00		464.80	I	
176133 1	L2/02/11	000010	GUILDNET	S	SHIRKES, MIRIAM	50.00		664.00	I	
176134 1	L2/02/11	000010	GUILDNET	S	SHIRKES, MIRIAM	20.00		265.60	I	
176135 1	L1/25/11	000010	GUILDNET	7	TOROSSIAN, PARI			318.72	I	
176136 1	L2/02/11	000010	GUILDNET	7	/ILLACRES, LUZ	8.00		106.24	I	
176137 1	L2/02/11	000010	GUILDNET	7	/LAHOS, MARIE	70.00		929.60	I	
176138 1	L2/02/11	000010	GUILDNET	V	VEISZ, KLARA	4.00		53.12	I	
176139 1	L2/02/11	000010	GUILDNET	V	HITLEY, MYRNA			159.36	I	
176140 1	L2/02/11	000010	GUILDNET	V	HITLEY, MYRNA	8.00		106.24	I	
176141 1	L2/02/11	000010	GUILDNET	7	I, CARLOS	24.00		318.72	I	
	12/02/11	000010	GUILDNET	7	YIANTSELIS, VIR	7.00		1,260.00	I	
	L2/02/11	000010	GUILDNET	2	ZARE, GLORIA	9.00		119.52	I	
176144 1	L2/02/11	000010	GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET GUILDNET	2	ZIANTSELIS, VIR ZARE, GLORIA ZUMAETA, FANNY	64.00		849.92	I	
					CUSTOMER	2,018.75		30,810.28		
					CATEGORY	2,018.75	0.00	30,810.28		

RUN DATE	E 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE	REG NY NY SALES REGISTE			PAGE 1	- 3	20
SALES JE	RNL # 0258	TOG 001	SUNNYSIDE CITYWIDE	REG NY NY	D		HES HEALTH F.	LRST.	10/00/11
				SALES REGISTE	K		DILL MEEV EN	JING	12/09/11
INVOICE#	‡ DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176145	12/02/11	000122	HEALTH FIRST	AUER, BARBARA	15.00		253.20	I	
176146	12/02/11	000122	HEALTH FIRST	BEGUM, MANWARA	26.00		438.88	I	
176147	12/02/11	000122	HEALTH FIRST	BHAIRO, KOWSILI	56.00		945.28	I	
176148	12/02/11	000122	HEALTH FIRST	BOWERS, DIANE	50.00		844.00	I	
176149	12/02/11	000122	HEALTH FIRST	CARMONA, LUZ	40.00		675.20	I	
176150	12/02/11	000122	HEALTH FIRST	CARRION, MARIA	60.00		1,012.80	I	
176151	12/02/11	000122	HEALTH FIRST	CEBALLOS, ANA	40.00		675.20	I	
176152	12/02/11	000122	HEALTH FIRST	CHARITAR, RAMKA	30.00		506.40	I	
176153	12/02/11	000122	HEALTH FIRST	DORNELLAS, STEL	27.75		468.42	I	
176154	12/02/11	000122	HEALTH FIRST	ESPAILLAT, AMPA	20.00		337.60	I	
176155	12/02/11	000122	HEALTH FIRST	ESTEVES, JOSE	61.75		1,042.34	I	
176156	12/02/11	000122	HEALTH FIRST	FERGERSON, TINA	25.00		422.00	I	
176157	11/25/11	000122	HEALTH FIRST	FERRERA, FRANCI	18.00		303.84	I	
176158	12/02/11	000122	HEALTH FIRST	FONTANES, PEDRO	28.00		472.64	I	
176159	12/02/11	000122	HEALTH FIRST	FRANCISCO, RICH	56.00		945.28	I	
176160	12/02/11	000122	HEALTH FIRST	HENRY, BRENDA	12.00		202.56	I	
176161	12/02/11	000122	HEALTH FIRST	KAUR, HARBANS	48.50		818.68	I	
176162	12/02/11	000122	HEALTH FIRST	LARA, TOMASA	28.00		472.64	I	
176163	12/02/11	000122	HEALTH FIRST	LAZALA, GLADYS	83.00		1,401.04	I	
176164	12/02/11	000122	HEALTH FIRST	LOPEZ-RAMIREZ,	76.75		1,295.54	I	
176165	12/02/11	000122	HEALTH FIRST	MACARENA, SAHAR	63.00		1,063.44	I	
176166	12/02/11	000122	HEALTH FIRST	MARTIN, ARIANA	12.00		202.56	I	
176167	12/02/11	000122	HEALTH FIRST	RIVERA, CHRISTO	18.00		303.84	I	
176168	12/02/11	000122	HEALTH FIRST	RIVERA, EDDIE	18.00		308.70	I	
176169	12/02/11	000122	HEALTH FIRST	RODRIGUEZ, MARG	20.00		337.60	I	
176170	12/02/11	000122	HEALTH FIRST	RUIZ JR, SAMUEL	17.00		286.96	I	
176171	12/02/11	000122	HEALTH FIRST	SALAZAR, LUZ MA	56.00		945.28	I	
176172	12/02/11	000122	HEALTH FIRST	SALHUANA, YOLAN	16.00		270.08	I	
176173	11/25/11	000122	HEALTH FIRST	SPIVEY, PATRICI	8.00		135.04	I	
176174	11/25/11	000122	HEALTH FIRST	ST ROMAINE, CLA	76.00		1,282.88	I	
176175	12/02/11	000122	HEALTH FIRST	SURIEL, GERTRUD	28.00		472.64	I	
176176	12/02/11	000122	HEALTH FIRST	TEJADA, PAULA	29.50		497.96	I	
176177	12/02/11	000122	HEALTH FIRST	WILLIAMS, RODNE	14.00		236.32	I	
				REFERENCE  AUER, BARBARA BEGUM, MANWARA BHAIRO, KOWSILI BOWERS, DIANE CARMONA, LUZ CARRION, MARIA CEBALLOS, ANA CHARITAR, RAMKA DORNELLAS, STEL ESPAILLAT, AMPA ESTEVES, JOSE FERGERSON, TINA FERRERA, FRANCI FONTANES, PEDRO FRANCISCO, RICH HENRY, BRENDA KAUR, HARBANS LARA, TOMASA LAZALA, GLADYS LOPEZ-RAMIREZ, MACARENA, SAHAR MARTIN, ARIANA RIVERA, CHRISTO RIVERA, EDDIE RODRIGUEZ, MARG RUIZ JR, SAMUEL SALAZAR, LUZ MA SALHUANA, YOLAN SPIVEY, PATRICI ST ROMAINE, CLA SURIEL, GERTRUD TEJADA, PAULA WILLIAMS, RODNE  CUSTOMER	1,177.25	0.00	19,876.84		
				 CATEGORY	1,177.25	0.00	19,876.84		

RUN DATE 12/0	7/11 - SUP SUNI	NYSIDE CITYWIDE SUNNYSIDE CITYWIDE REG S A L E				PAGE 1	- 3	21
SALES JRNL # (	0258 LOC 001	SUNNYSIDE CITYWIDE REG	NY NY			NHP NEIGHBOR	HOOD 1	HEALTH
		SALE	S REGISTER	}		BILL WEEK EN	DING	12/09/11
INVOICE# DAT	re cust no	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176178 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS NEIGHB	ALIMED TIMADA	E2 00		001 61	I	
	9/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	ARMED, UMAKA	55.00		034.04	I	
176180 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	ARRIAK, SELINA	20.00		243.40	I	
	2/11 000120	NEIGHBURHOOD HEALTH PROVIDERS	ARDITIO, PAIRIC	20.00		125 04		
176181 12/03	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	BRATHWALTE, DON	8.00		135.04	I	
176182 12/03	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	CHUKWUJIORAH, T	50.00		844.00	I	
176183 9/30	0/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	DARWISH, NADIA	20.00		337.60	I	
176184 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	DIAZ, CARMEN	20.00		337.60	I	
176185 12/03	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	FERNANDEZ, MARI	12.00		202.56	I	
176186 12/03	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	FLORES, MARITZA	69.75		1,177.38	I	
176187 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	JONES, CYNTHIA	45.00		759.60	I	
176188 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	KHALIL, RASHAN	23.25		392.46	I	
176189 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	KHAN, FARUQUE	18.00		303.84	I	
176190 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	KROLL, KATHERIN	28.00		472.64	I	
176191 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	MORALES, EDWIN	42.00		708.96	I	
176192 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	MOSKOWITZ, RONA	35.25		595.02	I	
176193 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	OCASIO, VIRGINI	22.00		371.36	I	
176194 11/18	3/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, JESS	30.00		506.40	I	
176195 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	RODRIGUEZ, MARI	12.00		202.56	I	
176196 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	SALVATO, MARY	56.00		945.28	I	
176197 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	SANCHEZ, CHRIST	9.00		151.92	I	
176198 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	SCOTT, MICHAEL	40.00		675.20	I	
176199 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	SHEPPARD, ERMA	70.00		1,181.60	I	
176200 12/03	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	WELLS, WYNORIA	16.00		270.08	I	
176201 12/02	2/11 000120	NEIGHBORHOOD HEALTH PROVIDERS	WILSON, SHERYL	32.00		540.16	I	
			CUSTOMER	787.25	0.00	13,288.78		
			 CATEGORY	 787 25	0 00	13,288.78		
			CITIOORI	, 0 , . 2 5	3.00	13,200.70		

RUN DATE 12/07/11	- SUP SUNN	YSIDE CITYWIDE				PAGE 1	- 3:	22
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			FID NY CATHO		
			SALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176202 12/02/11	000126	NYS CATHOLIC/FIDELIS	BATISTA, JOSE	54.00		911.52	I	
176203 11/18/11	000126	NYS CATHOLIC/FIDELIS	BERGES, MARITZA	48.00		810.24	I	
176204 12/02/11	000126	NYS CATHOLIC/FIDELIS	BOCHENEK, JOLAN	42.00		708.96	I	
176205 12/02/11	000126	NYS CATHOLIC/FIDELIS	GIL, ALICIA M	38.00		641.44	I	
176206 12/02/11	000126	NYS CATHOLIC/FIDELIS	LITMAN, GAIL	25.00		422.00	I	
176207 12/02/11	000126	NYS CATHOLIC/FIDELIS	MARTINEZ, LUISA	84.00		1,417.92	I	
176208 12/02/11	000126	NYS CATHOLIC/FIDELIS	MULLOKONDOVA, S	15.00		253.20	I	
176209 12/02/11	000126	NYS CATHOLIC/FIDELIS	OLIVAPUIG, CARM	20.00		337.60	I	
176210 12/02/11	000126	NYS CATHOLIC/FIDELIS	PANOS, DESPINA	63.00		1,063.44	I	
176211 12/02/11	000126	NYS CATHOLIC/FIDELIS	PEREZ, MARIA E	20.00		337.60	I	
176212 11/25/11	000126	NYS CATHOLIC/FIDELIS	SAMOJEDNY, MICH	10.00		168.80	I	
176213 12/02/11	000126	NYS CATHOLIC/FIDELIS	SZE, BECKY	32.75		552.82	I	
176214 11/18/11	000126	NYS CATHOLIC/FIDELIS	VARGAS, RAQUEL	81.00		1,367.28	I	
			CUSTOMER	532.75	0.00	8,992.82		
			CATEGORY	532.75	0.00	8,992.82		

RUN DATE 12/0 SALES JRNL #	07/11 - SUP SUNN 0258 LOC 001	IYSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 UHC UNITED HI BILL WEEK ENI	
INVOICE# DA	ATE CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176216 12/0 176217 10/0 176218 12/0 176219 12/0 176220 12/0 176221 12/0	02/11 000128 02/11 000128 07/11 000128 02/11 000128 02/11 000128 02/11 000128 02/11 000128	UNITED HEALTH CARE	CALDERON, MIGDA KHODZAUDIEV, NI LYMBERIS, HELEN MILLAN, ARMIDA MUSHAYEV, BORIS SAFOS, PATRA YUSUPOV, PULAT ZANE, GEORGE	49.00 25.00 120.00 37.00 56.00 28.00 15.00		840.84 429.00 2,059.20 634.92 960.96 960.96 480.48 257.40	I I I I I I
			CUSTOMER	386.00	0.00	6,623.76	
			CATEGORY	386.00	0.00	6,623.76	

RUN DATE 12/07/11 - SALES JRNL # 0258		DE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY S A L E S R E G I S T E R			PAGE 1 EHP EMBLEM HI BILL WEEK EN		
INVOICE# DATE	CUST NO CU	JSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176223 12/02/11 176224 12/02/11 176225 12/02/11 176226 12/02/11 176227 12/02/11	000114 EMI 000114 EMI 000114 EMI	MBLEM HEALTH MBLEM HEALTH MBLEM HEALTH MBLEM HEALTH MBLEM HEALTH	COPE, WILLIE COPELAND, ELISE DE LA O, MARIA REYNOLDS, HARRI WESTFIELD, BREN	84.00 30.00 14.00 8.00 56.00		1,176.00 427.50 196.00 112.00 784.00	I I I I	
			CUSTOMER	192.00	0.00	2,695.50		
			CATEGORY	192.00	0.00	2,695.50		

RUN DATE 12/07/1	1 - SUP SUNI	NYSIDE CITYWIDE					PAGE 1	- 3	25
SALES JRNL # 025	8 LOC 001	SUNNYSIDE CITYWIDE	REG	NY NY			HIP HEALTH I	NSURA	NCE PLAN
			SALE	S REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176228 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NV	BORLAZA, FRANCI	84.00		1,417.92	т	
				•				± +	
176229 12/02/1		HEALTH INSURANCE PLAN		DE JESUS, TIBUR	63.50		1,071.88	Τ	
176230 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	GOMES, AGUSTINA	56.00		945.28	I	
176231 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	GREGG, DAVID	30.00		506.40	I	
176232 10/07/1	1 000136	HEALTH INSURANCE PLAN	OF NY	LOYOLA, MARIA	20.00		337.60	I	
176233 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	ORR, LOUISE	29.25		493.74	I	
176234 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	12.00		202.56	I	
176235 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	TOWLES, ADA	4.00		67.52	I	
176236 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	8.00		135.04	I	
176237 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	WILLIAMS, DIANE	8.00		135.04	I	
176238 12/02/1	1 000136	HEALTH INSURANCE PLAN	OF NY	ZAMBRANO, ZOILA	8.00		135.04	I	
				CUSTOMER	322.75	0.00	5,448.02		
				CATEGORY	322.75	0.00	5,448.02		

RUN DATE 12/07/11 SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - HPS HEALTH PLUS BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176239 12/02/11 176240 11/18/11 176241 12/02/11	000138 000138 000138	HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC HEALTH PLUS PHSP, INC	HARDING, EDNA VAZQUEZ, ARCADI VEGA, GLORIA	30.00 19.75 35.00		510.00 I 335.75 I 595.00 I	
			CUSTOMER	84.75	0.00	1,440.75	
			CATEGORY	84.75	0.00	1,440.75	

RUN DATE 12/07/11 - SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - AFF AFFINITY HE. BILL WEEK ENDIN	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TY	P SURPLUS
176242 12/02/11 176243 12/02/11 176244 12/02/11	000142 000142 000142	AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS AFFINITY HEALTH PLUS	HERNANDEZ, ANTO PURNELL, ROSE M VAMVAKAS, SOPHI	32.00 28.00 40.00		768.00 I 672.00 I 960.00 I	
			CUSTOMER	100.00	0.00	2,400.00	
			CATEGORY	100.00	0.00	2,400.00	

RUN DATI	E 12/07/11 -	- SUP SUNN	YSIDE CITYWIDE	REGNY NY SALES REGISTER			PAGE 1	- 3	28
SALES J	RNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			MPH METROPLUS	S HEA	LTH
				SALES REGISTER			BILL WEEK ENI	DING	12/09/11
		CUST NO							
INVOICE	‡ DATE	CUSI NO	CUSTOMER NAME	REFERENCE	HOURS	IAX AMI	AMOUNT	TYP	SURPLUS
176245	12/02/11	000130	METROPLUS HEALTH	ABBAS, SENOWARA	84.00		1,440.60	I	
176246	10/14/11	000130	METROPLUS HEALTH	ANDERSON, BETH	48.00		823.20	I	
176247	12/02/11	000130	METROPLUS HEALTH	ARIAS, NORA	68.00		1,166.20	I	
176248	11/25/11	000130	METROPLUS HEALTH	BEDOYA, MONICA	41.00		703.15	I	
176249	12/02/11	000130	METROPLUS HEALTH	BESANT, NAOMI	10.00		171.50	I	
176250	12/02/11	000130	METROPLUS HEALTH	BRACERO, HELEN	84.00		1,440.60	I	
176251	12/02/11	000130	METROPLUS HEALTH	BRIGGS, LOUIS	77.00		1,320.55	I	
176252	12/02/11	000130	METROPLUS HEALTH	CHAPMAN, ESTREL	15.00		257.25	I	
176253	12/02/11	000130	METROPLUS HEALTH	CORDERO, ROSEND	70.00		1,200.50	I	
176254	12/02/11	000130	METROPLUS HEALTH	DAVIS, ANGIE	84.00		1,440.60	I	
176255	12/02/11	000130	METROPLUS HEALTH	DEWANJEE, MIRA	20.00		343.00	I	
176256	12/02/11	000130	METROPLUS HEALTH	DURAHAM, CYNTHI	16.00		274.40	I	
176257	11/18/11	000130	METROPLUS HEALTH	GALAS, TERESA	38.00		651.70	I	
176258	11/18/11	000130	METROPLUS HEALTH	GONZALEZ, CARLO	48.00		823.20	I	
176259	12/02/11	000130	METROPLUS HEALTH	MANIACI, VINCEN	84.00		1,440.60	I	
176260	12/02/11	000130	METROPLUS HEALTH	MATUTE-CALLE, R	84.00		1,440.60	I	
176261	11/25/11	000130	METROPLUS HEALTH	MURDOCK, GERTRU	40.00		686.00	I	
176262	12/02/11	000130	METROPLUS HEALTH	PERSAD, USHA	71.00		1,217.65	I	
176263	12/02/11	000130	METROPLUS HEALTH	PUCHUELA, MARIA	56.00		960.40	I	
176264	11/11/11	000130	METROPLUS HEALTH	RYALS, CHARLES	42.00		720.30	I	
176265	12/02/11	000130	METROPLUS HEALTH	SANTORO, MATTHE	12.00		205.80	I	
				ABBAS, SENOWARA ANDERSON, BETH ARIAS, NORA BEDOYA, MONICA BESANT, NAOMI BRACERO, HELEN BRIGGS, LOUIS CHAPMAN, ESTREL CORDERO, ROSEND DAVIS, ANGIE DEWANJEE, MIRA DURAHAM, CYNTHI GALAS, TERESA GONZALEZ, CARLO MANIACI, VINCEN MATUTE-CALLE, R MURDOCK, GERTRU PERSAD, USHA PUCHUELA, MARIA RYALS, CHARLES SANTORO, MATTHE	1,092.00	0.00	18,727.80		
							18,727.80		

RUN DATE 12/07/11 SALES JRNL # 0258		YSIDE CITYWIDE SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 AMG AMERIGROU BILL WEEK ENI	
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP SURPLUS
176266 12/02/11 176267 12/02/11 176268 12/02/11 176269 12/02/11	000132	AMERIGROUP AMERIGROUP AMERIGROUP AMERIGROUP	FERNANDEZ, NORK GIAMBRONE, JOSE GUERRA, LORRAIN PRUITT, JOHNNY	7.00 7.00 70.00 8.00		118.09 118.09 1,180.90 134.96	I I I
			CUSTOMER	92.00	0.00	1,552.04	
			CATEGORY	92.00	0.00	1,552.04	

RUN DATE 12/07/11 - SUP :				PAGE 1 - 330
SALES JRNL # 0258 LOC (	001 SUNNYSIDE CITYWIDE REG 1			WEL WELCARE OF NY BILL WEEK ENDING 12/09/11
	ЗАЦЕ	S KEGISIEK		BILL WEEK ENDING 12/09/11
INVOICE# DATE CUST	NO CUSTOMER NAME	REFERENCE HO	OURS TAX AMT	AMOUNT TYP SURPLUS
176070 10700711 0001	OA WELGARE OF NEW YORK ING	CENTO DINTELLA 20	2 00	270 40 T
176270 12/02/11 0001: 176271 12/02/11 0001:		•	2.00 2.00	378.40 I 722.40 I
176271 12/02/11 0001.		·	4.00	1,444.80 I
176272 12/02/11 00013		•	6.00	963.20 I
170273 12702711 0001.	21 WEIGHE OF NEW TORK, INC.	TOTAL CONTROL OF THE		
		CUSTOMER 204	4.00 0.00	3,508.80
		CATEGORY 204	4.00 0.00	3,508.80

RUN DATE 12/07/11 - SALES JRNL # 0258		SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER			PAGE 1 - 331 NPS NY PRESBYTERIAN SELECT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT TYP SURPLUS
176274 12/02/11	000134	NY-PRESBYTERIAN SYSTEM	M SELECT KARASSAVIDIS, A	49.00		840.84 I
			CATEGORY	49.00	0.00	840.84

	E 12/07/11 -		YSIDE CITYWIDE SUNNYSIDE CITYWIDE REG	NV NV			PAGE 1 PAR PRIVATE	- 3	32
SALES UN	ML # 0236	LOC 001	S A L E	NY NY S REGISTER			BILL WEEK END	ING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176275	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	BECKFORD, DORIS BURY, GLADYS BUTLER, MARY BUTLER, MARY MOSCOSO, MARIA MOSCOSO, MARIA MOSCOSO, MARIA MOSCOSO, TIRSO MOSCOSO, TIRSO NEREY, DULCE REID, DAPHNIE SIERRA, MIRRIAM	6.00		87.00	I	
176276	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	BURY, GLADYS	4.00		58.00	I	
176277	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	BUTLER, MARY	8.00		116.00	I	
176278	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	BUTLER, MARY	3.25		47.13	I	
176279	11/18/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, MARIA	4.00		58.00	I	
176280	11/25/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, MARIA	4.00		58.00	I	
176281	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, MARIA	4.00		58.00	I	
176282	11/18/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, TIRSO	4.00		58.00	I	
176283	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	MOSCOSO, TIRSO	4.00		58.00	I	
176284	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	NEREY, DULCE	3.00		43.50	I	
176285	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	REID, DAPHNIE	4.00		58.00	I	
176286	12/02/11	000002	SUNNYSIDE COMMUNITY SERVICES	SIERRA, MIRRIAM	4.00		58.00	I 	
				CUSTOMER		0.00	757.63		
176287	12/02/11	000040	DUISIN, CHRISTINE	DUISIN, XENIA	12.00		186.00	I	
176288	12/02/11	000040	DUISIN, CHRISTINE DUISIN, CHRISTINE	DUISIN, XENIA	8.00		124.00	I	
				CUSTOMER		0.00	310.00		
176289	12/02/11	000049	ELIZABETH SETON PEDIATRIC CTR	DIOP. SERIGNE	15.00		206.85	I	
176290	12/02/11	000049	ELIZABETH SETON PEDIATRIC CTR ELIZABETH SETON PEDIATRIC CTR	DIOP, SERIGNE	10.00		206.85 137.90	Ī	
						0.00	344.75		
176291	12/02/11	000069	AMY L. WELTMAN	LUSKIND, FRANCE	5.00		966.00	I	
176292	12/02/11	000069	AMY L. WELTMAN AMY L. WELTMAN	LUSKIND, FRANCE	2.00		372.00	Ī	
				CUSTOMER	7.00	0.00	1,338.00		
176293	12/02/11	000078	MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	I	
176294	12/02/11	000078	MCDERMOTT, LOUISE MCDERMOTT, LOUISE	MCDERMOTT, LOUI	4.00		62.00	I	
				CUSTOMER		0.00	124.00		
				CATEGORY		0.00	2,874.38		

RUN DATE 12/07/11						11102	- 33	
SALES JRNL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			CAS CHILDREN		
		S A	ALES REGISTER			BILL WEEK EN	DING	12/09/11
INVOICE# DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176295 12/02/11	000088	CHILDREN'S AID SOCIETY	DUNNE, MYEISHA	10.00		155.00	I	
176296 11/25/11	000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	2.00		31.00	I	
176297 12/02/11	000088	CHILDREN'S AID SOCIETY	GIL, GENEVIEVE	4.00		62.00	I	
176298 12/02/11	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	4.00		62.00	I	
176299 12/02/11	000088	CHILDREN'S AID SOCIETY	GIL, MARANGELI	2.00		31.00	I	
176300 12/02/11	000088	CHILDREN'S AID SOCIETY	REDDICK, LORENZ	14.00		217.00	I	
176301 12/02/11	000088	CHILDREN'S AID SOCIETY	REDDICK, LORENZ	6.00		93.00	I	
176302 12/02/11	000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	14.00		217.00	I	
176303 12/02/11	000088	CHILDREN'S AID SOCIETY	REDDICK, TRINIT	6.00		93.00	I	
176304 12/02/11	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	19.75		306.13	I	
176305 12/02/11	000088	CHILDREN'S AID SOCIETY	SALAS, HELENA	8.00		124.00	I	
			CUSTOMER	89.75	0.00	1,391.13		
			CATEGORY	89.75	0.00	1,391.13		

RUN DATE	12/07/11 -	SUP SUNN	YSIDE CITYWIDE SUNNYSIDE CITYWIDE	DEC	NTV NTV			PAGE 1 GHC GIRLING B	- 33	
SALES UKN	иш # 0256	TOC 001	SUNNISIDE CITIWIDE	REG R J I E	NI NI	<b>)</b>		BILL WEEK ENI		
				DALL		•		DIDD WEEK EN	21110	12/03/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME		REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
			GIRLING HEALTH CARE							
	10/21/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	6.00		78.00	I	
	10/28/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	12.00		156.00	Ι	
	11/04/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	6.00		78.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	ALEKSANDROVA, S	6.00		78.00	I	
	11/11/11	000090	GIRLING HEALTH CARE	OF NY	AMABILE, ANTOIN	12.00		156.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	AMABILE, ANTOIN	120.00		1,560.00	I	
176312	12/02/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	10.00		130.00	I	
176313	12/02/11	000090	GIRLING HEALTH CARE	OF NY	BHATT, JYOTI	12.00		156.00	I	
176314	12/02/11	000090	GIRLING HEALTH CARE	OF NY	DIRADOURIAN, NI	120.00		1,560.00	I	
176315	12/02/11	000090	GIRLING HEALTH CARE	OF NY	DIRADOURIAN, NI	48.00		624.00	I	
176316	10/28/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	2.00		26.00	I	
176317	11/04/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	2.00		26.00	I	
176318	12/02/11	000090	GIRLING HEALTH CARE	OF NY	GOVERDOVSKIY, N	6.00		78.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	JOHNSON, ROBERT	15.00		195.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	JOHNSON, ROBERT	7.00		91.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	KILIMLIAN, PEPR	15.00		195.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	KILIMLIAN, PEPR	10.00		130.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	SAK, FIRDWS	8.00		104.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	SAK, FIRDWS	4.00		52.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	THOMPSON, ORALI	59.00		767.00	I	
	12/02/11	000090	GIRLING HEALTH CARE	OF NY	THOMPSON, ORALI	24.00		312.00	I	
	, - ,									
					CUSTOMER	504.00	0.00	6,552.00		
					CATEGORY			6,552.00		
i					CATEGORI	301.00	0.00	0,332.00		

			YSIDE CITYWIDE				-	- 3	35
SALES JR	NL # 0258	LOC 001	SUNNYSIDE CITYWIDE	REG NY NY			PAR PRIVATE		
				SALES REGISTER	R		BILL WEEK EN	DING	12/09/11
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS
176327	12/02/11	000096	JIBAJA, ROSEMARY	JIBAJA, ROSEMAR	120.00		1,932.00	Т	
176328	12/02/11	000096	JIBAJA, ROSEMARY	JIBAJA, ROSEMAR	48.00		744.00	Ť	
170320	12/02/11	00000	orbitit, nobelimit						
				CUSTOMER	168.00	0.00	2,676.00		
							,		
176329	12/02/11	000098	MILDRED PANSE	PANSE, MILDRED	12.00		186.00	I	
176330	12/02/11	000098	MILDRED PANSE	PANSE, MILDRED	4.00		62.00	I	
				CUSTOMER	16.00	0.00	248.00		
176331	12/02/11	000145	LARRY EISENBERG	BERGER, TESS	39.00		631.50	I	
176332	12/02/11	000145	LARRY EISENBERG	BERGER, TESS	14.00		217.00	I	
				CUSTOMER	53.00	0.00	848.50		
				CATEGORY	237.00	0.00	3,772.50		
				CAILGORI	231.00	0.00	3,112.50		

	SUP SUNNYSIDE CITYWIDE LOC 001 SUNNYSIDE CITYWIDE	REG NY NY SALES REGISTER		PAGE 1 - 336 CCM COMPREHENSIVE CARE MGMT BILL WEEK ENDING 12/09/11
INVOICE# DATE	CUST NO CUSTOMER NAME	REFERENCE	HOURS TAX AMT	AMOUNT TYP SURPLUS
176333 12/02/11	000150 COMPREHENSIVE CARE I	MANAGEMENT ROSARIO, CELEST	12.00	157.44 I
		CATEGORY	12.00 0.00	 157.44

RUN DATE 12/07/11 - SUP SUNNYSIDE CITYWIDE SALES JRNL # 0258 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER						PAGE 1 - 337 PAR PRIVATE BILL WEEK ENDING 12/09/11			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT		SURPLUS
176334 176335	12/02/11 12/02/11	002215 002215	KEITH SALMON KEITH SALMON		8.00		198.00 124.00	I I	
				CUSTOMER	20.00	0.00	322.00		
176336 176337	12/02/11 12/02/11	003108 003108	NIGRO, CATHERINE NIGRO, CATHERINE	NIGRO, CATHERIN NIGRO, CATHERIN	12.00		186.00 124.00	I I	
				CUSTOMER		0.00	310.00		
176338 176339	12/02/11 12/02/11	003743 003743	VICTOR NICASSIO VICTOR NICASSIO	NICASSIO, VICTO NICASSIO, VICTO	6.00		93.00 46.50	I	
					9.00	0.00	139.50		
176340 176341	12/02/11 12/02/11	004784 004784	CAMILLERI, JOSEPH CAMILLERI, JOSEPH	CAMILLERI, JOSE CAMILLERI, JOSE	15.00 10.00		202.50 135.00	I I	
				CUSTOMER	25.00	0.00	337.50		
176342 176343	12/02/11 12/02/11	006173 006173	SIANO, ANDREW SIANO, ANDREW		8.00		108.00 108.00	I I	
					16.00	0.00	216.00		
176344 176345	12/02/11 12/02/11	006337 006337	STEPHEN EDEL STEPHEN EDEL	EDEL, CANDACE EDEL, CANDACE	55.00 26.00		876.50 403.00	I I	
				CUSTOMER			1,279.50		
176346 176347	12/02/11 12/02/11	007521 007521	DOROTHY GILBERT DOROTHY GILBERT	GILBERT, DOROTH GILBERT, DOROTH	23.00 12.00		364.00 186.00	I I	
						0.00	550.00		
176348 176349	12/02/11 12/02/11	007630 007630	MAUREEN MAIORANA MAUREEN MAIORANA		4.00		65.00 65.00	I	
				CUSTOMER	8.00	0.00	130.00		
176350 176351	12/02/11 12/02/11	007631 007631	MICHAEL MAIRANO MICHAEL MAIRANO	MAIORANA, MICHE MAIORANA, MICHE	6.00 6.00		97.50 97.50	I I	
				CUSTOMER	12.00	0.00	195.00		
176352	12/02/11	007883	ABBAMONTE, RUTH	ABBAMONTE, RUTH	2.00		31.00	I	
176353 176354	12/02/11 12/02/11	008764 008764	PATRICIA PHILION PATRICIA PHILION	GAFFNEY, FREDER GAFFNEY, FREDER	8.00 4.00		124.00 62.00	I I	
				CUSTOMER	12.00	0.00	186.00		

							PAGE 2 - 338 PAR PRIVATE			
SALES JRNL # 0258 LOC 001 SUNNYSIDE CITYWIDE REG NY NY SALES REGISTER							BILL WEEK ENDING 12/09/11			
INVOICE#	DATE	CUST NO	CUSTOMER NAME	REFERENCE	HOURS	TAX AMT	AMOUNT	TYP	SURPLUS	
	12/02/11 12/02/11	009036 009036	MR. FERNANDO RIVERA MR. FERNANDO RIVERA	RIVERA, ALCIRA RIVERA, ALCIRA	6.00 3.00		93.00 46.50	I I		
				CUSTOMER	9.00	0.00	139.50			
	12/02/11 12/02/11	009226 009226	ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION	CARDENAS, GUSTA CARDENAS, GUSTA	4.00 4.00		62.00 62.00	I I		
				CUSTOMER	8.00	0.00	124.00			
	12/02/11 12/02/11	009263 009263	ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION	VALENTIN, EVA VALENTIN, EVA	4.00		62.00 31.00	I I		
				CUSTOMER	6.00	0.00	93.00			
	12/02/11 12/02/11	009264 009264	ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION	VALENTIN, JOSE VALENTIN, JOSE	4.00		62.00 31.00	I I		
				CUSTOMER	6.00	0.00	93.00			
	12/02/11 12/02/11	997760 997760	MARASA, ANTONIO MARASA, ANTONIO	MARASA, ANTONIO MARASA, ANTONIO	6.00 3.00		81.00 40.50	I I		
				CUSTOMER	9.00	0.00	121.50			
				CATEGORY -	278.00	0.00	4,267.50			
				LOCATION	21,974.00	0.00	334,295.39			
				COMPANY	21,974.00	0.00	334,295.39			

RUN DATE 12/07/11 - SUP SUNNYSIDE CITYWIDE PAGE 1 - 339
SALES JRNL # 0258 LOC 001 SUNNYSIDE CITYWIDE REG NY NY PAR PRIVATE

SALES REGISTER BILL WEEK ENDING 12/09/11

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

THIS PAGE INTENTIONALLY BLANK