

242.5 6-4 SEC. 72ND. HA 0019 95

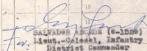
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DECLASSIFIED  
Authority: 885078



242-761

DATE OF ENLISTMENT (inclusive or exclusive service date)	GRADE AND ASSIGNMENT	SERIAL No.	ALLOCMENTS					COLLECTIONS	
			Month and year indicated	Class B	Class V	Class D	Class F	Class A per month indicated	Class E per month
	<u>FIRST SERGEANT</u>								
18 June 45	Raples, Cesar B.	9-90649							
	<u>SERGEANT</u>								
14 June 45	Pietars, Lerato W.	9-36031							
13 June 45	Garcia, Marico G.	9-37890							

COLLECTIONS (continued)			Address for Mailing	Total Amount Due	Total Collections	Balance Due
Individuals and Agencies	Subsidiary Items					
				P256 88		P256 88
				P153 88		P153 88
				153 00		153 00
				"End of Roll" 153 00		
				<b>CERTIFICATE</b>		
				I HEREBY CERTIFY that the enlisted man mentioned in this voucher has at least due him three (3) months arrears in pay at the grade indicated as evidenced by SA AGO Form No. 83, on file in this office in accordance with the provisions of USARFZ letter, File FAGER No. 249, dated 4 April 1945, Subject: "Arrears in Pay of the Philippine Army Personnel."		
				 SALVADOR E. LINA (4-1206) Lieut.-Colonel, Infantry District Commander		

Approved

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Authority 883078

# PAY ROLL (FOR ENLISTED MEN)

Voucher No.   
**ISIDORO U VILLARREAL**  
 Enlistment No.   
 Social Security Number   
 APO 715   
 Paid July 1945 104

The amount shown in this payroll is chargeable to **104**  
 "Articles in **104** and is not to be deducted from current pay."  
 (GROSS) (Principal rates)  
 For Month of **May (2) 1945**

DATE OF ENLISTMENT	NUMBER OF MONTHS SERVED	NAME, PRESENT AND AGENCY BY GRADE AND COMPONENT	SERIAL NO.	ALLOTMENTS					COLLECTORS		
				Month and year received	Class A	Class E	Class D	Class C	Class A pay (over-allowance)	Govt. List	

(REVERSE SIDE)

**APPROPRIATIONS:**

(Symbol) F. R. A. 19 (Allotment) \$  
 F. R. A. 19 \$  
 R. & T. 50 \$  
 R. & T. 19 \$  
 Total amount disbursed \$

**ALLOTMENT SUMMARY:**

Class "N" National Service Life Insurance \$  
 Class "R" Allotment \$  
 Class "D" Government Insurance Premium \$  
 Class "F" Family Allotment \$  
 Total \$

**DEFERRED STATES:**

Class "A" Pay Reservation \$  
 Total \$

**COLLECTIONS—Reports to appropriations and miscellaneous receipts.**

(PA) \$  
 (PA) \$  
 (PA) \$

**Government Loans**

G. P. L. or D. \$  
**TRUST FUNDS:**

C. M. Fund \$  
 Fed. by dep. \$  
 S. H. 252334 (T. E.) \$  
 Total collections \$

**Post Back, Co. Fund, etc. (paid by check) \$**

**Individuals (paid by check) \$**

**Paid by cash \$**

**Total amount accounted for \$**

**(Notes)**  
 (Date)  
 I CERTIFY that this roll was prepared by 2004 Division and that every payment on each line was duly received and for no reason other than for non-payment of the amount shown on this roll. In duplicate, it was prepared and sent to the appropriate agencies for their action. It is hereby certified that the amounts shown on this roll were prepared by me and are correct. I have no objection to its being used for any purpose in the United States. I have no objection to its being used for any purpose in the United States. I have no objection to its being used for any purpose in the United States.

**PREPARED BY:**  
**ISIDORO U VILLARREAL**  
 Major

**(Notes)**  
 I CERTIFY that I witnessed the preparation of this roll and that every dollar shown on this roll was duly received for the amount on which it was paid and the receipt for the same was filed.

**NOTE:** This certificate will be signed only on the day of the roll and in duplicate copies of this roll will be prepared.

**NOTE:** This certificate will be signed only on the day of the roll and in duplicate copies of this roll will be prepared.

 DECLASSIFIED  
 Authority **323078**

DATE OF PAYMENT Indicate in which column (Processing)	NAME, PRESENT AND ADEQUATE AT GRADE AND COMPONENT Mention of dependent will where applicable Indicate in Description of Appointment if bonated or Attached to Form with The War No.	SERIAL NO.	ALLOTMENTS					COLLECTIONS	
			Month and year detached	Class X	Class Y	Class D	Class F	Class & and use strations	One Lot
20 June 45	<b>STAFF SERGEANT</b> Bustillo, Roberto	98582							
20 June 45	<b>SERGEANT</b> Agile, Sixte	073844							
28 June 45	Inocente, Elias T	0-36650							
5 July 45	<b>CORPORAL</b> Alquisales, Fermin	084642							
11 June 45	<b>PRIVATE FIRST CLASS</b> Vidal, Rosillo	071171							
11 June 45	Vagador, Elias	083394							
12 June 45	<b>PRIVATE</b> Salado, Restituto	073865							
	"END OF ROLL"								

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COLLECTIONS (continued)

Indicate with red ink	Address Phone	Amount due	Total Collection	Balance Paid
		\$150.00		\$150.00
		\$153.00		\$153.00
		\$66.00		\$66.00
		\$66.00		\$66.00
		\$58.00		\$58.00
		\$783.00		\$783.00
		\$391.50		\$391.50

We hereby acknowledge receipt in full of amount in the amount of "Balance Paid" set against the collection shown, and in case of payment of arrears we certify that we have deposited the amount received in the name of the collection shown. We have made contributions for the support of our dependent loved ones in the amount of \$150.00 in the case of Roberto Bustillo, \$153.00 in the case of Sixte Agile, \$66.00 in the case of Elias Vagador, \$66.00 in the case of Elias Vagador, \$58.00 in the case of Restituto Salado, and \$783.00 in the case of Elias Vagador, and \$391.50 in the case of Restituto Salado.

1  
2 *Roberto Bustillo*  
3  
4  
5  
6  
7  
8 *Agile Sixte*  
9 *Elias Vagador*  
10  
11  
12 *Restituto Salado*  
13  
14  
15

I HEREBY CERTIFY that the collection mentioned in this voucher has at least been in full payment of the amount indicated as provided by the Department of Finance, and that the same is in accordance with the provisions of Article 140, Title 14, Chapter 1, of the Public Law, subject to the provisions of the Public Law 140, Title 14, Chapter 1, of the Public Law.

*[Signature]*  
Director of Finance



DATE OF PAYMENT Indicate at end of column	MONEY ORDER AND CHECK BY NAME AND COMPANY Name of depositor and where applicable, identification of depositor to be paid or "Account" or "Fund" with number if.	SERIAL NO.	ALLOTMENTS					COLLECTIONS	
			Month and year detailed	Class A	Class B	Class C	Class D	Class E	Class A and over-advance

PAY ROLL  
FOR ENLISTED MEN

Voucher No. 134  
Month of (3) 1944  
For month of (3) 1944

Voucher No. 134  
I. V. ILLINOIS  
OF THE U. S. ARMY  
1944  
Paid 134

APPROPRIATIONS:  
U. S. A. 10 (Symbol) (Allotment)  
T. S. A. 10  
S. & T. 10  
S. & T. 10

In Carleota Casual Camp 6 July '44

Total amount disbursed \$

I CERTIFY that this roll is made out as required by Army Regulation 600-10 and is correct. I have received this roll from the disbursing officer and have examined it and find it correct. I have also examined the vouchers and receipts and find them correct and in accordance with the vouchers issued in support of this roll. I certify that I have also examined the vouchers and receipts and find them correct. I have also examined the vouchers and receipts and find them correct. I have also examined the vouchers and receipts and find them correct. I have also examined the vouchers and receipts and find them correct.

ALLOTMENT SUMMARY:  
Class "N" National Service Life Insurance \$  
Class "E" Allotment \$  
Class "D" Government Insurance Premium \$  
Class "F" Family Allowance \$  
Total \$

OSBORNE LAROT  
Major, Infantry  
21 42nd Infantry

SEE UNITED STATES:  
Class "A" Pay Receipts \$

BERNARD TANAKA  
1st Lt., Infantry  
1st Infantry

COLLECTIONS—Deposits to appropriations and miscellaneous accounts:  
C. A. \$  
C. M. \$  
C. P. \$

FRANCIS TANAKA  
1st Lt., Infantry  
1st Infantry

Government bonds:  
G. P. L. or D.  
Trust funds.  
C. M. Files  
Paid by des.  
S. H. 20000 (T. E.)

FRANCIS TANAKA  
1st Lt., Infantry  
1st Infantry

Total collections \$  
Post Exch. Co. Fund, etc. (paid by check) \$  
Individuals (paid by check) \$  
Paid by cash \$  
Total amount accounted for \$

PAYER	CHECK NO.	AMOUNT

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DATE OF ESTABLISHMENT (unless active or PROCEEDING NO.)	NAME, PRESENT AND AGENCY OF GRADE AND COMPONENT Name of component and where applicable, description of agency to be used as "Activity" of "Post" with location N.	SERIAL No.	Month last pay received	ALLOTMENTS				COLLECTIONS	
				Class I	Class II	Class III	Class IV	Class A (for maintenance)	Cont. Edry
	MASTER SERGEANTS								
9 June 45	HILARIO, GUILLERMO	071803	<i>RL</i>						
16 May 45	PAJES, ANTONIO	070042	<i>RL</i>						
	FIRST SERGEANT								
10 June 45	HORTIVEROS, TITO	106411							
	SERGEANTS								
16 May 45	ARMY, TITO	070043							
16 May 45	HERNAN, GEORGE	070061							
16 May 45	JORDO, DINO	070095							
16 May 45	RODRI, FELIX, JR	070095	<i>RL</i>						
	CORPORALS								
16 May 45	AGUILO, MARIO	072066	<i>RL</i>						
16 May 45	ALVAREZ, RICARDO	072354	<i>RL</i>						
1 June 45	BALDRICES, LUIS	001454	<i>RL</i>						
13 June 45	BIZON, JOSE	051216	<i>RL</i>						
16 May 45	BONILLA, DOMINGO	070097	<i>RL</i>						
18 May 45	BRUNKE, JAVIER	072352	<i>RL</i>						
16 May 45	RAYNES, ALFONSO	070094	<i>RL</i>						
16 May 45	BORN, EIRLANE	072001	<i>RL</i>						
16 May 45	UNSON, MELANIO	072051	<i>RL</i>						
12 June 45	STARNEY, FLORE	071298	<i>RL</i>						
15 June 45	PANGAPA, DOMINGO	071335	<i>RL</i>						
15 June 45	YUNSON, DOMINGO	073032	<i>RL</i>						
	FIRVITAS FIRST GRADE								
16 May 45	AGUIRRE, JUAN	072505	<i>RL</i>						
16 May 45	ROMERO, DOMINGO	072084	<i>RL</i>						
16 May 45	GUATE, MELANIO	072074	<i>RL</i>						

1953-54: 200,000

## COLLECTIONS (cont'd)

Allowance for Retiree	Total Amount Jan	Total Deductions	Balance
			1
	250.00	250.00	2
	250.00	250.00	3
			4
	210.00	210.00	5
			6
	150.00	150.00	7
	150.00	150.00	8
	150.00	150.00	9
			10
			11
	111.00	111.00	12
	111.00	111.00	13
	111.00	111.00	14
	111.00	111.00	15
	111.00	111.00	16
	111.00	111.00	17
	111.00	111.00	18
	111.00	111.00	19
	111.00	111.00	20
	111.00	111.00	21
	111.00	111.00	22
	111.00	111.00	23
			24
	66.00	66.00	25
	66.00	66.00	26
	66.00	66.00	27

We hereby acknowledge receipt in full of amounts for the calendar "Service Papers" and applicable interest therein, and in cash for amounts of unreturned collections on orders which were previously fully adjusted against the addressee's checks. For the purpose of which amounts are claimed, we have the honor to state that the interest on our letters has been waived in full as per agreement entered into by the addressee and us in connection with the settlement of our accounts on the date of the issuance of these papers and that there has not been a material change in the status of the addressee since the date of settlement of said accounts.

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Authority 0833078



DATE OF ENLISTMENT	NAME, HOME ADDRESS, GRADE AND COMPANY	TERMAL No.	ALLOCMENTS					COLLECTIONS	
			Month and year deducted	Class 1	Class 2	Class 3	Class 4	Class A pay rate, deductions	Gen. Levy

**CERTIFICATE**

I HEREBY CERTIFY THAT THE ENLISTED MEN MENTIONED IN THIS VOUCHER HAS AT LEAST ONE YEAR THREE (3) MONTHS APPEARS IN PAY AT THE GRADE INDICATED AS EVIDENCED BY PG AGO FORM NO. 25, ON FILE IN THIS OFFICE IN ACCORDANCE WITH THE PROVISIONS OF MILITARY LETTER, FILE NUMBER 20, 200, DATED 4 APRIL 1945, SUBJECT "RELEASE IN PAY" OF THE PHILIPPINE ARMY PERSONNEL.

*[Signature]*  
 SALVADOR ARANG (C-150)  
 1Y COL, INF  
 DISTRICT COMMANDER

DECLASSIFIED  
 Authority 083078

**PAY ROLL**

(FOR ENLISTED MEN)

THE AMOUNT SHOWN IN THIS ROLL IS CHARGEABLE TO "GRADE" IN PAY FOR THE PERIOD ENDING ON APPEARING IN THIS ROLL AND IS NOT TO BE DEBITED FROM THE CURRENT PAY.

For Month of APRIL (3) MONTHS ARREARS (Principal arrear) 194 5

APPROPRIATIONS:

(Symbol) F. A. A. 19 (Allotment) 1  
F. A. A. 19 1  
S. & T. 19 1  
S. & T. 19 1

Total amount disbursed 1

ALLOTMENT SUMMARY:

Class "N" National Service Life Insurance  
 Class "H" Allotment  
 Class "G" Government Insurance Premium  
 Class "F" Family Allowment

Total 1

FOR UNITED STATES:

Class "A" Pay Insurance

COLLECTIONS—Payments to applications and miscellaneous

(CA)  
 (PA)  
 (PA)

Government Inventory

(P. E. or D.)  
 TRUST FUNDS  
 C. M. Fines  
 Prof. by Gov.  
 S. H. 210528 (T. F.)

Total collections 1

Post Reg. Co. Paid, etc. (paid by check) 1  
 No. checks (paid by check) 1

Paid by cash 1

Total amount received by 1

WAR DEPARTMENT  
 Form No. 269—Revised  
 Also approved by Comptroller, General U.S.A.  
 August 20, 1942

Voucher No.

I. M. WILLARBEVA  
 CAPT., US

SACRAMENTO, CALIF., UNITED STATES

AGE 715

Paid JULY

194 5

AGE 715 (Date)

IDENTIFY THE ROLL AND IS MADE ON AS PROVIDED BY THE REGULATION. THE ROLL MUST BE RETURNED TO THE OFFICE OF THE DISTRICT COMMANDER WITHIN THE PERIOD OF THREE MONTHS FROM THE DATE OF THE ROLL. THE ROLL MUST BE RETURNED TO THE OFFICE OF THE DISTRICT COMMANDER WITHIN THE PERIOD OF THREE MONTHS FROM THE DATE OF THE ROLL. THE ROLL MUST BE RETURNED TO THE OFFICE OF THE DISTRICT COMMANDER WITHIN THE PERIOD OF THREE MONTHS FROM THE DATE OF THE ROLL.

Approved and forwarded by [Signature]  
 DISTRICT COMMANDER

FOR THE DISTRICT COMMANDER  
[Signature]  
 DISTRICT COMMANDER

I CERTIFY THAT I RECEIVED THE AMOUNT OF THE PAY ROLL AND HAVE PAID THE AMOUNT TO THE ENLISTED MEN AND HAVE DEPOSITED THE AMOUNT TO THE CREDIT OF THE ENLISTED MEN'S ACCOUNTS.

NOTE: This certificate will be used for the purpose of identifying the roll.

IDENTIFY THE ROLL AND IS MADE ON AS PROVIDED BY THE REGULATION. THE ROLL MUST BE RETURNED TO THE OFFICE OF THE DISTRICT COMMANDER WITHIN THE PERIOD OF THREE MONTHS FROM THE DATE OF THE ROLL.

NOTE: This certificate will be used for the purpose of identifying the roll.

IDENTIFY THE ROLL AND IS MADE ON AS PROVIDED BY THE REGULATION. THE ROLL MUST BE RETURNED TO THE OFFICE OF THE DISTRICT COMMANDER WITHIN THE PERIOD OF THREE MONTHS FROM THE DATE OF THE ROLL.

PAYEE [Signature]

# PAY ROLL

OF

The amount shown in this payroll is chargeable to Arrears in Pay due the enlistment appearing in this roll and is not to be deducted from current pay. Three (3) Months Arrears

Voucher No.

I. U. Villanueva  
Captain, SMS (PA)Rec'd \_\_\_\_\_  
Disbursing Officer

APO 715

Paid July 1945

Pay of Army, 19 \_\_\_\_\_ \$  
Pay of Army, 19 \_\_\_\_\_ \$  
Pay of Army, 19 \_\_\_\_\_ \$  
Subs., 19 (PA. \_\_\_\_\_) \$  
\_\_\_\_ (PA. \_\_\_\_\_) \$  
C. & E., 19 (PA. \_\_\_\_\_) \$  
\_\_\_\_ (PA. \_\_\_\_\_) \$  
Total amount disbursed \_\_\_\_\_ \$

## Information:

\$ \_\_\_\_\_ Ins. and alms.  
\$ \_\_\_\_\_ Qrs. (PA. \_\_\_\_\_)  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

## COLLECTIONS.

Finance collections \_\_\_\_\_ \$  
\_\_\_\_\_ (PA. \_\_\_\_\_)  
\_\_\_\_\_ (PA. \_\_\_\_\_)  
\_\_\_\_\_ (PA. \_\_\_\_\_)

Misc. Receipts  
Gov't laundry \_\_\_\_\_ \$  
Overhead charges \_\_\_\_\_ \$  
C.M. Fines \_\_\_\_\_ \$  
Forf. by des \_\_\_\_\_ \$

Total collections \_\_\_\_\_ \$  
Post Exch.; Co. Fund, etc. (paid by check) \_\_\_\_\_ \$  
Individuals (paid by check) \_\_\_\_\_ \$  
Paid by cash \_\_\_\_\_ \$  
Total amount accounted for \_\_\_\_\_ \$

APG 715 31 July '45  
(Station) (Date)  
I CERTIFY that this roll is made out as required by Army Regulations, and that entries pertaining to each name are correct; that where rental, and/or subsistence allowance is due, the soldier was not furnished ration in kind nor received the equivalent thereof in money; that neither he, his family, nor any one dependent on him has occupied Government quarters and that for the period that quarters allowance is due he or his dependents actually occupied quarters at the address shown. Except as otherwise stated each man was last paid to \_\_\_\_\_  
by I. U. Villanueva, P.D., U.S.A.  
\_\_\_\_\_  
Commanding Organization

I CERTIFY that I witnessed the payment of this roll and that prior to the signing of this certificate each man received the amount set opposite his name, with the exception of those men marked "Not paid."

BENJAMIN J. TACKETT  
1st Lt, Inf, \_\_\_\_\_  
Commanding Organization  
NOTE.—This certificate will be signed only on the copy of the pay roll which bears signatures of the men for payment in cash.

I CERTIFY that this roll is a true copy of the roll upon which payment, witnessed by me was made, excepting as to the signatures in the receipt column and the certificate as to witnessing the payment thereof.

BENJAMIN J. TACKETT  
1st Lt, Inf, \_\_\_\_\_  
Commanding Organization  
NOTE.—This certificate will be signed only on the copy of the roll not receipted, and which constitutes the disbursing officer's retained voucher.

Post Exchange; Co. Fund and Collections paid by check on Treasurer U.S.

Date \_\_\_\_\_, 19\_\_\_\_

PAYEE	CHECK No.	AMOUNT

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Authority 883078

NAME, PRESENT AND ABSENT, GRADE AND SERIAL NUMBER	DATE OF PAYMENT PROVIDED	No. Yrs. Ser.	App. Rate	ALLOWANCES		DEDUCTIONS		
				Gratual	Dr.	Gov't Ins. C.L.O.	Abogado C.L.E.	Gov't Laundry
1 <u>SERGEANT</u>								
2 <u>Tropa, Tinoteo L. (071562)</u>	13 June '45			(071562)				
3 <u>CORPORALS</u>								
4 <u>Saxiplapuzfranzinix</u>								
5 <u>Cisco, Isa-nc</u>	2 June '45			(072953)				
6 <u>PRIVATES</u>								
7 <u>Maghansa, Balocio</u>	13 June '45			(074090)				
8 <u>Abada, Leopoldo</u>	31 May '45			(035754)				
9 <u>-END OF ROLL-</u>								
10								
11								
12								
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18								
19								
20								
21								
22								
23								
24								
25								
26								

Pay

P81.00 P153.00 P153.00

*V. deo Tropa*

37.00 111.00 111.00

*Isa-nc*

19.00 54.00 54.00

*Maghansa*

18.00 54.00 54.00

TOTAL --- P372.00

## CERTIFICATE

I hereby certify that the enlisted men mentioned in this voucher has at least due his three (3) months "Arrears in Pay" at the rate of the grade indicated as evidenced by his PA 450 Form No 23, on file in this office in accordance with the Provisions of USAFFE letter file FROM No. 240 dated 4 April 1945 Subject: "ARREARS IN PAY OF THE PHILIPPINE ARMY PERSONNEL".

*Edel S. ...*  
 ... JR (C-36604)  
 ...  
 District Adjutant

DATE OF PAYMENT Indicates or is to arrive	3 CLASS Indicates or is to arrive	NAME'S SERVICE AND RANK BY GRADE AND COMPONENT Name of dependent and where applicable Name of dependent and where applicable Indicates or "Attached" or "Paid with Member No.	SERIAL No.	ALLOCMENTS					COLLECTIONS		
				Month and year deducted	Class K	Class L	Class D	Class Y	Class B Pay our arrears	Cont. Lay.	
		TECHNICAL SERGEANT									
14 June 45	7	LEMO, ELIAS	027601								
		(@manorroll)									
16 June 45		LACSON, ALSTANDQ	037595								
		(End of roll)									
1											
2											
3											
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27											

Drawn Along This Edge

COLLECTIONS. (continued)				Allow- ance for "Rise" rate	Total Amount due	Total Collections	Balance Paid	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17
Indivi- duals and Agencies	Organis- ation	Payroll	Other					
					100.00			1
					75.50			2
Converted at the rate of \$.50 to a peso							75.50	3
								4
								5
								6
								7
								8
								9
								10
								11
								12
								13
								14
								15
								16
								17
CERTIFICATE								
I HEREBY CERTIFY THAT the attached list contains 1. This voucher has no cash value and is not redeemable in any way and is not to be used as a receipt for any amount of money. 2. This voucher is not to be used as a receipt for any amount of money. 3. This voucher is not to be used as a receipt for any amount of money. 4. This voucher is not to be used as a receipt for any amount of money. 5. This voucher is not to be used as a receipt for any amount of money. 6. This voucher is not to be used as a receipt for any amount of money. 7. This voucher is not to be used as a receipt for any amount of money. 8. This voucher is not to be used as a receipt for any amount of money. 9. This voucher is not to be used as a receipt for any amount of money. 10. This voucher is not to be used as a receipt for any amount of money. 11. This voucher is not to be used as a receipt for any amount of money. 12. This voucher is not to be used as a receipt for any amount of money. 13. This voucher is not to be used as a receipt for any amount of money. 14. This voucher is not to be used as a receipt for any amount of money. 15. This voucher is not to be used as a receipt for any amount of money. 16. This voucher is not to be used as a receipt for any amount of money. 17. This voucher is not to be used as a receipt for any amount of money. 18. This voucher is not to be used as a receipt for any amount of money. 19. This voucher is not to be used as a receipt for any amount of money. 20. This voucher is not to be used as a receipt for any amount of money. 21. This voucher is not to be used as a receipt for any amount of money. 22. This voucher is not to be used as a receipt for any amount of money. 23. This voucher is not to be used as a receipt for any amount of money. 24. This voucher is not to be used as a receipt for any amount of money. 25. This voucher is not to be used as a receipt for any amount of money. 26. This voucher is not to be used as a receipt for any amount of money. 27. This voucher is not to be used as a receipt for any amount of money.								
								Jill Shinn FIDEL SULLIVAN JR. (100004) Major, Finance District Adjutant

DECLASSIFIED  
Authority 383078

DATE OF ENLISTMENT beginning or end of active duty	Serial No.	NAME, RANK, AND SERVICE GRADE AND COMPONENT Name of designational office, assign- ment, description of assignment to be used as "Station" or "Post" with Voucher No.	ALLOWANCE				COLLECTIONS		
			Month and year deducted	Class A	Class B	Class C	Class D	Class A & per cent retention	Govt. Sav.
1									
2									
3									
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23									
24									
25									
26									
27									

Official Army Account

### PAY ROLL (FOR ENLISTED MEN)

Voucher No. \_\_\_\_\_

This amount on this payroll is payable to         
 "Arrives" on \_\_\_\_\_ due the collected roll expiring on \_\_\_\_\_  
 This roll \_\_\_\_\_ will be deducted \_\_\_\_\_  
 For Month of        \_\_\_\_\_ 194  
 (Station) (Official No.)  
 Paid        \_\_\_\_\_ 1945

APPROPRIATIONS:  
 (Symbol) \_\_\_\_\_ (Account) \_\_\_\_\_  
 \_\_\_\_\_ F. S. A. 10 \_\_\_\_\_  
 \_\_\_\_\_ R. & T. 10 \_\_\_\_\_  
 \_\_\_\_\_ R. & T. 10 \_\_\_\_\_

ALLOWANCE BARRAT:  
 Class "N" National Service Life Insurance \_\_\_\_\_  
 Class "E" Allowance \_\_\_\_\_  
 Class "D" Government Insurance Premium \_\_\_\_\_  
 Class "F" Family Allowance \_\_\_\_\_

THE UNITED STATES:  
 Class "A" Pay Retention \_\_\_\_\_

COLLECTIONS—Repayments in appropriations and miscellaneous  
 receipts:  
 (PA) \_\_\_\_\_  
 (PA) \_\_\_\_\_  
 (PA) \_\_\_\_\_

Government loaning  
 G. P. L. or D. \_\_\_\_\_  
 TRUST FUNDS:  
 C. M. Fees \_\_\_\_\_  
 Prof. by des. \_\_\_\_\_  
 S. H. RIGHTS (T. F.) \_\_\_\_\_

Total collections \_\_\_\_\_  
 Post Exch. Co. Fund, etc. (paid by check) \_\_\_\_\_  
 Individuals (paid by check) \_\_\_\_\_  
 Paid by cash \_\_\_\_\_  
 Total amount accounted for \_\_\_\_\_

**PAID**

DATE:        \_\_\_\_\_ 194  
 (Date)  
 I CERTIFY that this roll is made out according to Army  
 Regulations and that entries pertaining to each name are  
 correct. That same detail and/or collection allowance is  
 due the soldier was not deleted in kind for receipt  
 the equivalent thereof is made. That where changed ap-  
 propriations are indicated in this roll, the amounts in-  
 creased or decreased were available or allocated to the  
 station (or stations) indicated by and are accounted for by a  
 separate roll in compliance with the provisions of the  
 regulations. This certification is hereby made.  
 Signature of the Detailing Officer (to be printed)  
 \_\_\_\_\_  
 U. S. A. A. \_\_\_\_\_

Personal Allowance  
 I CERTIFY that I have \_\_\_\_\_ in the amount of this roll and  
 that the soldier has no other allowances which were reported  
 to the office of origin. I agree with the exception of  
 those set forth in Part \_\_\_\_\_.

Commanding Organization  
 NOTE: This certificate will be covered only on the cover of  
 the pay roll when leave statement of the month payment is  
 made.  
 I CERTIFY that the roll is a copy of the roll upon which  
 is based the payment of the soldier's pay. I agree with the  
 amount and the total of the roll and the amounts to be  
 received by the soldier.

Commanding Organization  
 NOTE: This certificate will be covered only on the cover of  
 the pay roll when leave statement of the month payment is  
 made.  
 Post Exchange Co. Fund and Collections paid  
 by check on Treasurer, U. S.

DATE	PAYEE	CHECK NO.	AMOUNT

**DECLASSIFIED**  
 Authority 385078

DATE OF ENLISTMENT or date of active duty	GRADE	NAME, PRESENT AND ASSISTED BY GRANDLAND COMPANY Branch of Department and where applicable date of discharge or date of death as indicated on Certificate of Final Status Number No.	SERIAL NO.	ALLOTMENTS				COLLECTIONS	
				Month and year authorized	Class A	Class B	Class C	Class & Pay allowance	Cont. Lump
		Corporal							
10 June '45		PTO H. CALABRIN	(070676)						
		Corporal							
29 May '45		VITO C. DALINA	(086778)						
		Corporal							
31 May '45		OSCAR A. WILIA	(078539)						
		Pfc							
21 June '45		FEDERICO DEQUITO	(071438)						
		Pfc							
26 June '45		FRANCISCO CATAHAN	(074836)						
		Pfc							
28 June '46		ROBERTO VILLARUYA	(074839)						
		Pfc							
19 June '48		BERNARDIO A. SIAR	(074180)						
		Pfc							
28 June '45		BERNARDIO LOGIO	(084331)						
		Pfc							
28 May '45		BENIGNO MALDONADO	(070525)						
		Pfc							
10 June '45		SEPTIMIANO APODAN	(078535)						
		Pfc							
20 May '45		CRISTOBAL GONZ	((070780)						
		Pfc							
26 June '45		ROSALEO PUNTES	(085444)						
		Pfc							
22 June '48		CING DE LA CRUZ	(071481)						
		Pfc							
		(END OF ROLL)							

Finance Agency This Branch

## COLLECTIONS (continued)

Industry and Address	Mailing Instructions	Amount for Service Charge	Total Amount Due	Total Payments	Balance Paid
			Corporal		
			\$55.00		\$55.00
			Corporal		
			\$55.00		\$55.00
			Corporal		
			\$55.00		\$55.00
			Pfc		
			\$35.00		\$35.00
			Pfc		
			\$35.00		\$35.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Pfc		
			\$27.00		\$27.00
			Total - \$427.50		\$427.50
			\$297.00		\$297.00

Converted at the rate of  
\$.50 to \$1.00

## GRANDLAND COMPANY

I hereby certify that the enlisted men mentioned in this  
Voucher has at least due 3 Months arrears in pay at the rate of grade  
indicated as evidence by DA AGO Form No. 23, or file in this office  
in accordance with the provision of USAFPR Letter File PRHP No. 240  
dated 4 April 1945, Subject "Arrears" in pay of the Philippine Army  
personnel".

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DATE OF PAYMENT	NAME, RESIDENT AND AGENCY OF HEADS AND COMPONENTS	SERIAL No.	ALLOTMENTS					COLLECTIONS	
			Month and year indicated	Class 1	Class 2	Class 3	Class 4	Class 5 and other activities	Gov. Levy
1	SEAGRAM								
3 July 45	Baptista, Felizardo	07071							
	COFOPIAS								
20 June 45	Alvarez, Arturo	07388							
7 July 45	Benitez, Juan Benito	08072							
13 June 45	Benitez, Benito	07202							
	PRIVATE FIRST CLASS								
5 July 45	Abrite, Jose	08158							
6 June 45	Adis, Raymond	07008							
15 June 45	Arroyo, Eveline	08134							
7 July 45	Bayness, Belliana	08472							
28 May 45	Bora, Jesus	07032							
7 June 45	Chavez, Feliciano	08393							
16 June 45	Elcan, Federico	08218							
18 June 45	Fecoles, Guillermo	08256							
8 June 45	Foves, Protacio	08277							
13 June 45	Grisaco, Antonio	08159							
	PRIVATES								
15 June 45	Alora, Maximo	08076							
13 June 45	Arriaga, Felipe	08107							
29 May 45	Calas, Cesar	07690							
29 June 45	Calas, Jesus	08181							
9 July 45	Domanda, Pedro	08078							
15 June 45	Espino, Francisco	07818							
26 May 45	Gonzalez, Gustavo	07828							
12 June 45	Inchay, Florentino	08169							
4 June 45	Jaque, Maximiano	08111							

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Authority 583078

For Use of Finance Department Only

COLLECTIONS (continued)				Agency for Remittance	Total Amount due	Total Collected	Balance Paid	Remarks
Individuals and Associates	Business Firms							
					\$81.00		\$153.00	1 <i>Hodajins</i>
								2
								3
					\$27.00		\$111.00	4 <i>Paul Berpich</i>
					\$27.00		\$111.00	5 <i>Amable Gonzalez</i>
					\$27.00		\$111.00	6 <i>Sanchez</i>
								7
					\$22.00		\$89.00	8 <i>Perico</i>
					\$22.00		\$89.00	9 <i>Spill</i>
					\$22.00		\$89.00	10 <i>Antonia Lopez</i>
					\$22.00		\$89.00	11 <i>Alvarez</i>
					\$22.00		\$89.00	12 <i>Alvarez</i>
					\$22.00		\$89.00	13 <i>Alvarez</i>
					\$22.00		\$89.00	14 <i>Alvarez</i>
					\$22.00		\$89.00	15 <i>Alvarez</i>
					\$22.00		\$89.00	16 <i>Alvarez</i>
					\$22.00		\$89.00	17 <i>Alvarez</i>
								18
					\$18.00		\$84.00	19 <i>Alvarez</i>
					\$18.00		\$84.00	20 <i>Alvarez</i>
					\$18.00		\$84.00	21 <i>Alvarez</i>
					\$18.00		\$84.00	22 <i>Alvarez</i>
					\$18.00		\$84.00	23 <i>Alvarez</i>
					\$18.00		\$84.00	24 <i>Alvarez</i>
					\$18.00		\$84.00	25 <i>Alvarez</i>
					\$18.00		\$84.00	26 <i>Alvarez</i>
					\$18.00		\$84.00	27 <i>Alvarez</i>

Page No. \_\_\_\_\_

REMARKS: This report is a summary of the collections for the month of \_\_\_\_\_ 1945. It is prepared by the Finance Department and is subject to audit. The amounts shown are in U.S. dollars and cents. The names of the contributors are shown in the Remarks column. The amounts shown are in U.S. dollars and cents. The names of the contributors are shown in the Remarks column.

DATE OF PAYMENT Indicate or refer to another page	AUTHORITY AND AGENT BY Name and address of person to whom application should be made, if not specified by the "Routing" slip with Division No.	ALLOTMENTS					COLLECTIONS		
		SERIAL NO.	Month and year disbursed	Class 1	Class 2	Class 3	Class 4	Class 5	Class & pay rate attached
1									
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PAY ROLL

The amount shown FOR ENLISTED MEN chargeable to  
Appropriation No. \_\_\_\_\_ of the \_\_\_\_\_ Dept. \_\_\_\_\_  
of the \_\_\_\_\_ Army is that to be disbursed as follows:

(Organization) \_\_\_\_\_ (Regiment) \_\_\_\_\_  
(Station) \_\_\_\_\_ (Principal army) \_\_\_\_\_

Voucher No. \_\_\_\_\_  
S. H. WILLIAMS  
UNIT \_\_\_\_\_  
ORGANIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

For Month of \_\_\_\_\_ 1948

Total amount disbursed \$ \_\_\_\_\_

For Month of \_\_\_\_\_ 1948

APPROPRIATIONS:

(Symbol)	F.S.A. 19 _____	(Allotment)	\$ _____
	F.S.A. 19 _____		\$ _____
	S. & T. 19 _____		\$ _____
	S. & T. 19 _____		\$ _____
	Total amount disbursed		\$ _____

ALLOTMENT SUMMARY:

Class "N" National Service Life Insurance	\$ _____
Class "R" Allotment	\$ _____
Class "D" Government Insurance Premiums	\$ _____
Class "F" Family Allotment	\$ _____
	\$ _____
Total	\$ _____

DEBT UNITED STATES:

Class "A" Pay Reservation	\$ _____
	\$ _____
	\$ _____

COLLECTIONS—Receipts to appropriations and miscellaneous receipts:

(PA)	\$ _____
(PA)	\$ _____
(PA)	\$ _____
	\$ _____

Government liability

G. P. L. or D.	\$ _____
TRUST FUNDS	\$ _____
C. M. Fund	\$ _____
Fund by doc.	\$ _____
S. H. 218606 (T. F.)	\$ _____
	\$ _____
Total collections	\$ _____

Post Exch. Co. Fund, etc. (paid by check) \$ \_\_\_\_\_

Individuals (paid by check) \$ \_\_\_\_\_

Paid by cash \$ \_\_\_\_\_

Total amount accounted for \$ \_\_\_\_\_

CERTIFY that this roll was made out in accordance with the provisions of the Act of March 3, 1879 (22 Stat. 163), and that the vouchers and receipts thereon are correct and that the amounts herein stated are due and payable to the persons named in the several entries hereon and that the same are not to be paid until the date specified in the several entries hereon and that the same are not to be paid until the date specified in the several entries hereon and that the same are not to be paid until the date specified in the several entries hereon.

S. H. WILLIAMS  
UNIT \_\_\_\_\_  
ORGANIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

Commanding Organization

NOTE: This certificate will be signed only on the day of the pay roll, when the signature of the man for payment is not shown.

POST EXCHANGE CO. FUND AND COLLECTIONS PAID BY CHECK AT TREASURY, U.S.A.

Date \_\_\_\_\_

PAYEE	CHECK NO.	AMOUNT
_____	_____	_____
_____	_____	_____

109

Original Army Form 1098

DECLASSIFIED  
Authority 38 5-078

DATE OF ENLISTMENT Indicate as active (PROCEEDING)	NAME, PRESENT AND AGENCY BY GRADE AND COMPONENT Number of dependents and where applicable, description of dependent to be cared for Attached or filed with Profile R.	SERIAL No.	ALLOTMENTS				COLLECTIONS	
			Mortality and Leave	Class A	Class B	Class C	Class D	Class E
	MAJOR ESTRELA							
9 June 45	HILARIO, GUILHERMO	07182						
16 May 45	WAGNER, AUGUSTO	07042						
	FIRST REGIMENT							
10 June 45	MOTTEGNA, TITO	10411						
	REGIMENT							
<del>16 May 45</del>	<del>MACHADO, JOSE</del>	<del>07046</del>						
16 May 45	HERNAN, DOMINGO	07034						
16 May 45	JORDAO, SICO	07071						
16 May 45	SHIN, POLIX, JR	07033						
	CORPORALES							
16 May 45	AGUIAR, AUGUSTO	07066						
16 May 45	ALVES, HELENO	07054						
11 June 45	DESALES, LUIS	07104						
16 May 45	PIZOR, JOSE	07116						
16 May 45	ROCHA, DOMINGO	07207						
16 May 45	ROCHA, JERRY	07208						
16 May 45	ROCHA, ALBERTO	07209						
16 May 45	ROCHA, OSEAS	07210						
16 May 45	ROCHA, MARCELO	07211						
16 May 45	ROCHA, OSVALDO	07212						
16 May 45	ROCHA, JOSE	07213						
10 June 45	STANLEY, FLORA	07185						
17 June 45	TAMARA, DOMINGO	07176						
17 June 45	VARELA, OSVALDO	07238						
	PRIVATE FIRST CLASS							
16 May 45	ARRESTI, JOSE	07202						
16 May 45	CRUZ, DOMINGO	07204						
16 May 45	CRUZ, SILESCIO	07207						

COLLECTIONS (continued)	Allowance for Retention	Total Amount Due	Thru Collected <i>4/20</i>	Balance <i>due</i>
		255.00		255.00
		255.00		255.00
		210.00		210.00
		<del>155.00</del>		<del>155.00</del>
		155.00		155.00
		155.00		155.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		111.00		111.00
		66.00		66.00
		66.00		66.00
		66.00		66.00

We hereby acknowledge receipt of \$883 of amounts in the column "Balance Due" and require our respective names, and in case of payment of quarters allowances we certify that without dependence actually received compared the addresses shown therein as correct for which allowance are entered in the current period for which allowances are entered we have made corrections in the report of our dependents listed herein as a result of our investigation in the face of corrections for the receipt of the same dependents as shown in activities and reports for the previous or immediate preceding and that there has not been a material change in the status of dependents for either of the periods as stated therein.

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*Handwritten signatures and initials next to each row:*  
 2: *Nelson*  
 3: *Alvarez*  
 5: *Walter S. S. Adams*  
 8: *Walter S. S. Adams*  
 9: *Walter S. S. Adams*  
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 27: *Walter S. S. Adams*

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DATE OF COLLECTION (month and year)	NAME OF DEBTOR	NAME, RESIDENT AND AGENT BY NAME OF DEBTOR AND, where applicable, description of department to be charged as "Department" or "Fund" with number of.	SERIAL No.	ALLOTMENTS					COLLECTIONS	
				Month and year deducted	Class A	Class E	Class D	Class F	Class A per ser- vice	Govt. Liquor
1		PRIVATE FIRST CLASS (CONT.)								
26 MAY 45	45	CARG, OSCAR	072579							
16 MAY 45	45	CHAVEZ, MARIANO	070053							
16 MAY 45	45	JUNQUE, WALTER	071814							
16 MAY 45	45	WARRIOR, RUBEN	070020							
16 MAY 45	45	WARRIOR, JOAQUIN	070922							
13 JUNE 45	45	STANCO, JESUS	073488							
13 JUNE 45	45	<del>STANCO, JESUS</del>	<del>073488</del>							
		PRIVATE								
16 MAY 45	45	<del>AGUIRRE, GONZALO</del>	<del>051593</del>							
20 JUNE 45	45	<del>ARMSTRONG, WALTER</del>	<del>073518</del>							
19 JUNE 45	45	DE LA ROSA, JOSE VINCENTE	070043							
17 JUNE 45	45	BONEDICTO, CRISTOBAL	073557							
17 JUNE 45	45	BUSTAMANTE, DIEGO	073625							
26 JUNE 45	45	CRISTIANO, GABRIEL	072377							
18 MAY 45	45	DELO, POLICIA	070660							
19 MAY 45	45	ESPINOZA, RAFAEL	072549							
19 MAY 45	45	FRANCO, JOSE RUBEN	072542							
17 MAY 45	45	GONZALES, FELIX	070061							
18 MAY 45	45	LOPEZ, JOAQUIN	072541							
18 MAY 45	45	MAYAN, BALBINO	070007							
19 MAY 45	45	MILLER, THOMAS	072576							
12 JUNE 45	45	MURPHY, RICHARD	073246							
16 MAY 45	45	TYGON, JOSE	070015							
20		<del>Every of Rail</del>								
21										

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Authority 383078

Grand Along This Edge

## COLLECTIONS. (continued)

Indebted and Alienation	Address Shown	Amount for Debit- ment	Total Collections	Balance Paid	No.	COLLECTIONS. (continued)									
						Indebted and Alienation	Address Shown	Amount for Debit- ment	Total Collections	Balance Paid	No.				
		66.00	66.00	66.00	1										
		66.00	66.00	66.00	2										
		66.00	66.00	66.00	3										
		66.00	66.00	66.00	4										
		66.00	66.00	66.00	5										
		66.00	66.00	66.00	6										
		66.00	66.00	66.00	7										
		66.00	66.00	66.00	8										
		54.00	54.00	54.00	9										
		54.00	54.00	54.00	10										
		54.00	54.00	54.00	11										
		54.00	54.00	54.00	12										
		54.00	54.00	54.00	13										
		54.00	54.00	54.00	14										
		54.00	54.00	54.00	15										
		54.00	54.00	54.00	16										
		54.00	54.00	54.00	17										
		54.00	54.00	54.00	18										
		54.00	54.00	54.00	19										
		54.00	54.00	54.00	20										
		54.00	54.00	54.00	21										
		54.00	54.00	54.00	22										
		54.00	54.00	54.00	23										
		54.00	54.00	54.00	24										
		54.00	54.00	54.00	25										
		54.00	54.00	54.00	26										
		54.00	54.00	54.00	27										
		TOTAL	4440.00	4440.00											
			4366.00	4366.00											



2445 G-4 SEC. 72M.D. NA AUG '65



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Authority: 883478

242  
18-31  
February 1945

STATEMENT OF RECEIPTS AND PAY MARCH, 1945  
NO. 1000, 1001, 1002, 1003, 1004

Unless otherwise indicated in "REMARKS" column all listed men were last paid to include February 1945.

PAID BY  
F. M. CARTER  
Capt., FS  
126th Dist. Officer  
(FS)

We acknowledge receipt of the amount set opposite our respective names:

3519

No.	Name	AM.	DATE	PERIOD	UNIT	PAID	SIGNATURE	REMARKS
1.	W. J. ...	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	81.00	18-31	Mar. 1945	126th Dist.	81.00	[Signature]	
	"	81.00	18-31	Mar. 1945	126th Dist.	81.00	[Signature]	
	"	81.00	18-31	Mar. 1945	126th Dist.	81.00	[Signature]	
	"	81.00	18-31	Mar. 1945	126th Dist.	81.00	[Signature]	
	"	81.00	18-31	Mar. 1945	126th Dist.	81.00	[Signature]	
2.	W. J. ...	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
	"	18.00	18-31	Mar. 1945	126th Dist.	18.00	[Signature]	
TOTAL						248.18	248.18	Mon

I certify under my official oath that the above persons rendered services during the period covered by this payroll and that their allowances are included in the total amount due to each mentioned therein under existing rates and regulations.

EXPERIDIEN MUSTRE  
Capt. Infantry - 0-32651  
1st. Officer 100M-7111D  
[Signature]  
1st. Officer 100M-7111D  
[Signature]

I certify under my official oath that I have witnessed the payment of this payroll and that each man received the amount set opposite respective names.

I certify under my official oath that I have personally paid the men appearing in this payroll and that each received the amount set opposite their names.

[Signature]  
Capt.

I hereby certify that the EM mentioned in this voucher during the period were not assigned adequate quarters of their permanent assignment and did not occupy any public quarters without charge at their station nor did any of them occupy public quarters assigned to them or to their dependents.

EXPERIDIEN MUSTRE  
Capt. Infantry - 0-32651  
[Signature]  
1st. Officer 100M-7111D  
[Signature]  
1st. Officer 100M-7111D  
[Signature]

I hereby certify that the EM mentioned in this payroll were not paid of their allowance for the period covered by this payroll.

Approved for Payment:  
[Signature]  
Lt-Col., CG  
CG 6th Regt. En.

[Signature]  
1st. Officer 100M-7111D  
[Signature]

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