

HQ "B" Co. 1st Bn. 87th Inf. 82nd Div. PA CAC 8th MD

July - August '45

DECLASSIFIED

Authority: NND 883078

Set No. _____

GENERAL PAYROLL
"B" Co, 87th Inf (GP)
Dischargee
(Org. _____)

Gen Form i.o. (A) Revised Jan 30, 1946

I HEREBY ACKNOWLEDGE to have received from 1st Lt W. R Garcia, TS, 24th PDS, PA the sum of _____ specified opposite _____, being in full compensation (difference in pay) for our services from the period stated. (Auth: _____)

Difference in pay _____ Month _____ 1 July to 19 Aug. 1945 Journal Voucher No. _____

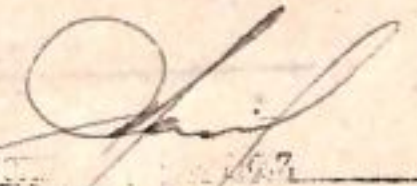
NO.	NAME	PERIOD OF SERVICE	AMOUNT	DATE PAID	REMARKS
	Marcelo Argones	1 July to 19 Aug. 45	34.10		
	Not used				

34.10
27.07 Marcelo Argones

Processed 17 Aug. 45
Discharged 19 Aug. 45

CERTIFICATE

I CERTIFY on my official oath that the above Pay Roll, consisting of _____ sheets, is correct and that the services have been duly rendered as stated.



1st Lt _____
Personnel Officer

DECLASSIFIED
Authority NND 883078

CERTIFICATION

1. I CERTIFY on my official oath that the above Pay Roll, consisting of 6 sheets, is correct and the services have been duly rendered as stated.

VICENTE C. RAMIREZ
1st Lieut., Infantry,
Personnel Officer

2. I APPROVE the above Pay Roll consisting of 6 sheets, payable for approximately \$100.00

Maximo Tibinda
MAXIMO TIBINDA
1st Lieutenant, Infantry
Commanding

3. I CERTIFY on my official oath that I have personally paid in cash to each person whose name appears on the above roll the amount set opposite his name, after satisfying myself that the names and amounts enumerated are the real claimants, for total amount paid by me on this Pay Roll, consisting of 6 sheets.

4. I CERTIFY on my official oath that I have witnessed payment in cash to each person whose name appears on the above payroll consisting of 6 sheets to the amount set opposite his name and by unit.

Maximiano Tirad
MAXIMIANO TIRAD
(name)
1st Lieutenant, Inf.
(Formerly CO., "E" Co., 87th Inf.
Unit Commander

DECLASSIFIED
Authority NO 883078

No. _____

GENERAL PAYROLL

Gen Form No. (A) Revised Jan 30, 1946

RECORDED
(Organization)

60th AR. CP. CASP. INF. (CL)
1st INFANTRY DIV. (AV)

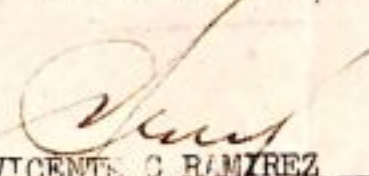
I HEREBY ACKNOWLEDGE to have received from 1st Lt V. R Garcia, FS, 2nd INFANTRY DIV., PA the sum herein specified opposite our respective names, being in full compensation (difference in pay) for our services from the period stated. (Auth: _____)

Month of 1 Jul 45 to 13 Aug 1945 Journal Voucher No. _____

DATE		RANK & ASSN	PERIOD OF SERVICE	MONTHLY SALARY	AMOUNT DUE	DIFFER	REGION	CLASS N	CASH RECD	NO OF PAYEE	SIGNATURE	INITIAL	RE-MARKS
7/20/45	Tinoco, Aurelio	1st Lt-112464	1 Jul 45	127.00	127.00				127.00	1	Tinoco	T	Discharged on 13 Aug 45
7/20/45	Tinoco, Placencia	1st Lt-112467	1 Jul 45	127.00	127.00				127.00	1	Tinoco	T	Discharged on 13 Aug 45
	1st Lt of Fall		25 Aug 45										

CERTIFICATE

1. I CERTIFY on my official oath that the above Pay Roll, consisting of 2 sheets, is correct and that the services have been duly rendered as stated.


VICENTE C. RAMIREZ
1st Lieut, Infantry
Personnel Officer

DECLASSIFIED
Authority NND 883078

CERTIFICATION

1. I CERTIFY on my official oath that the above Pay Roll, consisting of 2 sheets, is correct and the services have been duly rendered as stated.

VICENTE C RAMIREZ
1st Lieut., Infantry
Personnel Officer

2. I APPROVE the above Pay Roll consisting of 2 sheets, paid in full.

[Signature]
1st Lieut., Infantry
Commanding

3. I CERTIFY on my official oath that I have disbursed the amount set forth in the above Pay Roll, consisting of 2 sheets, to each employee whose name appears on the above claimants, The total amount paid me on the Pay Roll, consisting of 2 sheets, is \$100.00.

4. I CERTIFY on my official oath that I have made payment in cash to each person whose name appears on the above payroll consisting of 2 sheets to the amount set opposite his name and my initials [initials].

[Signature]
1st Lieut., Inf (PA)
CO, 87th Co, 87th Inf (AF)

Unit Commander

DECLASSIFIED
Authority NND 883078

(Organization)

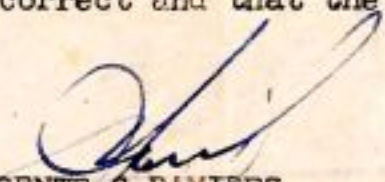
I HEREBY ACKNOWLEDGE to have received from 1st Lt V. R Garcia, PS, 24th FLS, PA the sum herein specified opposite our respective names, being in full compensation (difference in pay) for our services from the period stated. (Auth: Cir 194, Hq PA, cs):

Month of 1 Jul 45 to 15 Aug 45 1945 Journal Voucher No. _____

No:	RANK & ASN	PERIOD OF SERVICE	MONTHLY SALARY	AMOUNT DUE	DEDUCTION			CASH RECD	NO: OF PAYEE	SIGNATURE	INITIAL	RE-MARKS
					ASB	FIN	CLASS I					
		T										
1	1st Lt V. R Garcia	1 Jul 45 to 15 Aug 45	737.09	737.09				737.09		V. R Garcia		

CERTIFICATE

1. I CERTIFY on my official oath that the anove Pay Roll, consisting of _____ sheets, is correct and that the services have been duly rendered as stated.


 VICENTE C RAMIREZ
 1st Lieut, Infantry
 Personnel Officer

DECLASSIFIED Authority NND 883078

Above Pay Roll consists of _____ sheets, payable from appropriation from _____

Maximo Albinda

MAXIMO ALBINDA
Lt Col, Inf
Comdg

3. I CERTIFY on my official oath that I have personally paid in cash to each employee whose name appears on the above pay roll the amount set opposite his name, after satisfying myself that the persons above enumerated are the real claimants. The total amount paid by me on this Pay Roll, consisting of _____ sheets is \$ _____.

4. I CERTIFY on my official oath that I have witnessed the payment in cash to each person whose name appears on the above payroll consisting of _____ sheets to the amount set opposite his name and my initials.

Maximiliano V. Tirad

MAXIMILIANO V. TIRAD

(Name)

1st Lieut, Inf, GO, "B" Co, 87th Inf (GP)

(Rank)

Unit Commander

DECLASSIFIED
Authority NND 883078

GENERAL PAYROLL

Gen Form No. (A) Revised Jan 10, 1946

(Organization)

I HEREBY ACKNOWLEDGE to have received from 1st Lt V. R Garcia, PS, 24th FDS, PA the sum herein specified opposite respective names, being in full compensation (difference in pay) for our services from the period stated. (Auth: G. 194, 14 PA, cs):

Month of July 1944 Journal Voucher No. 5

No.	RANK & ASN	PERIOD OF SERVICE	MONTHLY	AMOUNT	DEDUCTION			CASH	NO	SIGNATURE	INITIAL	RE-
			SALARY	DUE	ASB	FIN	CLASS N					
		T										
		1 Jul 45 to 15 Aug 45										

CERTIFICATE

1. I CERTIFY on my official oath that the above Pay Roll, consisting of _____ sheets, is correct and that the services have been duly rendered as stated.

Vicente C Ramirez
 VICENTE C RAMIREZ
 1st Lieut, Infantry
 Personnel Officer

DECLASSIFIED
 Authority NND 883078

Pay Roll of _____ sheets, payable from appropriation from _____

Maximo Albinda
MAXIMO ALBINDA
Lt Col, Inf
Comdg

3. I CERTIFY on my official oath that I have personally paid in cash to each employee whose name appears on the above payroll the amount set opposite his name, after satisfying myself that the persons above enumerated are the real claimants. The total amount paid by me on this Pay Roll, consisting of _____ sheets is \$ _____.

4. I CERTIFY on my official oath that I have witnessed the payment in cash to each person whose name appears on the above payroll consisting of _____ sheets to the amount set opposite his name and my initials.

Maximiliano V. Tread
MAXIMILIANO V. TREAD

(Name)
1st Lieut, Inf, CO, "B" Co, 87th Inf (GP)

(Rank)
Unit Commander

DECLASSIFIED
Authority NO 883078

DECLASSIFIED
Authority: ND 883078

242.5 PAYROLL
HQ "B" Co. 1st Bn. 87th Inf. 82nd Div. PA CAC 8th MD
Apr. '45

DECLASSIFIED
Authority NO 883078

DECLASSIFIED
Authority NND 883078

1. This receipt consists of one (1) sheet

"B" Form No. 87
FOR THE PAYROLL
OF THE ARMY
April 31, 1945


YOU HEREBY
TO BE
VERONIC A. GARO
1st Lieutenant US
DC, 24TH FINANCE SECTION
APO 718
April, 1945

I hereby acknowledge receipt in cash from _____ of the amount in column
of the roll set opposite their names.

No.	Name	Rank	Serial	Pay	Remarks	Signature	Remarks	
1	Biscarino, Agapito	vt.	05-09786	16.00	none	4/2/45 \$21.48 ⁰⁶	Agapito Biscarino	single
2	Castro, Manuel	"	05-09805	18.00	-do-	-do- \$21.48 ⁰¹	Manuel Castro	-do-
3	Munoz, Tiburcio	"	05-09853	19.00	-do-	-do- \$21.48 ⁰⁵	Tiburcio Munoz	-do-

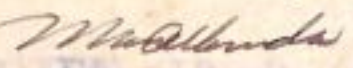
I certify under my official oath that the above persons
received services covered by the period stated opposite their names.

I certify under my official oath that I have
personally paid the men appearing in this ROLL in
the amount stated opposite their names.


MAX V. TREAD, O-36721
(Unit Commander)
1st Lieut., 87th Infantry
(Rank, Branch of Service)

(Disbursing Officer)
(Rank, Branch of Service)

Approved For
Payment



MAX V. TREAD, O-36721
(Commanding Officer)
1st Lieut., 87th Infantry

I certify under my official oath that I have
witnessed the payment of this ROLL that each man
received the amount stated opposite their names.

CERTIFICATION

I certify under my official oath that the men appearing in
this ROLL has not drawn his salary for the period stated
opposite his name because they were sick.

(Witnessing Officer)
(Rank, Branch of Service)


MAX V. TREAD, O-36721
1st Lieut., Infantry
(Unit Commander)

RESOLVED

KNOW ALL MEN BY THESE PRESENTS

That I, MARIA KWONG Chinese, 56 years old, widow of the late Kwong Ah Sam, with residence and post office address at

Sept, 18 / 45

Tinched Kong Sinto,

Ngay, ayaw kasalitan ng kasabotan sa inyong baut
nga ng yata ni Maria Kwong among mapalit

DECLASSIFIED

Authority AND 883078

242.5 PAYROLL
HQ "B" Co. 1st Bn. 87th Inf. 82nd Div. PA CAC 8th MD June '45

DECLASSIFIED
Authority: ND 883078

DECLASSIFIED
 Authority NND 883078

This receipt of one (1) sheet

FORM NO. 10, REGISTERED
 JUN 31, 1945

ISSUED BY
 FRANCIS R. GARCIA
 1st Lieutenant
 24th INFANTRY SECTION
 1945 718
 June 1945

I hereby acknowledge receipt in cash from _____ of the amount in column
 "PAY" set opposite their names;

No.	Name	Service No.	Pay	Remarks	Period	Amount	Remarks
1	Roda, Jorge	VI 52-38581	18.00		6/1-30/45	28.00	Louie Roda
2	Biscayno, Asarito	" 45-3718	18.00	none	-do-	18.00	Agapito Biscayno
3	Castro, Manuel	" 45-3815	18.00	-do-	-do-	18.00	Manuel Castro
			TOTAL				

I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

[Signature]

 1st Lieut., 87th Infantry
 (Rank, Branch of Service)

Approved For
 Payment

[Signature]

 1st Lieut., 45th Inf., Jr.

I certify under my official oath that I have personally paid the men appearing in this PAYROLL in the amount stated opposite their names.

 (Disbursing Officer)

 (Rank, Branch of Service)

I certify under my official oath that I have witnessed the payment of this PAYROLL that each man received the amount stated opposite his name.

 (Witnessing Officer)

 (Rank, Branch of Service)

I certify under my official oath that the men appearing in this PAYROLL has not drawn his salary for the period stated opposite his name because they were sick.

[Signature]

 1st Lieut., Infantry
 (Unit Commander)

DECLASSIFIED
Authority NND 883078

242.5 PAYROLL
HQ "B" Co. 1st Bn. 87th Inf. 82nd Div. PACAC 8th MD May '45

DECLASSIFIED
Authority ND 883078

DECLASSIFIED
 Authority NND 883078

THE GOVERNMENT OF THE PHILIPPINES
 PAYROLL OFFICE
 MONTH OF May 31, 1945

VOUCHER NO. _____
 CHECKED BY
 VICENCIO R. GARCIA
 1st Lieutenant PS
 NO. 34TH FINANCE SECTION
 APO 718

We hereby acknowledge receipt in cash from _____ of the amount in column
 "AMOUNT PAID" set opposite their names;

NO.	NAME	GRADE	UNIT	DATE	AMOUNT	REMARKS
1.	Biscayno, Agapito	vt.	25-99730	5/1-31/45	18.00	Agapito Biscayno - single
2.	Castro, Manuel	"	43-9985	-do-	18.00	Manuel Castro - do-

I certify under my official oath that the above persons rendered services covered by the payroll stated opposite their names.

[Signature]
 1st Lieut., Infantry
 (rank, branch of service)

Approved For
 Payment

[Signature]
 1st Lieut., Infantry
 (rank, branch of service)

I certify under my official oath that I have personally paid the men appearing in this PAYROLL in the amount stated opposite their names.

 (Disbursing Officer)
 (rank, branch of service)

I certify under my official oath that the men appearing in this PAYROLL has not drawn his salary for the period stated opposite his name because they were sick.

[Signature]
 1st Lieut., Infantry
 (rank, branch of service)

I certify under my official oath that I have witnessed the payment of this PAYROLL that each man received the amount stated opposite his name.

 (Witnessing Officer)
 (rank, branch of service)

DECLASSIFIED
Authority NND 883078

242.5 PAYROLL
HQ "B" Co. 1st Bn. 87th Inf. 82nd Div. PA 8th MD Mar. '44

DECLASSIFIED
Authority: ~~AND~~ 883078

USFIP, CAC, OGO, "B" CO., 1st BN., 87th INF

25 March 1944

Vno. 163

IMPROVISED PAYROLL for "B" Co., 1st Bn., 87th Inf., Regt., CAC
 for the month of February, 1944.

1. I certify to have this date received from Lt. Maximiano V. Tirad Co. Comdr., "B" Co., 1st Bn., 87th Inf. Regt., CAC, the amount set opposite my name as partial salary for the month of February, 1944.

2. I further certify that I have not been from Negros or Bohol and has not received any cash loan or partial salary whatsoever there, nor surrendered or captured. (Except those captured and have not ~~surrendered~~ surrendered their arms.)

NO.	NAMES	RANKS	DATE OF INDUCTION	AUTHORITY	PARTIAL SALARY	SOLDIERS SIGNATURE
1	Eleuterio Gako	Pfc.	Nov. 23, 1943	None dated	\$ 20.00	Eleuterio Gako
2	Guillano Parante	Pvt.	Nov. 24, 1943	"	\$ 20.00	Guillano Parante
3						
4						
5						
Total					\$ 40.00	

MAXIMIANO V. TIRAD
 Bvt. 1st Lieut Inf-USFIP
 Company Comdr

DECLASSIFIED

Authority AND 883078

242.5 PAYROLL
HQ B Co. 1st Bn. 87th Inf. 82nd Div. PA CAC 8th MD July 45

242.5 Payroll
HQ B Co. 1st Bn. 87th Inf.
82nd Div. PA CAC 8th MD
July 1945

DECLASSIFIED
Authority: ~~ND~~ 883078

DECLASSIFIED
Authority NND 883078

July 31, 1945

1st Lieutenant
July 1945

I hereby acknowledge receipt in cash from _____ of the amount in column _____ of the amount in column _____ set opposite their names:

No.	Name	Rank	Serial	Branch	Unit	Period	Amount	Signature	Status
1	Araven, Pablo	Cpl.	105-09701	Inf.	1st Lt.	7/1-31/45	13.00	Pablo Araven	Married
2	Roscoso, Pedro	"	102-03899	"	"	"	20.00	Pedro Roscoso	-do-
3	Miguel, Gaspar	Cvt.	105-09786	Inf.	1st Lt.	"	10.00	Gaspar Miguel	Single
4	Castro, Manuel	"	105-09800	Inf.	1st Lt.	"	10.00	Manuel Castro	-do-
5	Llenos, Atencodoro	"	102-2455	Inf.	1st Lt.	"	10.00	Atencodoro Llenos	Married
6	Mendez, Mateo	"	102-2803	Inf.	1st Lt.	"	10.00	Mateo Mendez	-do-
7	Roda, Loreto	"	102-2821	Inf.	1st Lt.	"	10.00	Loreto Roda	-do-
8	Carra, Carlos de la	"	104-0502	Inf.	1st Lt.	"	10.00	Carlos de la Carra	-do-
9	Camacho, Basilio	"	102-09019	Inf.	1st Lt.	"	10.00	Basilio Camacho	-do-

B-S & MOWPO RG

I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

[Signature]

1st Lt., Infantry
(Unit Commander)

I certify under my official oath that I have personally paid the sum appearing in this column in the amount stated opposite their names.

(Issuing Officer)
(Rank, Branch of Service)

I certify under my official oath that the man appearing in this column has not drawn his salary for the period stated opposite his name because some of them were hospitalized and the rest failed to obtain marriage certificates.

[Signature]

1st Lt., Infantry
(Unit Commander)

I certify under my official oath that I have witnessed the payment of this column that each man received the amount stated opposite his name.

(Issuing Officer)
(Rank, Branch of Service)

DECLASSIFIED
Authority: ~~AND~~ 883078