

242.5 PAYROLLS 1ST MD
COMBAT CO. DET. 3rd Bn. 15th Inf. USAFIR.NL
JUNE '45

DECLASSIFIED
Authority 885078

COMBAT CO. DET.
3rd Bn. 15th Inf. 15th
Inf. USAFIR.NL

US Forces in the Phils. Hqs. 126th Inf. Regt.

Special Orders } Month of Feb. '44

DECLASSIFIED

Authority 885078

SUPPLEMENTARY PAYROLL FOR COMBAT COMPANY DETACHMENT, 3RD BN. 15TH INFANTRY

1st MD

-000-

Jan. 9 - March 31
 1 - 30 April
 1 - 31 May
 1 - 30 June

(PROVISIONAL FORM)

Organization: Combat Company Detachment, Station: Angaki Airstrip, Month Covered by this Payroll
3rd. Bn. 15th Infantry

NO.	NAME	RANK	SERIAL NO.	BASE PAY	PERIOD COVERED	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Mirindo, Sixto	2nd Lt.		P250.00	Jan. 9 - March 31	P904.81	<i>[Signature]</i>	w/otr./all.
2.	Mirindo, Sixto	2nd Lt.		P250.00	1 to 30 April	P330.00	<i>[Signature]</i>	w/otr./all.
3.	Mirindo, Sixto	2nd Lt.		P250.00	1 to 31 May	P330.00	<i>[Signature]</i>	w/otr./all.
4.	Mirindo, Sixto	2nd Lt.		P250.00	1 to 30 June	P330.00	<i>[Signature]</i>	w/otr./all.

TOTAL - - - - - P

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

This voucher consists of ONE sheet.
 I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

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

 (Unit Commander)

APPROVED FOR PAYMENT: _____
 (Rank, Branch of Service)

 (Commanding Officer)

 (Rank, Branch of Service)

 (Disbursing Officer)

 (Rank, Branch of Service)

 (Witnessing 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 set opposite his name.

Date _____

DECLASSIFIED
 Authority 883078

SUPPLEMENTARY PAYROLL FOR COMBAT COMPANY DETACHMENT, 3RD BN. 15th INFANTRY

-000-

Jan. 9 March 31
 1 - 30 April
 1 - 31 May
 1 - 30 June

(PROVISIONAL FORM)

Organization: Combat Company Detachment, Station: Asaki Airstrip, South Covered by this Payroll
3rd. Bn. 15th Infantry

NO.:	NAMES	RANK	SERIAL NO:	ARMY MONTHLY: BASE PAY:	PERIOD COVERED:	AMOUNT PAID:	SIGNATURE OF PAYEE:	REMARKS
1.	Mirindo, Sixto	2nd Lt:		P250.00	Jan, 9-March 31:	P904.91:	<i>Mirindo</i>	w/otr./all.
2.	Mirindo, Sixto	2nd Lt:		P250.00	1 to 30 April:	P330.00:	<i>Mirindo</i>	w/otr./all.
3.	Mirindo, Sixto	2nd Lt:		P250.00	1 to 31 May	P330.00:	<i>Mirindo</i>	w/otr./all.
4.	Mirindo, Sixto	2nd Lt:		P250.00	1 to 30 June	P330.00:	<i>Mirindo</i>	w/otr./all.
TOTAL - - - - -						-P		

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.
 This voucher consists of ONE sheet.
 I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

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

 (Unit Commander)

 (Disbursing Officer)

 (Rank, Branch of Service)

 (Rank, Branch of Service)

APPROVED FOR PAYMENT:

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

 (Commanding Officer)

 (Witnessing Officer)

 (Rank, Branch of Service)

 (Rank, Branch of Service)

Date _____

DECLASSIFIED
 Authority 883078

SUPPLEMENTARY PAYROLL FOR COMBAT COMPANY DETACHMENT, 3RD BN. 15th INFANTRY.

-000-

(PROVISIONAL FORM)

Organization: Combat Company Detachment, Station: Angaki Airstrip, Month Covered by this Payroll Jan 9 - March 31
 3rd Bn. 15th Infantry 1 - 30 April
1 - 31 May
1 - 30 June

NO.:	N A M E	RANK	SERIAL NO:	ARMY MONTHLY: BASE PAY:	PERIOD COVERED:	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Mirindo, Sixto	2nd Lt:		P250.00:	Jan. 9-March 31:	P904.81:	<i>Mirindo</i>	w/ctr./all.
2.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 30 April:	P330.00:	<i>Mirindo</i>	w/ctr./all.
3.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 31 May:	P330.00:	<i>Mirindo</i>	w/ctr./all.
4.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 30 June:	P330.00:	<i>Mirindo</i>	w/ctr./all.
TOTAL - - - - - P								

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

This voucher consists of ONE sheet.

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

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

APPROVED FOR PAYMENT:

 (Unit Commander)

 (Rank, Branch of Service)

 (Commanding Officer)

 (Rank, Branch of Service)

 (Disbursing Officer)

 (Rank, Branch of Service)

 (Witnessing Officer)

 (Rank, Branch of Service)

Date _____

DECLASSIFIED
 Authority 883078

SUPPLEMENTARY PAYROLL FOR COMBAT COMPANY DETACHMENT 3RD BN. 15TH INFANTRY

-000-

(PROVISIONAL FORM)

Organization: Combat Company Detachment 3rd Bn. 15th Inf. Station: Angaki Airstrip, Month covered by this Payroll-1-30 April
 Jan 9-March 31
 1-31 May
 1-30 June

NO.	NAME	RANK	SERIAL NO.	MONTHLY BASE PAY	PERIOD COVERED	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Mirando, Sixto	2nd Lt.		P250.00	Jan. 9-March 31	P904.81	<i>[Signature]</i>	w/otr./all
2.	Mirando, Sixto	2nd Lt.		P250.00	1 to 30 April	P330.00	<i>[Signature]</i>	w/otr./all
3.	Mirando, Sixto	2nd Lt.		P250.00	1 to 31 May	P330.00	<i>[Signature]</i>	w/otr./all.
4.	Mirando, Sixto	2nd Lt.		P250.00	1 to 30 June	P330.00	<i>[Signature]</i>	w/otr./all.
				TOTAL - - - - -		P		

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

This voucher consist of ONE sheet.
 I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

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

 (Unit Commander)

 (Disbursing Officer)

APPROVED FOR PAYMENT: _____
 (Rank, Branch of Service)

 (Rank, Branch of Service)

 (Commanding Officer)

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

 (Rank, Branch of Service)

 (Witnessing Officer)

Dts _____

DECLASSIFIED
 Authority 883078

 (Rank, Branch of Service)

SUPPLEMENTARY PAYROLL FOR COMBAT COMPANY DETACHMENT, 3RD BN, 15TH INFANTRY

-000-

(PREVISIONAL FORM)

Organization: Combat Company Detachment, Station: Angaki Airstrip, Month Covered by this Payroll

1-31 May
Jan 9-March 31
1 - 30 April
1 - 30 June

NO.:	NAMES	RANK:	SERIAL NO:	BASE PAY:	PERIOD COVERED:	AMOUNT PAID:	SIGNATURE OF PAYEE:	REMARKS:
1.	Mirindo, Sixto	2nd Lt:		P250.00:	Jan. 9-March 31:	P904.81:	<i>[Signature]</i>	w/qtr./all.
2.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 30 April:	P330.00:	<i>[Signature]</i>	w/qtr./all.
3.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 31 May:	P350.00:	<i>[Signature]</i>	w/qtr./all.
4.	Mirindo, Sixto	2nd Lt:		P250.00:	1 to 30 June:	P330.00:	<i>[Signature]</i>	w/qtr./all.
TOTAL - - - - -						P		

We here by acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names. This voucher consists of ONE sheet. I certify under my official oath that the above persons rendered services covered by the period stated opposite their names.

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

(Unit Commander)

(Rank, Branch of Service)

Approved For Payment:

(Commanding Officer)

(Rank, Branch of Service)

(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 set opposite his name.

(Witnessing Officer)

(Rank, Branch of Service)

Date _____

UNITED STATES ARMED FORCES IN THE PHILIPPINES, NORTH LUZON

-000-

(PROVISIONAL FORM)

PAYROLL

(ENLISTED MEN)
(OFFICERS)

VOUCHER NO. _____

Organization: Combat Company Detachment, Station: Angaki, Airstrip, Month Covered by this Payroll Jan. 9 March 31
3rd Ba. 15th Infantry

NO.	NAME	ARMY RANK	MONTHLY PAY	PERIOD COVERED	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Cacal, Andres	Cpl.	P37.00	Jan 9-March 31	P134.33	<i>Andres Cacal</i>	w/atr./all.
2.	Ramiro, Anastacio	Pfc.	P22.00	Jan 9-March 31	P 82.23		w/atr./all.
3.	Agtang, Sabas	Pfc.	P22.00	Jan 9-March 31	P 82.23	<i>Sabas Agtang</i>	w/atr./all.
4.	Llamas, Andres	Pfc.	P22.00	Jan 9-March 31	P 60.30	<i>Andres Llamas</i>	
5.	Ruadap, Jose	Pfc.	P22.00	Jan 9-March 31	P 60.30	<i>Jose Ruadap</i>	
6.	Harut, Sabino	Pvt.	P18.00	Jan 9-March 31	P 49.34	<i>Sabino Harut</i>	
7.	Guzman, Gustaquio	Pvt.	P18.00	Jan 9-March 31	P 49.34	<i>Gustaquio Guzman</i>	
8.	Doctolero, Arsenio	Pvt.	P18.00	Jan 9-March 31	P 49.34	<i>Arsenio Doctolero</i>	
TOTAL - - - - -					P		

SHEET NO. 1

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

DECLASSIFIED
Authority 883078

UNITED STATES ARMED FORCES IN THE PHILIPPINES, NORTH LUZON

-000-

(ENLISTED MEN)

(OFFICERS)

VOUCHER NO. _____

(PROVISIONAL FORM)

PAYROLL

Organization: Combat Company Detachment, Station: Angaki, Airstrip, Month Covered by this Payroll Jan. 9 - March 31
3rd Bn. 15th Infantry

NO.	NAME	RANK	SERIAL NO.	BASE PAY	PERIOD COVERED	AMOUNT PAID	AMOUNT OF PAY	REMARKS
1.	Cacal, Andres	Cpl.		P37.00	Jan 9 - March 31	P134.33		Andres Cacal w/otr./all.
2.	Ramiro, Anastacio	Pfc.		P22.00	Jan 9 - March 31	P82.23		w/otr./all.
3.	Agtang, Sabas	Pfc.		P22.00	Jan 9 - March 31	P 82.23		Sabas Agtang /otr./all.
4.	Llamas, Andres	Pfc.		P22.00	Jan 9 - March 31	P 60.30		Andres Llamas
5.	Ruadap, Jose	Pfc.		P22.00	Jan 9 - March 31	P 60.30		Jose Ruadap
6.	Barut, Sabino	Pvt.		P18.00	Jan 9 - March 31	P49.34		Sabino Barut
7.	Guzman, Eustaquio	Pvt.		P18.00	Jan 9 - March 31	P 49.34		Eustaquio Guzman
8.	Doctolero, Arsenio	Pvt.		P18.00	Jan 9 - March 31	P 49.34		Arsenio Doctolero
TOTAL - - - - -								

SHEET NO. 1

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DECLASSIFIED
 Authority 883078

UNITED STATES ARMED FORCES IN THE PHILIPPINES, NORTH LUZON

-000-

(ENLISTED MEN)

VOUCHER NO. _____

PAYROLL

(OFFICERS)

(PROVISIONAL FORM)

Organization: Combat Company, Detachment Station: Angaki, Airstrip, Month Covered by this Payroll Jan. 9-March 31
3rd Bn. 15th Infantry

No.	Name	RANK	DATE	AMOUNT PAID	PERIOD COVERED	SIGNATURE OF PAYEE	REMARKS
1.	Cscal, Andre	Cpl.	P37.00	P134.33	Jan. 9-March 31	Andres Cascal	w/ptr./all
2.	Ramiro, Anastacio	Pfc.	P22.00	P 82.23	Jan. 9-March 31		w/ptr./all.
3.	Agtang, Sabas	Pfc.	P22.00	P 82.23	Jan. 9-March 31	Sabas Agtang	w/ptr./all.
4.	Llamas, Andres	Pfc.	P22.00	P 60.30	Jan. 9-March 31	Andres Llamas	
5.	Ruadap, Jose	Pfc.	P22.00	P 60.30	Jan. 9-March 31	Jose Ruadap	
6.	Barut, Sabino	Pvt.	P18.00	P 49.34	Jan. 9-March 31	Sabino Barut	
7.	Guzman, Eustaquio	Pvt.	P18.00	P 49.34	Jan. 9-March 31	Eustaquio Guzman	
8.	Doctolero, Arsenio	Pvt.	P18.00	P 49.34	Jan. 9-March 31	Arsenio Doctolero	
		TOTAL		P			

SHEET NO. 1

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DECLASSIFIED
 Authority 883078

UNITED STATES ARMED FORCES IN THE PHILIPPINES, NORTH LUZON

-000-
(ENLISTED MEN)
(OFFICERS)

(PROVISIONAL FORM)

PAYROLL

Organization: Combat Company Detachment, 3rd Bn. 15th Infantry Station: Angaki Airstrip Month Covered by this Payroll Jan. 9, March 31

NO.	NAMES	RANK	SERIAL NO.	BASE PAY	PERIOD COVERED	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Gacal, Andres	Epl.	P37	00	Jan 9-March 31	P134.33	<i>Andres Gacal</i>	w/qtr./all.
2.	Ramiro, Anastacio	Pfc.	P22	00	Jan 9-March 31	P 82.23		w/qtr./all.
3.	Agtang, Sebas	Pfc.	P22	00	Jan 9-March 31	P 82.23	<i>Sebas Agtang</i>	w/qtr./all.
4.	Llamas, Andres	Pfc.	P22	00	Jan 9-March 31	P 60.30	<i>Andres Llamas</i>	
5.	Rudap, Jose	Pfc.	P22	00	Jan 9-March 31	P 60.30	<i>Jose Rudap</i>	
6.	Barut, Sabino	Pvt.	P18	00	Jan 9-March 31	P 49.34	<i>Sabino Barut</i>	
7.	Guzman, Eustaquio	Pvt.	P18	00	Jan 9-March 31	P 49.34	<i>Eustaquio Guzman</i>	
8.	Doctolero, Arsenio	Pvt.	P18	00	Jan 9-March 31	P 49.34	<i>Arsenio Doctolero</i>	
TOTAL - - - - -						-P		

SHEET NO. 1

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

DECLASSIFIED
Authority 883078

(PROVISIONAL FORM)

PAYROLL

(OFFICERS)

Organization: Combat Company Detachment, 3rd Bn. 15th Infantry Station: Angaki, Airstrip, Month Covered by this Payroll Jan. 9-March 31

NO.	NAMES	RANK	SERIAL NO.	ARMY MONTHLY BASE PAY	PERIOD COVERED	AMOUNT PAID	SIGNATURE OF PAYEE	REMARKS
1.	Casal, Andres	Cpl.		P37.00	Jan 9-March 31	P134.33	<i>Andres Casal</i>	w/ qtr./all.
2.	Ramiro, Anastacio	Pfc.		P22.00	Jan 9-March 31	P 82.23		w/ qtr./all.
3.	Agtang, Sabas	Pfc.		P22.00	Jan 9-March 31	P 82.23	<i>Sabas Agtang</i>	w/ qtr./all.
4.	Llanas, Andres	Pfc.		P22.00	Jan 9-March 31	P 60.30	<i>Andres Llanas</i>	
5.	Ruadap, Jose	Pfc.		P22.00	Jan 9-March 31	P 60.30	<i>Jose Ruadap</i>	
6.	Barut, Sabino	Pvt.		P18.00	Jan 9-March 31	P 49.34	<i>Sabino Barut</i>	
7.	Gugman, Eustaquio	Pvt.		P18.00	Jan 9-March 31	P 49.34	<i>Eustaquio Gugman</i>	
8.	Doctolero, Arsenio	Pvt.		P18.00	Jan 9-March 31	P 49.34	<i>Arsenio Doctolero</i>	
TOTAL - - - - - P								

SHEET NO. 1

We hereby acknowledge receipt in CASH of amounts in the column "AMOUNT PAID" set opposite our respective names.

DECLASSIFIED
Authority 883078

This voucher consist of TWO sheets.

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

J. P. ...
SERGIO MIRINDO

(Unit Commander)

2nd Lieut. Inf. PA
(Rank, Branch of Service)

APPROVED FOR PAYMENT:

(Commanding Officer)

(Rank, Branch of Service)

Date _____

I certify under my official oath that I have personally paid men appearing in the ROLL 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 the Payroll that each man received the amount set opposite his name.

(Witnessing Officer)

(Rank, Branch of Service)

This voucher consist of TWO sheets.

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


SIXTO MIRINDO

(Unit Commander)

2nd Lieut. Inf. PA

(Rank, Branch of Service)

APPROVED FOR PAYMENT:

(Commanding Officer)

(Rank, Branch of Service)

Date _____

I certify under my official oath that I have personally paid men appearing in the ROLL 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 the Payroll that each man received the amount set opposite his name.

(Witnessing Officer)

(Rank, Branch of service)

DECLASSIFIED
Authority 883078

This voucher consist of TWO sheets.

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

[Handwritten Signature]

SIXTU WIKINDU

(Unit Commander)

2nd Lieut. Inf. PA.

(Rank, Branch of Service)

Approved For Payment:

(Commanding Officer)

(Rank, Branch of Service)

Date _____

I certify under my official oath that I have personally paid men appearing in the ROLL 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 the Payroll that each man received the amount set opposite his name.

(Witnessing Officer)

(Rank, Branch of Service)

DECLASSIFIED
Authority 883078

This voucher consist of TWO sheets.

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

Sixto Mirando
SIXTO MIRANDO

(Unit Commander)

2nd Lieut. Inf. PA.

(Rank, Branch of Service)

APPROVED FOR PAYMENT:

(Commanding Officer)

(Rank, Branch of Service)

Date _____

I certify under my official oath that I have personally paid men appearing in the ROLL 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 the Payroll that each man received the amount set opposite his name.

(Witnessing Officer)

(Rank, Branch of Service)

DECLASSIFIED
Authority 883078

This voucher consist of TWO sheets.

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

E. Miranda
SIXTO MIRANDA

(Unit, Commander)

2nd Lieut. Inf. PA

(Rank, Branch of Service)

APPROVED FOR PAYMENT:

(Commanding Officer)

(Rank, Branch of Service)

Date _____

I certify under my official oath that I have personally paid men appearing in the ROLL 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 the Payroll that each man received the amount set opposite his name.

(Witnessing Officer)

(Rank, Branch of Service)

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