

242.5 - DIST INVESTIGATOR

SEP 74

DECLASSIFIED

Authority: E.O. 13526

PAYROLL OF DISTRICT INVESTIGATOR, 65th INF. CT. FOR THE MONTH OF SEPT. 44

Sept 51 Mr. Sept 44

NO	N O M E	Rank	Authority	Services	Rendered	No.	Family Allowance	Salary	Total Amount	Signature	Initial of wif. off.	Remarks
1	Camariño, Diacoro	1st Lt.		9-1-44	9-30-44	1	\$20.00	\$80.00	\$100.00	<i>[Signature]</i>	llc	wife within 6" MD
2	Bocerra, Nestor F.	Sgt.		9-1-44	9-30-44	2	5.00	50.00	55.00	<i>[Signature]</i>	llc	" " " "
3	Camariño, Jera	"		9-1-44	9-30-44	3	15.00	30.00	45.00	<i>[Signature]</i>	llc	" " " "
4	Camariño, Roman	Pfc		9-1-44	9-30-44	4		20.00	10.00	<i>[Signature]</i>	llc	
5	Magna, Smedo	"		9-1-44	9-30-44	3		20.00	10.00	<i>[Signature]</i>	llc	
6	Martigano, Eliseo	"		9-1-44	9-30-44	6	40.00	20.00	60.00	<i>[Signature]</i>	llc	wife within 6" MD
7	Pastolera, Ciriooa	"		9-1-44	9-30-44	2		20.00	20.00	<i>[Signature]</i>	llc	
8	Libera, Daniel	Plt.		9-1-44	9-30-44	2		20.00	20.00	<i>[Signature]</i>	llc	
9	Nontano, Baltazar	"		9-1-44	9-30-44	2		20.00	20.00	<i>[Signature]</i>	llc	
10	Palera, Eudisero	"		9-1-44	9-30-44	10	15.00	20.00	35.00	<i>[Signature]</i>	llc	wife within 6" MD
11	Pedraza, Eriberto	"		9-1-44	9-30-44	11		20.00	20.00	<i>[Signature]</i>	llc	
12	Silvestre, Gerardo	"		9-1-44	9-30-44	12	10.00	20.00	30.00	<i>[Signature]</i>	llc	wife within 6" MD

Total ----- \$125.00

I hereby certify on my official oath that the above payroll is correct, and that services above stated had been duly rendered payment for each service is hereby approved.

I hereby certify on my official oath that I witnessed the payment to each P.F. whose name appears hereon of the amount set opposite his name my initial.

*[Signature]*  
 DIACORO CAMARIÑO  
 1st Lt. Inf (62271)  
 District Investigator  
 65th Inf. CT

Paid by:  
*[Signature]*  
 1st Lt. Inf  
 65th Inf  
 Disbursed

*[Signature]*  
 Witnessing Officer  
 1st Lt. Inf  
 65th Inf  
 Disbursed

DECLASSIFIED  
 Authority NND 852676

DC/afb

I hereby certify on my official oath that I have paid each Officer and  
Sgt. whose name appears in the above payroll, the amount set opposite his  
name, he having signed or marked his name above in my presence and  
at the time that payment was made to him in acknowledgment or  
receipt of the money paid him.

\_\_\_\_\_  
Paying Officer  
\_\_\_\_\_  
Rank  
\_\_\_\_\_  
Designation

APPROVED FOR PAYMENT:

For the DISTRICT COMMANDER:

*Didacoro Camarillo*  
DIDACORO CAMARILLO  
1st Lieut. Inf. (62271)  
District Investigator  
65th Inf. C.T.

DECLASSIFIED  
Authority NND 8823076

*Handwritten notes in red ink:*  
1st Lieut. Inf. (62271)  
District Investigator  
65th Inf. C.T.  
128  
Bd # 278

Received of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_ 1944 the sum of FOUR  
HUNDRED AND TWENTY-FIVE (\$425.00) DOLLARS only of  
payment of the above which I certify to be true  
and correct.

*Handwritten signature in red ink:*  
DIDACORO CAMARILLO  
1st Lieut. Inf. (62271)  
District Investigator  
65th Inf. C.T.  
-158-



I hereby certify on my official oath that I have paid each officer and EN  
whose name appears in the above payroll the amount set opposite his name,  
he having signed or marked his name above in my presence and at the  
time that payment was made to him in acknowledgment or receipt  
of the money paid him.

\_\_\_\_\_  
Paying Officer

\_\_\_\_\_  
Rank

\_\_\_\_\_  
Designation

APPROVED FOR PAYMENT:

For the DISTRICT COMMANDER:

*[Signature]*

DONCORO CARRASISTA

1st Lieut. Inf. (62271)

District Investigator

65th. Inf. CT.

RECEIVED of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_ 1944 the sum of FOUR  
HUNDRED AND TWENTY-FIVE (\$425.00) DOLLARS, only, as payment  
of the above which I certify to be true and correct.

*[Signature]*

DONCORO CARRASISTA

1st Lieut. Inf. (62271)

District Investigator

65th. Inf. CT.

DECLASSIFIED  
Authority NND 883078

242.5-D I, 65INF

Oct44

DECLASSIFIED  
Authority NND 952076

18 Dec '41

Dear Roy

Last month you P 597.50

for Van - 97.50

Rent - 500.00

The payroll just coming it with  
you acct.

Inst.

Bern

DECLASSIFIED

Authority NND 883078

Budget  
— 0 —

10/12/xx  
Cash on Hand —  
Expenses —

⊕ 280 —  
51

**DECLASSIFIED**

Authority NND 883078

Q-1049  
V-113

242.5  
65.00

PAYROLL OF D I 86th Inf. CT for the MONTH OF OCTOBER, 1944.

Paul  
V-113

No.	Name	Rank	Authority	Period Covered	Monthly Salary	Family Allowance	T/Amount Due	Initial	Signature	Remarks
<u>-OFFICERS-</u>										
1.	Garrista, Dioscoro	1st Lt		Oct. 1-31	\$ 20.00	\$ 30.00	\$ 100.	Mc	Paul Garrista	1 wife & 3 children
<u>-ENLISTED MEN-</u>										
1.	Lido-on, Daniel	Pvt		"	20.00		20.	Mc	Daniel Lido-on	
2.	Montaño, Baltazar	"		"	20.00	2.00	20.	Mc	Baltazar Montaño	
3.	Falcis, Basilio	"		"	20.00	15.00	35.	Mc	Basilio Falcis	1 wife & 3 children
4.	Pedroso, Roberto	"		"	20.00		20.00	Mc	Roberto Pedroso	
5.	Silvestre, Gerardo	"		"	20.00	10.00	30.	Mc	Gerardo Silvestre	1 wife + 1 child
T O T A L					\$ 180.00	\$ 45.00	\$ 225.			

I hereby certify on my official oath that the above payroll is correct and that the services above-stated have been duly rendered payment of such service is hereby approved.

*Paul Garrista*  
DIOSCORO GARRISTA  
1ST LIEUTENANT (REG'T)  
DI, 86th CT

I hereby certify on my official oath that I witness the payment to each of whose name appears hereof, of the amount set opposite his name as initial.

DECLASSIFIED  
Authority AWA 100-3078

*Paul Garrista*  
1ST LT. REG'T.  
DI 86th CT.

PAID AND PASSED IN THE AMOUNT OF Two Hundred Twenty-Five Pesos Only.

*Francisco Lauretakis*  
Francisco M. CAVALIDA  
1st Lieut., US  
Auditor, 53th Inf. CT

*[Handwritten signatures and initials in blue and black ink]*

*[Handwritten note]*

DECLASSIFIED  
Authority NND 88-3078

I hereby certify on my official oath that I have paid each Officer and EM whose name appears on the above payroll the amount set opposite his name, he having signed or marked his name above in my presence and at the time that payment was made to him, in acknowledgement or receipt of the money paid him.

APPROVED FOR PAYMENT.

Pay's Officer

FRANCISCO VILLASIS  
CO, 53th Inf. CT

Received of \_\_\_\_\_ 1944, the sum of TWO HUNDRED and FIFTY and NO/100 (225.00) Pesos, as payment of the above, which I certify to be true and correct.

\_\_\_\_\_  
\_\_\_\_\_

Label 7-28

0.1579  
10/13  
5

OFFICERS		RANK		DATE		AMOUNT		SIGNATURES		REMARKS	
1.	Comarista, Dis...	1st Lt	Oct. 1-31	\$ 30.00	\$ 2000	\$ 100.00	RC	Ric Canud		1 wife & 3 children	
<b>ENLISTED MEN</b>											
1.	Libo-on, Daniel	1st Lt	do	\$ 20.00		\$ 20.00	RC	Daniel Libo-on			
2.	Montano, Walter	"	"	\$ 20.00		\$ 20.00	RC	Walter Montano			
3.	Palais, Emilio	"	"	\$ 20.00	\$ 15.00	\$ 35.00	RC	Emilio Palais		1 wife & 3 children	
4.	Pedrosa, Yribe	"	"	\$ 20.00		\$ 20.00	RC	Yribe Pedrosa			
5.	Silvestre, Gerardo	"	"	\$ 20.00	\$ 10.00	\$ 30.00	RC	Gerardo Silvestre		1 wife & 1 child	
Total				\$ 100.00	\$ 45.00	\$ 145.00	RC				

I hereby certify on my official oath that I witness the payment to each of those whose name and rank appears hereon, of the amount set opposite his name by initial.

I hereby certify on my official oath that I witness the payment to each of those whose name and rank appears hereon, of the amount set opposite his name by initial.

Ric Canud

Ric Canud  
Witnessing Officer  
1st Lt  
D.F. 65-14-17 CT

DECLASSIFIED  
Authority NND 88-2078

FILE-UNITED AND PASSED IN THE AMOUNT OF Two Hundred Twenty-Five \$225.00

*Maj. Gen. L. S. B. ...*  
1st Lt. ...

*Handwritten list of names and amounts:*  
... 200.00  
... 25.00  
... 200.00  
... 25.00  
... 200.00  
... 25.00

DECLASSIFIED  
Authority NND 003076

I hereby certify on my official oath that I have paid each Officer and ... whose name appears on the above ... the amount set opposite his name, and ... signed or marked his name above in my presence and ... that payment was due to him, in acknowledgement or receipt of the money paid him.

APPROVED FOR PAYMENT.

W. R. ...  
CO. 10th INF. CT

11/10

This ... of ... 1944, the sum of ...  
... and ... as payment of the above which  
is hereby to be true and correct.

20.00  
25.00  
200.00  
25.00

25 07

113  
113

*Handwritten signature:*  
W. R. ...

242.5 - D I, 65th INF

Nov '44

DECLASSIFIED  
Authority: 25XJ 0952076

**PAYROLL OF D-I 65th CT FOR THE THREE (3) MONTHS/  
ADVANCE PAY AND ALLOWANCE  
AS PER I.M.C. OF THE  
DPO, DATED NOV. 13,  
1954**

*copy  
12/2/54*

*24215*

*Abstract - 11  
Van # 111*

*initials  
on*

No.	Names	Rank	Authority	Period Covered	Monthly Salary	Allowance	Total	Initials	Signatures	Remarks
<b>OFFICERS</b>										
1.	Camarista, Dioscoro	1st Lt		3 months	80.00	20.00	100.00		<i>[Signature]</i>	wife & 2 ch in 6 <sup>th</sup> MD
<b>ENLISTED MEN</b>										
1.	Palais, Gerardo	Pvt		3 months	20.00	15.00	35.00		<i>[Signature]</i>	wife & 2 ch in 6 <sup>th</sup> MD
2.	Silvestre, Gerardo	"	"	"	25.00	10.00	35.00		<i>[Signature]</i>	wife & 2 ch in 6 <sup>th</sup> MD
Total					125.00	45.00	170.00			

I hereby certify on my official oath that the above payroll is correct and that the amount vice above-stated have been duly rendered payment of such services is hereby approved.

I hereby certify on my official oath that I witness the payment to each officer and ~~man~~ whose name appears heron of the amount set opposite his name and my initial

*[Signature]*  
**DIOSCORO CAMARISTA**  
1st Lt., Inf (62271)  
D-I, 65th CT

*[Signature]*  
**DIOSCORO CAMARISTA**  
1st Lt., Inf (62271)  
D-I, 65th CT

APPROVED FOR PAYMENT.

For the District Commander.

*[Signature]*  
Lt-Col., Inf.  
65th Inf., CT

I hereby certify on my official oath that I have paid each officer and ~~man~~ whose name appears on the above payroll the amount set opposite his name he having signed or marked his name above in my presence and at the time that payment was made to him, in acknowledgement or receipt of the money paid him.

*Nov. 21 '54  
P.H. 93.00*

*[Signature]*  
1st Lt., Inf (62271)  
D-I, 65th CT

Pre-audited and passed in the amount of **FOUR HUNDRED SEVENTY-FIVE AND NO/100 (\$275.00)** **PASSE ONLY.**

*[Signature]*  
**MAURICIO S. SANCHEZ**  
1st Lt., Inf (62271)  
Auditor, 65th Inf., CT

PAYROLL OF DI 65th INF. CT FOR THE MONTH OF NOVEMBER, 1944

242.5  
65th Inf

Abot-11  
Ven #133

No.	Name	Rank	Authority	Period Covered	Monthly Salary	FAMIT	Am. Insi	Due	Initials	Signature	Remarks
<b>OFFICERS</b>											
1.	Canarista, Diostoro	1st Lt		Nov. 1-30	\$30.00	\$20.	\$100.		He	<i>[Signature]</i>	wife & 2 ch
<b>ENLISTED MEN</b>											
1.	Gilbo-on, Daniel	1 Pvt		do	20.00		20.00		He	<i>[Signature]</i>	
2.	Montano, Baltazar	"		do	20.00		20.		He	<i>[Signature]</i>	
3.	Palsis, Gaudioso	"		do	20.00	15	35		He	<i>[Signature]</i>	wife & 2 ch
4.	Pedroso, Eriberto	"		do	20.00		20.		He	<i>[Signature]</i>	
5.	Silvestre, Gerardo	"		do	20.00	10	30.		He	<i>[Signature]</i>	& 1 ch
<b>T O T A L</b>					\$180.00	1545	\$225.00				

I hereby certify on my official oath that the above payroll is correct and that the service above stated have been duly rendered payment of such service is hereby approved.

*[Signature]*  
Gerardo Canarista (2271)  
1st Lieut., Inf.  
DI, 65th Inf

I hereby certify on my official oath that I witness the payment to each IM whose name appears hereon of the amount set opposite his name by initial.

*[Signature]*  
Witness Officer  
1st Lt. Inf.  
RANK  
DI 65th Inf CT.  
Designation

APPROVED FOR PAYMENT.

*[Signature]*  
BRACILIO F. VILLASIS  
Lt-Col., Inf.  
CC, 65th Inf., CT

I hereby certify on my official oath that I have paid each Officer and IM whose name appears on the above payroll the amount set opposite his name, he having signed or mark his name above in my presence and at the time that payment was made to him, in acknowledgement or receipt of the money paid him.

*[Signature]*  
Payroll Officer  
2444 13  
79, 65th Inf CT

Pre-audited and passed in the amount of TWO HUNDRED TWENTY-FIVE (\$225.00) \$225.00 ONLY

*William L. Cavallada*  
1st Lieut., FS  
Auditor, 68th Inf., CT 11/20/44

Received of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_, 1944, in  
the sum of \_\_\_\_\_  
(\_\_\_\_\_ pesos as pay-  
ment of the above which I certify to  
be true and correct.

DECLASSIFIED  
Authority PNO 663078

242.5 - D1, 65th INF

Feb 45

DECLASSIFIED

Authority: E.O. 13526

*Extracted*

PAYROLL DI, 65TH INFANTRY CT

For the month of FEBRUARY, 1945

24215

No.	NAME	RANK	Period Covered	Monthly Salary	Fam. Allow	Amount Paid	Initial	Signature
1.	<del>OFFICER</del> DIOSCORO, DIOSCORO	1 <sup>st</sup> Lt.	Feb. 1-28	P 80.00	P 20.00	P 100.00	DC	<i>Dioscoro</i>
1.	<del>ENLISTED MAN</del> GABRIEL PALAIS	Pvt.	" "	20.00	20.00	40.00	DC	<i>Gabriel Palais</i>
2.	SILVESTRE, GERARDO	"	" "	20.00	10.00	30.00	DC	<i>Gerardo Silvestre</i>
3.	LIBO-ON, DANIEL	"	" "	20.00		20.00	DC	<i>Daniel Libo-on</i>
4.	PEDRERO, EDESSO	"	" "	20.00		20.00	DC	<i>Edeaso Pedrero</i>
5.	MONTANO, BALTAZAR	"	" "	20.00		20.00	DC	<i>Baltazar Montano</i>
TOTAL						180.00 - 50.00 = P 230.00		

1. I hereby certify on my official oath that the above payroll is correct and that the services above-stated have been duly rendered and the payment for such service is hereby approved.

*Dioscoro*  
DIOSCORO DIOSCORO ( )  
1st Lt. Inf.  
DI, 65th Inf. CT

(over)

DECLASSIFIED

Authority NNO 653078



c/c w/ Cash Book  
3/1/45

Abert - 11  
Van # 81  
J. J.

No.	Name	Period (Monthly)	Rate	Amount Paid	Balance	Remarks
1.	GRACIANO, RAFAEL	1st	20.00	20.00	0.00	Re Din. Card
2.	GRACIANO, RAFAEL	2nd	20.00	20.00	0.00	Re Graciano Palis
3.	SILVESTRE, GERARDO	1st	30.00	30.00	0.00	Re Gerardo Silvestre
4.	LIBONON, DANIEL	1st	20.00	20.00	0.00	Re Daniel Libonon
5.	LIBONON, DANIEL	2nd	20.00	20.00	0.00	Re Daniel Libonon
6.	LIBONON, DANIEL	3rd	20.00	20.00	0.00	Re Daniel Libonon
7.	LIBONON, DANIEL	4th	20.00	20.00	0.00	Re Daniel Libonon
8.	LIBONON, DANIEL	5th	20.00	20.00	0.00	Re Daniel Libonon
9.	LIBONON, DANIEL	6th	20.00	20.00	0.00	Re Daniel Libonon
10.	LIBONON, DANIEL	7th	20.00	20.00	0.00	Re Daniel Libonon
11.	LIBONON, DANIEL	8th	20.00	20.00	0.00	Re Daniel Libonon
12.	LIBONON, DANIEL	9th	20.00	20.00	0.00	Re Daniel Libonon
13.	LIBONON, DANIEL	10th	20.00	20.00	0.00	Re Daniel Libonon
14.	LIBONON, DANIEL	11th	20.00	20.00	0.00	Re Daniel Libonon
15.	LIBONON, DANIEL	12th	20.00	20.00	0.00	Re Daniel Libonon
		TOTAL	180.00	180.00	0.00	

I hereby certify that the above is a true and correct copy of the original records of the Department of Education, Manila, Philippines, and I approve.

*Din. Card*

Director, Manila  
1st Lt. J. J.  
31, 33th St., Manila

DECLASSIFIED  
Authority NNO 663078

(U.S.P.)

