| 1. DEPARTMENT                       | MILITARY PAY VOUCHER         |                 |  |                                       |                   | OUCHER NUI   | MBEK                |  |
|-------------------------------------|------------------------------|-----------------|--|---------------------------------------|-------------------|--------------|---------------------|--|
|                                     | ID                           | ENTIFICATIO     | N AND CERTI  | FICATION                              |                   |              |                     |  |
| 3. ATTACHMENT                       | 4. ORGANIZATION AND LOCATION |                 |  |                                       | 5. PAYROLL NUMBER |              |                     |  |
| Pages                               |                              |                 |  |                                       |                   |              |                     |  |
| 6. PURPOSE OF PAYMEN                | NT                           |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   | 5115 517     |                     |  |
|                                     |                              |                 |  |                                       | 7                 | . PAID BY    |                     |  |
| •                                   |                              |                 |  | •                                     |                   |              |                     |  |
| TO:                                 |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
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| •                                   |                              |                 |  | •                                     |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   | /Priot       | <sup>r</sup> Stamp) |  |
| I CERTIFY this                      | voucher is corre             | ct and proper f | or payment from  | n the appropriation                   | and/or f          |              |                     |  |
| 8. TYPED NAME OF DIS                | BURSING OFFICE               | 9. DSSN         |  | ATURE OF DISBURSING OFFICER OR DEPUTY |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
| As Agent Officer thave been paid by | o the above Dis              | bursing Office  | r, I CERTIFY th  | e amounts shown                       | on the            | attached moi | ney lists           |  |
| 11. SIGNATURE OF AGEN               |                              | noted thereon   | arter proper ide   | ntinication.                          | 1                 | 2. DATE PAID |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 | OPRIATION C  | HARGES                                |                   |              |                     |  |
| 13.                                 |                              | APPROPRIAT      | TON  |                                       | 1                 | 4. /         | AMOUNT              |  |
|                                     |                              |                 |  |                                       |                   | \$           |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
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|                                     |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              |                     |  |
| 15. PREPARED BY                     |                              | 16. REVIEWED    | 17.  | <u> </u>                              |                   |              |                     |  |
|                                     |                              |                 | тот  | ·ΔI                                   | \$                | 0.00         |                     |  |
|                                     |                              |                 | PAYMENT DA   |                                       |                   |              |                     |  |
|                                     | 18. AMOUNT                   |                 | 9. PAID BY CHEC  |                                       |                   |              |                     |  |
| CHECK PAYMENT                       |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 |  |                                       |                   |              | INCL                |  |
|                                     | 20. AMOUNT 2                 |                 | 1. I acknowledge receipt of cash payment in amount stated. |                                       |                   |              |                     |  |
| CASH PAYMENT                        |                              |                 |  |                                       |                   |              |                     |  |
|                                     |                              |                 | SIGNATURE O  | F PAYE <i>E (For an indi</i> v        | vidual cas        | h payment)   |                     |  |