Standard Form 1154 September 1967 Title 4, GAO Manual 1154-109

PUBLIC VOUCHER FOR UNPAID COMPENSATION DUE A **DECEASED CIVILIAN EMPLOYEE**

	Voucher No.		
	Schedule No. PAID BY		
_			
3		AMOUNT	

(Department and bureau, agency, or es	stablishment)	
(Location)	-	
NAMES AND ADDRESSES (INCLUI	AMOUNT	
`	·	
Net amount due as per summary on reverse hereof		
Amount of unpaid compensation due		, a civilian employee
of the United States or the District of Columbia, who died of	on the day of	,
Gross amount chargeable to appropriations and funds, as di	stributed below	\$
Pursuant to authority vested in me, I certify that the items li. appropriation(s) and/or fund(s) indicated below.	sted herein are correct and proper for repa	yment from the
		athorized certifying officer)
Date		
ACCOUNTI	NG CLASSIFICATION	
	through through	
U.S., or on (Name of bank)	; or by cash in the amount of \$ _	
	*Payee	

^{*}If payment is made in cash, signature of the payee in acknowledgement of receipt of payment is required. If more than one payee, a receipt should be obtained for the amount paid to each and attached to the voucher.

Summary of "UNPAID COMPENSATION" of the deceased civilian employee named on the face of this Public Voucher:

			Amount
Lump sum payment for annual leave			
Salary or pay for which checks have not been	ı issued		
Reimbursement for travel expenses			
Allowances			
Cash awards for employee's suggestions			
Unnegotiated checks drawn in payment of su	ach compensation and deposited:		
Check No.	Date	Amount	
Unapplied balances on U.S. Savings Bond pu			
TOTAL CHARGEABLE TO APPROPRI	ATIONS, SPECIAL FUNDS, ETC.		
Less amounts deducted or withheld:			
Outstanding travel advances			
Civil service retirement			
Employee life insurance			
Health benefits			
Other			
NET AMOUNT DUE			
PREVIOUS PAR	RTIAL PAYMENTS OF "UNPAI	D COMPENSATION"	
(Voucher number)	(Date paid)	(D.C	O. symbol)