

When applicable to Class E allotments, send original direct to the  
Disbursing Officer, Office of Dependency Benefits,  
213 Washington Street, Newark, N. J.

# AUTHORIZATION FOR ALLOTMENT OF PAY

(See AR 35-5520)

Nelson Leroy R. 0-753296 2nd Lt AC  
(Last name) (First name) (Middle initial) (Army serial number) (Grade) (Company, regiment, or arm or service)

The \*<sup>{officer</sup><sub>{enlisted man}</sub> named above hereby authorizes a Class E  
(Type of allotment)

allotment of his pay in the amount of \$ 225.00 per month for duration of six months commencing  
April, 1944, and expiring indefinitely, 1944  
(225.) premiums deducted from pay for month of April, 1944  
(Applicable to Class N insurance only (sec. IV, Cir. No. 10J, W. D., 1942))

to Margaret M. Nelson 204 Cedar Blvd Pittsburgh Pennsylvania  
(Name of allottee) (Number and street or rural route) (City, town, or post office) (State)

or to \_\_\_\_\_  
(Name of alternate allottee) (Number and street or rural route) (City, town, or post office) (State)

Date of enlistment BAD 30 August, 1943 When other than "Finance Service, Army" is affected,  
state allotment chargeable \_\_\_\_\_ Relationship of allottee Wife  
(Applicable to individual allottees only)

If allotment is in favor of a bank, the following is required to be stated: Deposit should be made to the credit of—  
\_\_\_\_\_  
(Name) (Relationship)

## (Statement below not applicable to Government insurance)

I hereby state that the purpose for which this allotment is granted is solely for the support of wife, child, or dependent relatives; or if made for the payment of life insurance premiums, the insurance (including endowments and/or twenty (or other) payment policies) is on the life of the allotter only; that the insurance constitutes the major and not a merely incidental or collateral element of the transaction; and that the allotment is made in favor of the insurance company issuing the policy and not in favor of a bank or other agent.

Place Gulfport Field, Mississippi L. Leroy R. Nelson  
(Signature of allotter)

Entered on service record B.B. 22 Mar. 1944 20 March 1944  
PAY CARD (Date) (Date) FRED H. HENDON JR.  
(Signature of commanding officer or personnel officer, with grade and organization) 1st LT. AIR CORPS

WHEN APPLICABLE TO CLASS D OR CLASS N INSURANCE, THE ORIGINAL COPY OF THIS FORM WILL BE SENT TO THE EXAMINATION DIVISION, BUILDING X, 19TH AND B STREETS NE., WASHINGTON, D. C. NO COPIES WILL BE SENT TO THE VETERANS ADMINISTRATION, WASHINGTON, D. C., WITH THE APPLICATION FOR INSURANCE.