BP-A0112
JUN 10

PRISONER'S PERSONAL FUNDS AND CASH GRATUITIES VOUCHER

CDFRM

U.S. DEPARTMENT OF JUSTICE **FEDERAL BUREAU OF PRISONS**

Institution	Institution Sub-Vou. No.	PF Vou. No.

I hereby acknowledge to have received the sum set opposite my name in payment of the funds in my personal account in the Prisoner's Deposit Fund and the cash gratuities authorized by law, together with transportation expense as indicated:

Register No.	Name	PERSONAL FUNDS			APPROPRIATED FUNDS		Total Cash	Signatures
		DRAFT No.	DRAFT Amount	Cash	Cash Gratuity	Cash Transportation		
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
Total			$0.00	$0.00	$0.00	$0.00	$0.00	

I certify that the prisoner(s) listed above are entitled to be paid the amounts set opposite their respective names as funds in their personal accounts, gratuities and transportation expenses as authorized by law and regulation, and the payments of such amounts are hereby approved.

(A copy of BP-189(51), Release and Gratuity Information, shall be attached to support cash gratuity and transportation amounts paid to other than deportable aliens.)

_____
(Authorized Certifying Officer)

CASH REPLENISHMENT:

Deposit Fund $ _____ (amount) Appropriated Fund $ _____ (amount)

Title_____

Date_____

Record Copy - Replenishment Voucher; Copy - Interim Receipt; Copy - Admin