

1. Issuing Office (Name & Office Designator)  
**NACAU (CV)**  
2. Name of Claimant  
[Redacted]  
**413-02-6073**

4. This Voucher is being used for:  
a.  Payment to Cooperating Individual  
1.  for Information: \$ **10,000<sup>00</sup>**  
2.  for Expenses \$ \_\_\_\_\_  
3.  for Reward (PE/PI O.C. 2534) \$ \_\_\_\_\_  
4.  (c) (1) (B) Award (Assets Forfeiture Fund) \$ \_\_\_\_\_  
5.  (c) (1) (C) Award (Assets Forfeiture Fund) \$ \_\_\_\_\_  
b.  Purchase of Evidence \$ \_\_\_\_\_

PAID BY  
[Redacted]

5. EXPENDITURES				
a. File Number(s)	b. Program Code(s)	c. Amount	d. G-DEP Identifier(s)	e. Exhibit No. (s)
<b>6V-43-0011</b>		\$ <b>10,000<sup>00</sup></b>	[Redacted]	

6a. Purchase of DRUG Evidence  
Quantity (Same as DEA-7)  Drug Code (See Reverse)

6b. NON-DRUG Evidence (Describe Purchase)  
[Redacted]

7. CERTIFICATION OF COOPERATING INDIVIDUAL  
I certify that I received payment in the amount of \$ **10,000<sup>00</sup>** on **4/16/93** U.S. dollars or the equivalent in another currency.  
(CI Initials & Date - Last copy only)  
I certify that I have not signed this form in blank and that I have placed my initials and date received next to the amount of funds received.  
I acknowledge that all payments that I receive for information/expenses provided by DEA must be reported on my federal tax return as other income, and that it is my responsibility to obtain receipts and documentation to support deductions of expenses from income.  
If funds received are for the purchase of evidence, any unused funds shall be returned to the Government immediately and any misappropriation will render me liable for prosecution.

Cooperating Individual Code No. **6V-43-0013** [Redacted] **4/16/93** (Date)

8. REMARKS  
**Payment for info leading to seizure of approx 1100 pounds of cocaine on [Redacted]**

9. CERTIFICATION  
a. PAYOR NAME: [Redacted]  
(Signature)  
b. WITNESS NAME: [Redacted]  
c. APPROVING SUPERVISOR NAME: [Redacted]

10. Approving Headquarters Official When Required

11. ACCOUNTING CLASSIFICATION

Appropriation	Allowance Center	B/A	Incurring Center	Control No.	G-DEP ID	Project	Benefiting Center	Object Class	Amount
<b>93V</b>	<b>318000</b>	<b>c</b>	<b>318222</b>	<b>0144</b>	[Redacted]		<b>318220</b>	<b>2530</b>	\$ <b>10,000.00</b>

[Redacted]