

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 61K

PROJECT ACTIVITY: Gender Dan violence

PARTICIPANT NAME: Leku LESLIE

PARTICIPANT ID NUMBER: 109424657

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: Leku LESLIE PARTICIPANT SIGNATURE: <i>[Signature]</i>

APPROVED BY:

DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

PAYMENT SLIP

DATE: 17-6-2017

RECEIPT NUMBER: 6L

PROJECT ACTIVITY: Gender Based Violence

PARTICIPANT NAME: Tata usmane

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	ALL PROJECT PARTICIPANTS Attach a photo copy of your ID card to this page. PARTICIPANT NAME: Tata usmane PARTICIPANT SIGNATURE: 
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DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 6M

PROJECT ACTIVITY: Gender Base violence

PARTICIPANT NAME: Kouamo Arnaud

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	<u>Attach a photo copy of your ID card to this page.</u> PARTICIPANT NAME: Kouamo Arnaud PARTICIPANT SIGNATURE: 

APPROVED BY:

DATE:

Creativity, Health, and Wellbeing for OVC On and Off the
Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 6N

PROJECT ACTIVITY: ~~GRADER~~ Base Violence

PARTICIPANT NAME: Bertrand Shintum

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: Bertrand Shintum PARTICIPANT SIGNATURE: <i>[Signature]</i>

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DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 60

PROJECT ACTIVITY: Gender Based Violence

PARTICIPANT NAME: Mojida Boris

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: Mojida Boris PARTICIPANT SIGNATURE: <i>Mojida Boris</i>

APPROVED BY:

DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017
 RECEIPT NUMBER: 67
 PROJECT ACTIVITY: Gender Base violence

PARTICIPANT NAME: Panwou Marilyn
 PARTICIPANT ID NUMBER:
 PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: Panwou Marilyn PARTICIPANT SIGNATURE: <i>[Signature]</i>

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DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

PAYMENT SLIP

DATE: 17-6-2017

RECEIPT NUMBER: 6Q

PROJECT ACTIVITY: Gender Base Violence

PARTICIPANT NAME: AMBE STANOLY

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: AMBE STANOLY PARTICIPANT SIGNATURE: <i>Chino</i>

APPROVED BY:

DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 62

PROJECT ACTIVITY: Gender Base violence

PARTICIPANT NAME: BIH MALVIS

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	<u>Attach a photo copy of your ID card to this page.</u> PARTICIPANT NAME: BIH MELVIS PARTICIPANT SIGNATURE: BB-

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DATE:

Creativity, Health, and Wellbeing for OVC On and Off the Streets of Bamenda- WORLD CONNECT

DATE: 17-6-2017

RECEIPT NUMBER: 65

PROJECT ACTIVITY: Gender Based violence

PARTICIPANT NAME: NJECK FLORA EYEN

PARTICIPANT ID NUMBER:

PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND SKILLS CONSULTANTS only	ALL PROJECT PARTICIPANTS
DATE OF SESSION 1: DATE OF SESSION 2: DATE OF SESSION 3: DATE OF SESSION 4: DATE OF SESSION 5: DATE OF SESSION 6: DATE OF SESSION 7: DATE OF SESSION 8: DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:	Attach a photo copy of your ID card to this page. PARTICIPANT NAME: NJECK FLORA EYEN PARTICIPANT SIGNATURE: <i>[Signature]</i>

APPROVED BY:

DATE: