

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

PAYMENT SLIP

DATE: 10 March 2016

RECEIPT NUMBER:

PROJECT ACTIVITY: Project Launch /
Life Skills

PARTICIPANT NAME: Teke Roline Angwei

PARTICIPANT ID NUMBER:

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

EARNINGS	AMOUNT
Per Diem	5000 FFA
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: Teke Roline

PARTICIPANT SIGNATURE: Angwei



APPROVED BY:

DATE: 10/03/17