PAYMENT SLIP

			2017	
	T NUM			
PROJEC	T ACTI	VITV.	50	H

PARTICIPANT NAME: Mildred Ve moh

PARTICIPANT ID NUMBER:

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

TRameny

EARNINGS	AMOUNT
Per Diem	5000 ms
Labor	
TOTAL	5000 Py

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

APPROVED BY:

PAYMENT SLIP

DATE:	11-	6-	-20	14
RECEIPŤ	NUN	/IBE	R: 7	3

PROJECT ACTIVITY:

SRH Training

PARTICIPANT NAME: A BONG MARIS KA

PARTICIPANT ID NUMBER:

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

EARNINGS	AMOUNT
	Δ.
Per Diem	SODDAT
Labor	
TOTAL	500 OF1

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

APPROVED BY:

PAYMENT SLIP

DATE:	20-6-	2017
RECEIP	T NUMBER:	70
PROJEC	T ACTIVITY:	SOLI

PARTICIPANT NAME: Aisha Mary
PARTICIPANT ID NUMBER:
PAY PERIOD (Month/Year-Month/Year):

,	
EARNINGS	AMOUNT
Per Diem	5000 frs
	}
Labor	
TOTAL	5000 frs

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

A	P	P	R	0	V	Έ	D	B	/ :

PAYMENT SLIP

DATE:	21-6-2017	
RECEIPT	NUMBER: 7	

PROJECT ACTIVITY: HOME

PARTICIPANT NAME: Lausa Kangeh PARTICIPANT ID NUMBER: 110746780 PAY PERIOD (Month/Year-Month/Year):

FADAUNICS	
EARNINGS	AMOUNT
Per Diem	SODOFS
Labor	
	E m f
TOTAL	SEDOLA

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT				
SKILLS CONSULTANTS only	PARTICPANTS				
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: PARTICIPANT SIGNATURE:				

APPROVED BY:

PAYMENT SLIP

DATE: 20-6-	2017
RECEIPT NUMBER:	75 11
PROJECT ACTIVITY:	210000

PARTICIPANT NAME: Sy Veline Moon 92
PARTICIPANT ID NUMBER: 115411035

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

EARNINGS	AMOUNT
Per Diem	SOODTK
Labor	
TOTAL	Coooks

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT				
SKILLS CONSULTANTS only	PARTICPANTS				
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: Syveline Many 2 PARTICIPANT SIGNATURE: Shape				

APPROVED BY:

DATE:	21-6	-2017
RECEIPT	NUMBER:	TF.
DDOLECT	F ACTIVITY.	001

-	P	A	1	1	Λ	1		home	O CONTRACTOR OF THE PERSON OF	S	Contraction of the Contraction o	MANAGEMENT	P	
								M						

PARTICIPANT NAME: Hypor Devicts
PARTICIPANT ID NUMBER:
PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000 48
Labor	
	0
TOTAL	5000

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT		
SKILLS CONSULTANTS only	PARTICPANTS		
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:	PARTICIPANT NAME: Anglo Doncis PARTICIPANT SIGNATURE:		
DATE OF SESSION 9: DATE OF SESSION 10: DATE OF SESSION 11: DATE OF SESSION 12:			

APPROVED BY:

PAYMENT SLIP

DATE:	20-6-	-2017
	NUMBER:	
PROJECT	ACTIVITY:	Health

PARTICIPANT NAME: Bama Diane Alida
PARTICIPANT ID NUMBER:

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

EARNINGS	AMOUNT
Per Diem	5000ty
Labor	
TOTAL	500040

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

APPROVED BY:

PAYMENT SLIP

DATE: 21-6-2	014		
RECEIPT NUMBER:	71		
DROJECT ACTIVITY.	- 0	. 1	-

PARTICIPANT NAME: Mondritiungong Blaise
PARTICIPANT ID NUMBER: M85196135

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

EARNINGS	AMOUNT
,	
Per Diem	5,000 fis
Labor	
	ρ ρ
TOTAL	5, coofis

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

APPROVED BY:

PAYMENT SLIP

DATE: 20-6-2017

PROJECT ACTIVITY: SRH TRaining

PARTICIPANT NAME: Acho Hombighi Brenda PARTICIPANT ID NUMBER: 115753078

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

EARNINGS	AMOUNT	
Per Diem	5.000 As	
Labor		
		r.
TOTAL	5.000 Ao	

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

APPROVED BY:

PAYMENT SLIP

DATE:	20-	6-	2	01	4
RECEIF	T NUM	BER		73	5

PROJECT ACTIVITY

8RH Workshop-

PARTICIPANT NAME: Nchotuh Fidelis

PARTICIPANT ID NUMBER:

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

6	
EARNINGS	AMOUNT
Per Diem	5000 ts
Labor	
TOTAL	SDDDFR
TOTAL	2000 183

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

APPROVED BY:

PAYMENT SLIP

DATE:	20-6-2017	
	ΓNUMBER: ☐ K	
PROJEC	TACTIVITY: SR	

PARTICIPANT NAME: ALIEH GRACE TABL

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

EARNINGS	AMOUNT
Per Diem	50000
	V
Labor	
TOTAL	5000 (N

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT
SKILLS CONSULTANTS only	PARTICPANTS
DATE OF SESSION 1:	Attach a photo copy of your ID card to this page.
DATE OF SESSION 2:	but a copy of your is card to this page.
DATE OF SESSION 3:	
DATE OF SESSION 4:	*
DATE OF SESSION 5:	PARTICIPANT NAME: ANIEH GRACE TA
DATE OF SESSION 6:	PARTICIPANT NAME: INCITED SPACE (A
DATE OF SESSION 7:	
DATE OF SESSION 8:	PARTICIPANT SIGNATURE:
DATE OF SESSION 9:	A Mo
DATE OF SESSION 10:	(7.7.7.
DATE OF SESSION 11:	670813319
DATE OF SESSION 12:	

APPROVED BY:

PAYMENT SLIP

DATE:	20-6-2017	
RECEIP	T NUMBER: 7	

PROJECT ACTIVITY: SRA TRaining

PARTICIPANT NAME: Fongoh Brandil
PARTICIPANT ID NUMBER:

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

EARNINGS	AMOUNT
	ANIOUNT
Per Diem	5000 pm
Labor	
TOTAL	5000

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT
SKILLS CONSULTANTS only	PARTICPANTS
DATE OF SESSION 1:	Attach a photo copy of your ID card to this page.
DATE OF SESSION 2:	A -
DATE OF SESSION 3:	Fongoh Brandih
DATE OF SESSION 4:	1 origin brailing
DATE OF SESSION 5:	DADTICIDANIT MARKE
DATE OF SESSION 6:	PARTICIPANT NAME:
DATE OF SESSION 7:	
DATE OF SESSION 8:	PARTICIPANT SIGNATURE: Fongoh
DATE OF SESSION 9:	pol.
DATE OF SESSION 10:	Shipe
DATE OF SESSION 11:	~
DATE OF SESSION 12:	

APPROVED BY:

PAYMENT SLIP

DATE: 20-6-20	17
DATE: Lund Lu	
RECEIPT NUMBER:	+M
PROJECT ACTIVITY:	SKH Traning
	100100100

PARTICIPANT NAME: TURNE IN NICOLINE TI.
PARTICIPANT ID NUMBER: 111534228

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

EARNINGS	AMOUNT	
Per Diem	5000frs	
	,	
Labor		
		•
TOTAL	5000 frs	

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT
SKILLS CONSULTANTS only	PARTICPANTS
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:	PARTICIPANT NAME: The Andrew Account PARTICIPANT SIGNATURE:
DATE OF SESSION 11: DATE OF SESSION 12:	

APPROVED BY:

PAYMENT SLIP

DATE: 21-6-2017	
RECEIPT NUMBER: 7N	
PROJECT ACTIVITY: Health	SRH
RECEIPT NUMBER: 7N PROJECT ACTIVITY: Health	ling

PARTICIPANT NAME: SIGN SUNITA KIJI PARTICIPANT ID NUMBER: 111748388

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

EARNINGS	AMOUNT
Per Diem	Scoots
Labor	
TOTAL	5000 fr

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT
SKILLS CONSULTANTS only	PARTICPANTS
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:	PARTICIPANT NAME: San Sanita Ni PARTICIPANT SIGNATURE:

APPROVED BY:

PAYMENT SLIP

DATE: 20-6-	2017
RECEIPT NUMBER:	
PROJECT ACTIVITY:	Heath

PARTICIPANT NAME: Ngargoe fing PARTICIPANT ID NUMBER: 107785247 PAY PERIOD (Month/Year-Month/Year):

EARNINGS	AMOUNT
Per Diem	5000 FR
Labor	So
TOTAL	SOODER

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

APPROVED BY: