

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

PAYMENT SLIP

DATE: 09/06/16

RECEIPT NUMBER:

PROJECT ACTIVITY: SRH Training
for MANUFORM/Peer Educator

PARTICIPANT NAME: Ambeker Sylvia

PARTICIPANT ID NUMBER: 118728140

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

EARNINGS	AMOUNT
Per Diem	5,000.00
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: Ambeker Sylvia

PARTICIPANT SIGNATURE:

[Signature]

APPROVED BY:

DATE: 09/06/17