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

PAYMENT SLIP

DATE:	09	106	113
DATE:	01	100	1 . 1

RECEIPT NUMBER:

PROJECT ACTIVITY: SRH Training for MAN VOTERM (Dear Educators

PARTICIPANT NAME: Bim. ASOFOV PARTICIPANT ID NUMBER: 1143370942

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

EARNINGS	AMOUNT
Per Diem	5.000 F
Labor	
TOTAL	

For DRAMA, VOCAL, DANCE, AND	ALL PROJECT PARTICPANTS	
SKILLS CONSULTANTS only		
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: BIMI ASAFOR.	
DATE OF SESSION 7: DATE OF SESSION 9: DATE OF SESSION 10:	PARTICIPANT SIGNATURE:	
DATE OF SESSION 11: DATE OF SESSION 12:		

APPROVED BY:

DATE: 09/06/17