

Technical Fees for Facilitators Signature Sheet

Name of event : VSL & Mental health meeting

Location of event : FUKA - FUKA

Date of event: 05/06/23

#	Name of participant/staff	Position	Phone Number	Number of days	Amount Received	Signature/ or thumb print
1	Tinyade Nosh	Clinician	0881883600	1	14,000	<i>[Signature]</i>
2	James Nsluso	Entrepreneur	0888126116	1	14,000	J. Nsluso
3					/	
4						
5						
6						
7						
8						
Total					28,000.00	



Payment Facilitated By

Name: John Chiembo Position: Finance officer

Signature and Date: *[Signature]* 05/06/23

Reviewed By

Name: G. Salien Position: E. Director

Signature and Date: *[Signature]* 05/06/2023