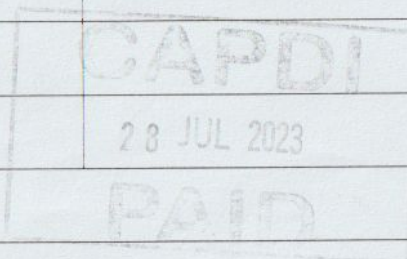


Technical Fees for Facilitators Signature Sheet

Name of event : VSL & MENTAL HEALTH MEETING SESSION WITH EYELONS SURVIVORS

Location of event : NUMBER 1 Date of event: 28/07/23

#	Name of participant/staff	Position	Phone Number	Number of days	Amount Received	Signature/ or thumb print
1	Tinyde Nosh	clinician	088188 3600	1	14,000	J. Ngluso
2	James Ngluso	INTERPRETER	0888126111	1	14,000	J. Ngluso
3						
4						
5						
6						
7						
8						
Total					28,000	



Payment Facilitated By

Name: John Chikwato Position: Finance Officer

Signature and Date: [Signature] 28/07/23

Reviewed By

Name: Geoffrey Saljein Position: E. Director

Signature and Date: [Signature] 2023