



## **Technical Fees for Facilitators Signature Sheet**

Name of event : USL & mental Health meeting Session with Cyclone Survivos						
Location of event: Humber 1  Date of event: 31/07/23						
#	Name of participant/staff	Position	Phone Number	Number of days	Amount Received	Signature/ or thumb print
1	Sueyn Chidops	Moutal Health No	use 088878874	1	14,000	1 Day
2	Chisomo Milanzie	Business Expert	0884301167		(4 000	Truze
3						
4						
5			The state of the s			
6			TCAFL			
7			3 1 JUL 2023			
	Total			9	28,000	
Payment Facilitated By				Reviewed By		
Name: John Chicambo Position: Finsnce Offices				Name: Geoffrey Solien Position: E. Director		
Signature and Date: 31/07/23				Name: Geoffsey Salien Position: E. Director Signature and Date: 3/87/2823		