

ZARIA LOCAL GOVERNMENT

CERTIFICATE OF INDIGINIZATION

5859

To whom it may concern

1. Name of Applicant Abraham A. Quibut 7. Village Queri

2. Father's Name and Tribe A. Quibut Hawks 8. Date of Birth 1986

3. Mother's Name and Tribe Habim's Hawks 9. Place of Birth Agul Queri

4. Father's Home Town Queri 10. Local Government Area Queri

5. Mother's Home Town Queri 11. State of Origin Waruna

6. District Birmi 12. Nationality Nigerian

DECLARATION BY APPLICANT: I Abraham A. Quibut Solemnly declare that the above information given by me are true and that I should be penalised if the information are later found to be false.

Date 31/5/98

Signature of Applicant [Signature]

Date 31/5/98

Signature of District Head [Signature]

Date 31/5/98

Signature of Secretary/Sole Administrator/Chairman - ZARIA LOCAL GOVERNMENT [Signature]

Date 1/5/98

Fee Paid 750.00 Revenue Collector's Receipt Number 206700

Date 18/5/1998