



KAURU LOCAL GOVERNMENT KADUNA STATE NIGERIA

Certificate Of Indiginization NO. 1941 *To Whom it may concern*

- | | |
|---|--|
| 1. Name of Applicant <u>MARUME</u> | 7. Village <u>KABENE</u> |
| 2. Father's Name and Tribe <u>ILIYA (SURUBU)</u> | 8. Place of Birth <u>KABENE</u> |
| 3. Mother's Name And Tribe <u>MARTHA (SURUBU)</u> | 9. Date of Birth <u>30/11/2000</u> |
| 4. Father's Home Town <u>KABENE</u> | 10. Local Government Area <u>KAURU</u> |
| 5. Mother's Home Town <u>KABENE</u> | 11. State of Origin <u>KADUNA</u> |
| 6. District <u>GESHIRE</u> | 12. Nationality <u>NIGERIAN</u> |

DECLARATION BY APPLICANT: I MARUME KABBORCH Solemnly declare that the above information given by me are true and that I shall be penalised if the information are later found to be false.

[Signature]
Signature of Applicant
Name: MARUME KABBORCH
Address: 2, KADUNA ROAD
Phone No: 011 234 5678
Date: 11/12/2024

[Signature]
Signature of Village Head
Name: DR. M. A. K. K.
Address: 1, KADUNA ROAD
Phone No: 011 234 5679
Date: 11/12/2024

[Signature]
Signature of District Head
Name: DR. M. A. K. K.
Address: 1, KADUNA ROAD
Phone No: 011 234 5680
Date: 11/12/2024

[Signature]
Signature of Witness
Fee paid 10,000
Revenue Collector's Receipt Number 1015461
Date 10/11/2024

[Signature]
Signature of Secretary/Sole Administrator/
Chairman Kauru Local Government
Date 10/11/2024