



CHANCHAGA LOCAL GOVERNMENT COUNCIL

MINNA - NIGER STATE.

Our Ref:- CLG/ADM/S.61/V.IX

Date:- 3RD JULY, 2002

TO WHOM IT MAY CONCERN

LETTER OF IDENTIFICATION

This is to certify that:- ZUMAIRA ADAMU

is a GWARI by tribe from:- NIGER

State of Nigeria He/She is a ~~RESIDENT~~/INDIGENE of
Chanchaga Local Government Area of Niger State.

N.B. ANY ALTERATION ON THIS FORM RENDER THIS IDENTIFICATION INVALID.

SECRETARY
CHANCHAGA LOCAL GOVT.
MINNA

ALH. MUSA MALIYU
SECRETARY.

FORM 26A



GENERAL FORM OF AFFIDAVIT

I, Mallawa SUMAISA ADAMU of MATAMBI MINNA.
Do solemnly and sincerely declare:-
(1) That I am a member of Niger State from Chad.
Chad local Government Area.
(2) That I am known by this.
(3) That I have obtained letter of identification
from Chad local Govt Council
dated 2nd July 2002.
(4) That the Authority concerned to take
note.

(5) That I make this solemn declaration conscientiously believing the same to be truth and
by virtue of the provisions of the Oaths Act, 1963.
Date 3rd July 2002

Signature of Declarant
I certify that the above declaration has been read and interpreted to the Declarant and that he/she marks
to it in my presence.
Date

Declared at High Court in Matam
This 3rd day of July 2002
Signature of Interpreter
BEFORE ME:-

COMMISSIONER FOR OATHS
NIGER STATE

RECEIPT NO. 11403
Date: 3/7/2002
FEES PAID 1000



COMMISSIONER
NIGER
DATE



NIGER STATE JUDICIARY
STATUTORY DECLARATION OF AGE

I: Ibrahim Tabako of Kontafors

make oath and say as follows:-

- 1) That my age is 70 years
2) That I am the Father
(Relationship)

Zuwaira Ibrahim

(Here state the person about whom the declaration is made)

- 3) That to the best of my knowledge and belief the said:
Zuwaira Ibrahim was born at Kontafors
in Niger State of Niger
on the 31st day of March 1970
4) That at the time of his/her birth was not registered at Kontafors
in Niger State

- 5) That I make this solemnly declaration conscientiously believing the same to be truth, and by virtue of the provision of the Oaths Act.1990

Date: 14/02/08

Ibrahim

Signature of Declarant

I certify that the above declaration had been read and interpreted to the declarant and that he/her mark to it in my presence.

Date: 14/02/08

14/02/08
Signature of Interpreter

Declare at High Court in Mina
This 14th day of February 2008

BEFORE ME:-

COMMISSIONER FOR OATHS
NIGER
DATE

Fees Paid: 20,000

Receipt No. paid

Dated 14/02/08



National Examinations Council (NECO)[®]

Dr Nnamdi Azikwe road, Western Bye Pass, P.M.B 159, Minna, Niger State, Nigeria.

NOV/DEC Examination Result Details: IBRAHIM ZUWAIRA

Last Name:	IBRAHIM	Exam No:	18638883GI
Other Names:	ZUWAIRA	Exam Year:	2017
Center No:	0210017	Exam Type :	NOV/DEC
Centre Name:	MU/EA ZU IBRAHIM COMMERCIAL SEC. SCH. KONTAGORA		
*Card PinNo:	51652		
Card Usage:	You Have logged in time(s)		

* Please note that only the last five (5) characters of the Card PIN is displayed.

	Subject	Grade	Remark
1	English Language	D7	PASS
2	Mathematics	D7	PASS
3	Civic Education	C5	CREDIT
4	Biology	B2	VERY GOOD
5	Agricultural Science	E8	PASS
6	Islamic Studies	C6	CREDIT
7	Geography	C4	CREDIT
8	Government	A1	EXCELLENT
9	Economics	F9	FAIL

