



EC 9E
INDEPENDENT NATIONAL ELECTORAL COMMISSION

Plot 436 Zambezi Crescent, Maitama District, Abuja

**SUBMISSION OF NAMES OF CANDIDATES
BY POLITICAL PARTY**

20...20 STATE HOUSE OF ASSEMBLY ELECTION

SO KOTO STATE

POLITICAL PARTY ACTION PEOPLE'S PARTY (APP)

S/N	CONSTITUENCY	NAME OF CANDIDATE	AGE	SEX	PWD	ADDRESS	EDUCATIONAL QUALIFICATION(S)	REMARKS
1	KEBBE	ADAMU MUSA KEBBE	54	M		KEBBE	SSCE	
2								
3								
4								

SIGNED: _____

National Chairman

SIGNED: _____

National Secretary

- * Please attach sworn affidavit (EC 9) of each candidate.
- * Political parties shall mandatorily sponsor candidates who satisfy the statutory age qualification required for respective elective office(s).



EC 9
INDEPENDENT NATIONAL ELECTORAL COMMISSION
Plot 436 Zambezi Crescent, Maitama District, Abuja

**AFFIDAVIT IN SUPPORT OF
PERSONAL PARTICULARS**

Particulars of Persons seeking election to the Office/Membership of:

PRESIDENT ☐ VICE PRES. ☐ GOV. ☐ DEP. GOV. ☐

SEN. ☐ REPS. ☐ SHA ☒ CHAIRMAN/A/C ☐

VICE CHAIRMAN ☐ COUNCILLOR/A/C ☐

Tick as appropriate



CONSTITUENCY: Kebbe CODE: 11

STATE: SOKOTO STATE CODE: 33

FCT: CODE:

Affidavit in support of particulars of persons seeking Election to the office of President, Vice President, Governor, Deputy Governor, Senate, House of Representatives, State House of Assembly, Chairman, Vice Chairman or Councilor of Area Council.



I, Adamu Musa Kebbe hereby make oath and declare that I am the person seeking election into the office of State assembly in the Kebbe Constituency and the particulars given hereunder are correct, true and to the best of my knowledge.

PART A

Office contested for: Member State House of Assembly.
 Name of Constituency: Kebbe Code: 11
 Name of Political Party: Action Peoples Party (APP) Party membership No.
 (Please attach a copy of Party membership card)

PART B

A PERSONAL PARTICULARS

1. Surname (in Block Letters): MUSA
2. Other Names (in block letters) ADAMU
3. Former name(s)
4. Date of Birth 01-02-1966 Age 54 (Candidate shall comply with the statutory age required for the elective office sought. Birthplace Kebbe
5. Residential Address Kebbe
6. Occupation Trader
7. Telephone No 09034201186 E-mail Address
8. Are you a person with disability NO
9. Nationality Nigerian
10. Have you voluntarily in the past changed Nationality? YES ☐ NO ☒ If Yes, what was your former Nationality?
11. Have you voluntarily acquired citizenship of any other country? YES ☐ NO ☒ If Yes, which country?
12. Have you made a declaration of allegiance to that or any other country? YES ☐ NO ☒ If Yes, Specify the country

(Attach evidence)

C. SCHOOLS ATTENDED/EDUCATIONAL QUALIFICATIONS WITH DATES*Attach evidence of all educational qualifications*

S/N	SCHOOL	QUALIFICATION	YEAR
1	PRIMARY	Kebbe town primary School.	1979.
2	SECONDARY	Government Secondary School Anika.	1984.
3	HIGHER		

D (I) WORKING EXPERIENCE WITH DATES

NAME OF EMPLOYER	PERIOD OF WORK	REASONS FOR LEAVING (PLEASE ATTACH EVIDENCE)

- (ii) Have you ever been dismissed from the Public Service of the Federation, State or Local Government/Area Council? YES ☐ NO ☒ If Yes, give details

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E GENERAL

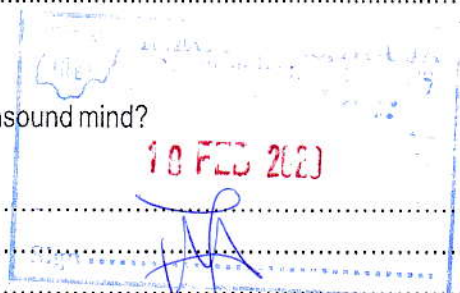
1. Have you ever been adjudged a lunatic or declared to be of unsound mind?

YES ☐ NO ☒ If Yes, give details

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2. Are you under a sentence of death, imprisonment or fine, for any offence involving dishonesty or fraud or any offence imposed by a Court or Tribunal? YES ☐ NO ☒ If Yes, give details.

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3. Have you in the last ten years been convicted and/or sentenced for an offence or dishonesty?

YES ☐ NO ☒ If Yes, give details.

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.....

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4. Have you ever been involved in any bankruptcy proceedings? YES ☐ NO ☒ If yes, give details.
.....
.....
.....
5. Have you ever been convicted by the Code of Conduct Tribunal? YES ☐ NO ☒
If Yes, give details
.....
.....
.....
6. Have you ever presented forged Certificate(s) to INEC? YES ☐ NO ☒ If Yes, give details.
.....
.....
.....
7. Do you or have you ever belonged to a Secret Society? YES ☐ NO ☒ If Yes, give details.
.....
.....
.....
8. Give any information about your person Good Citizen.





F. DECLARATION BEFORE A COMMISSIONER FOR OATHS, IN THE HIGH COURT.

I hereby declare that all the answers, facts and particulars I have given in this Form are true and correct and I have to the best of my knowledge fulfilled all the requirements for qualification for the office I am seeking to be elected.

DEPONENT

Sworn to at the High Court Registry, _____

This Day of 20

BEFORE ME



COMMISSIONER FOR OATHS.

We, being registered voters in the above State, do nominate the above candidate for office of Member of House of Representatives in..... Kebbe Constituency of SOKOTO State

Name: Kabiru Ladan
 Address: Kebbe
 Occupation: Trader
 Voter's Identification Number:
 Local Government/Area Council: Kebbe
 Ward: Kebbe west
 Delimitation: Kebbe west
 Date of issue: 2011

Kabiru

Signature of 1st Nominator

Name: Lauwali Muhammad
 Address: Kebbe
 Occupation: Teacher
 Voter's Identification Number:
 Local Government/Area Council: Kebbe
 Ward: Kebbe west
 Delimitation: Kebbe west
 Date of issue: 2011



Lauwali

Signature of 2nd Nominator

Name: Abdul Salam Muhammad
 Address: Kebbe
 Occupation: Farmer
 Voter's Identification Number:
 Local Government/Area Council: Kebbe
 Ward: Ma
 Delimitation: Margai west
 Date of issue: 2011

Abu

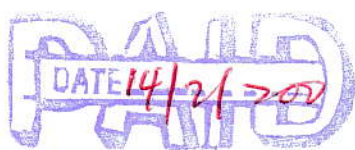
Signature of 3rd Nominator

F. DECLARATION BEFORE A COMMISSIONER FOR OATHS IN THE HIGH COURT

I hereby declare that all the answers, facts and particulars I have given in this Form are true and correct, and I have, to the best of my knowledge, fulfilled all the requirements for qualification for the office I am seeking to be elected.

Adamu

DEPONENT

Sworn to at the (State/High Court) Registry SOLCOTThis 14 Day of FEB 20 20_____
COMMISSIONER FOR OATHS

ACKNOWLEDGMENT

This is to acknowledge the receipt of **Form EC 9** from:

_____ (Party)

in favour of

_____ (Name of Candidate)

for the office of _____

Received by me, at _____

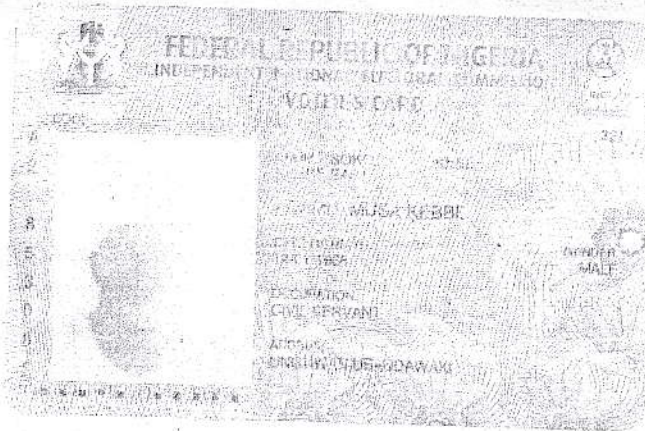
this _____ Day of _____ 20 _____

Stamp/Signature of Receiving Officer

Name: _____

Rank: _____





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BATCH: | SERIAL NO.:
ISSUED BY INEC PURSUANT TO SECTION 16 OF THE ELECTORAL ACT 2010





KEBBE LOCAL GOVERNMENT

Sokoto State of Nigeria

P.M.B.

Our Ref

Office of the Chairman
Kebbe Local Government
Sokoto State of Nigeria

Passport

Date:
Reg. No: KBELG/ADM/

Certificate of Identification/Origin

This is to Certify That

The Bearer ADAMU MUSA KEBBE

is an Indigene /a resident of FUDUN-WADA KEBBE

Kebbe Local Government Area of Sokoto State of Nigeria. He / She was

born at KEBBE In KEBBE District

This Certificate covers his/her identification as an indigene of
Kebbe Local Government Sokoto State

You are requested to give him/her every possible assistance please.

SECRETARY
Kebbe Local Government

CHAIRMAN/DPM
Kebbe Local Government

18 FEB 2023

West African Examinations Council

General Certificate of Education

ORDINARY LEVEL

JUNE, 1984

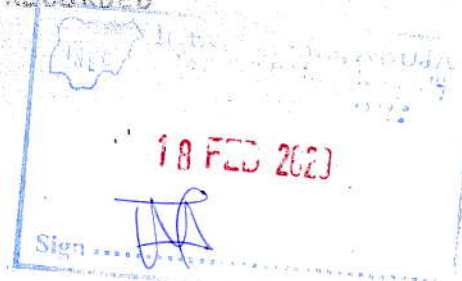
This is to Certify that: ADAMU MUSA KEBBE

having been in attendance at the following recognised school

GOVERNMENT SECONDARY SCHOOL, ANKA

*sat the Joint Examination for the School Certificate and
General Certificate of Education and obtained the results
shown below.*

SUBJECT	GRADE	G.C.E. ORDINARY LEVEL RESULT	SCHOOL CERTIFICATE EQUIVALENT
HAUSA	5	CREDIT	CREDIT
ISLAMIC RELIGIOUS KNOWLEDGE	5	CREDIT	CREDIT
HISTORY	3	GOOD	GOOD
HEALTH SCIENCE	7	PASS	PASS
SUBJECTS RECORDED		FOUR	FOUR



CANDIDATE No. 22613022

CD 04
[Signature]
Chairman of Council

CERTIFICATE No. 50856468

[Signature]
Registrar to the Council

Any alteration or erasure renders this certificate valueless.

West African Examinations Council

General Certificate of Education

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CD 04
[Signature]
Chairman of Council



CERTIFICATE No. 50856468

[Signature]
Registrar to the Council