



No. 17008

**JIGAWA STATE OF NIGERIA
CERTIFICATE OF PRIMARY EDUCATION**

Name..... ABBA USAINI
 Approximate date of Birth..... 1998
 Tribe..... HAUSA
 Birth Place and province. SAFA BABBA GIDAN BAKWATE
 Name of Parent or Guardian and his Occupation. DABIRU - FARMING
 Local Govt. Of Origin TAFAWA WADE A.I.T.O L.G.C.I.L.

Details of Schools Attended					Year
Primary 1	SAFA BABBA PRIMARY SCHOOL		2005
Primary 2	✓	✓	✓
Primary 3	✓	✓	✓
Primary 4	✓	✓	✓
Primary 5	✓	✓	✓
Primary 6	✓	✓	✓

This is to certify that the pupil named above has completed the year 20..... in Class..... with a minimum of 75 percent attendance.

HEADMASTER'S REPORT

Order of merit Final year 5 Place out of..... 40

*1 English	Good	Average	Weak
*2 Arithmetic	Good	Average	Weak

3 His strong subjects (if any) are: ENGLISH MATHS ISLAMIC

4 Outdoor activities..... FOOTBALL

*5 Sense of responsibility Good Average Weak

6 Posts of responsibility held..... CLASS MONITOR

7 Industry..... SATIN FACTORY

8 General Conduct..... GOOD

* Strike out words not applicable

* State whether Football, Athletics, Scouting etc.

Signature of Pupil..... ABBA

Signature of Headmaster.....

Date..... 13-7 2005

SAFA PRIMARY SCHOOL

Date..... 21/11 2010

School..... SAFA P.S

Date..... 21/11/2011

Signature of Proprietor or his

Representative.....

Voluntary Agency/Local Govt. Authority

This Certificate is supplied only to schools approved by the Ministry of Education. It should be kept in a safe place for if lost or destroyed no copy will be issued.



JIGAWA STATE JUDICIALE STATUTORY DECLARATION OF AGE

I.....All.....Hussaini.....
of.....CUSTAN.....BAKWALE TOWN.....Age.....10 A.Y.A

Do sincerely and solemnly declare as follows:-

1. That my age is.....60.....P.P.A/15
2. That I am the Father/Mother/Relative of.....Abba.....Hussaini.....ABBA HUSSAINI
3. That to the best of my knowledge and belief the said.....Abba.....Hussaini.....ABBA HUSSAINI.....Was born at:....CUSTAN BAKWALE.....in.....A.Y.O.....Local Government of.....JI GALIA.....state on the.....17/2/1997.....day of.....FEBRUARY.....A.Y.O.....Local Government
4. That at the time of his/her birth through an oversight his/her birth was not registered at.....A.Y.O.....Local Government
5. That I make this solemn declaration in good faith believing same to be true to the best of my knowledge and virtue of provision of the Oat Act 2004.

P.M. Hussaini
DECLARANT

6. I certify that the above declaration was read over to the declarant and interpreted in.....Hausa.....language who seemed to have understood before signing/affixing his/her mark to it in my presence

INTERPRETER

SWORN TO AT.....JULY.....REGISTRY 10 House.....
THIS.....15.....DAY OF.....JULY.....2017

BEFORE ME

RECEIPT NO.....1523/66

DATE.....15/7/2019

COMMISSIONER FOR OATHS

15/7/2019

GOVERNMENT DAY SENIOR SECONDARY SCHOOL
KAFIN HAUSA

Jigawa State



Testimonial

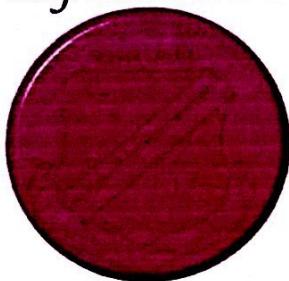
This is to certify that

ABBA HUSSAINI

Has completed his Senior Secondary Education course in this school
From 2013 To 2016

REMARKS

1. General Conduct: FAIR
2. Hobbies & Interests: READING
3. Responsibilities Held: NIL



PRINCIPAL
GDSSE K/HUSA
JIJAWA STATE
1/7/16
STAMP & SIGNATURE OF PRINCIPAL

JIGAWA STATE JUDICIARY



AFFIDAVIT FOR CHANGE OF NAME

I..... ABBA HUSSAINI,
Of..... GIDA BATHURTE LGA..... Abuja..... Cust. Area

Do hereby make Oath and State as follows:-

1. That I formerly known and called UZMAN HUSSAINI.....
2. That I now wish to be known and called ABBA HUSSAINI.....
3. That I want AUTHORITY CONCERN TO NOTE..... and
General Public to note.
4. That I make this solemn declaration in good faith believing the same to be true to
the best of my knowledge, and by virtue of the provisions Oath Act,2004.

Signature
DECLARANT

5. I certify that the above declaration was read over to the declarant and interpreted in
..... Hausa Language who seemed to have understood before signing,
affixing His/Her mark to it in my presence.

Signature
INTERPRETER

SWORN TO AT THE HIGH COURT REGISTRY, DUTSE

THIS..... 27/09/2020 DAY OF September 2020

BEFORE ME:

COMMISSIONER FOR OATHS
JIGAWA STATE HIGH COURT
DUTSE

COMMISSIONER FOR OATHS

JIGAWA STATE JUDICIARY



Court of Appeal
Court of First Instance
Court of Appeal
Court of First Instance

AFFIDAVIT FOR CHANGE OF NAME

I, ABBA HUSSAINI
of G/LUSAJI AUYO. L.G.A

Do sincerely and solemnly declare as follows:-

1. That I was formally known and called USMAN USAINO
2. That I now wish to be known and called: ABBA HUSSAINI
3. That I want: THE AUTHORITY CONCERNED
and the general public to note.
4. That I make this solemn declaration in good faith believing same to be true to the best of my knowledge, and by virtue of the provision of the Oath Act. 1963.

Abba

DECLARANT

5. I certify that the above declaration was read over to the declarant and interpreted in Hausa language who seemed to have understood before signing, affixing His/Her mark to it in my presence,

Amadou Sadiq

INTERPRETER

SWORN TO AT E.M.C. REGISTRY BOUTSE
THIS 10 DAY OF 2021

COMMISSIONER FOR OATHS

BEFORE ME

COMMISSIONER FOR OATHS

MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY
JIGAWA STATE OF NIGERIA



JUNIOR SECONDARY SCHOOL CERTIFICATE

This is to certify that

NAME ABBA HUSSAINI Exam No.: 074

of BIDAY RAKWAIRE of ANYO 2-G
HOME TOWN

of Jigawa State completed Junior Secondary School course

in the year 2013

at JUNIOR SECONDARY SCHOOL TOYAKIA
SCHOOL

He/She performed as follows:

SUBJECT	GRADE	REMARK
ENGLISH	C	GOOD
MATHEMATICS	B	V. GOOD
BASIC SCIENCE	B	V. GOOD
HISPA	B	V. GOOD
J. D. S	A	EXCELLENT
SOCIAL STUDIES	E	PASS
PSYCHO TECHN.	B	V. GOOD
AGRIC SCIENCE	B	V. GOOD
D. I. E	C	GOOD
ARTS	C	GOOD

PRINCIPAL
GOVT. JUNIOR SEC. SCHOOL
TOYAKIA
W.M.E.



DIRECTOR
WAUSA ZONAL EDUCATION
COMMISSIONER
JIGAWA STATE
PERMANENT SECRETARY

ORIGINAL

JGW/AUY 001/ 1276



JIGAWA STATE OF NIGERIA
AUYO LOCAL GOVERNMENT
PERSONNEL MANAGEMENT DEPARTMENT

TO WHOM IT MAY CONCERN



Certificate Of Indigenization

Name ABBA HUSSAINI

This is to certify that the above name is an Indigene of Auyo Local Government.....

He/She hail from:

GIDAN BAKWARE

Village

of:

AYAMA

District

Certificate issued This:

11

day of

FEB. 2019

Bank Verification Number (BVN)

22472159783

National ID Card Number

4784924555

I therefore recommend any assistance
you may wish to render him/her to achieve
his/her Objectives, Please.

Executive Chairman
AUYO LOCAL GOVT.
Date:
Signature

SECRETARY

Secretary
AUYO LOCAL GOVT.
Date:
Signature



JOINT ADMISSIONS AND MATRICULATION BOARD

National Headquarters, Suleja-Bwari Road, Bwari, P. M. B. 189, Garki Abuja, Nigeria.

Tel.: 08166335513, 08123658955

Website: www.jamb.gov.ng

Email: registrar@jamb.gov.ng

support.jamb.gov.ng

(OFFICE OF THE REGISTRAR)



Date Printed: Dec-24-2019

Hussaini Abba

Auyo Gidan Bakware Jigawa State

REGISTRATION NUMBER: 96396644EI
EXAMINATION NUMBER : C41709167

Dear Hussaini,

PROVISIONAL LETTER OF ADMISSION TO JIGAWA STATE POLYTECHNIC, DUTSE, JIGAWA STATE FOR 2019/2020 SESSION

I am delighted to inform you that you have been offered provisional admission to JIGAWA STATE POLYTECHNIC, DUTSE, JIGAWA STATE to study a NATIONAL DIPLOMA programme in ACCOUNTANCY with the following details:

School: SOCIAL SCIENCE

Department: ACCOUNTANCY

Degree: Ordinary National Diploma (ND)

Duration of Programme: 2 YEARS

The confirmation of this provisional admission is subject to your possession of the minimum entry requirements for the programme to which you have been offered this admission with the following conditions:

1. At the point of registration in the Institution, you will be required to present the original(s) of the certificate(s) or any other acceptable evidence of the qualifications on which this offer of admission has been based. The Board reserves the right to withdraw this admission even after registration if it is discovered that you have been involved in any form of examination/admission irregularities.
2. If it is discovered at any time that you do not possess any of the qualifications which you claim to have obtained, you will be required to withdraw from the Institution.
3. Information relating to date of registration, schedule of charges, accommodation facilities, medical examination and any other institutional conditions should be obtained directly from the institution to which you have been admitted.
4. In the absence of any response from you within a reasonable time, the institution to which you have been admitted will assume that you are not interested in the offer and may proceed to replace you.
5. You are required to present to the institution at the time of registration a letter of reference from a person of reputable standing in the society that can vouch for your character.
6. At the point of registration, you are to submit:
 - a) JAMB original Result Slip
 - b) JAMB duplicate online Admission Letter (Second copy)
 - c) Copies of your credentials

Sincerely Yours,

Ishaq O. Oloyede, OFR, FNAL

Registrar





JIGAWA STATE POLYTECHNIC DUTSE
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES
DEPARTMENT OF ACCOUNTANCY

EXAMINATION CARD

SECOND SEMESTER, 2020/2021 SESSION



Programme: National Diploma in Accountancy

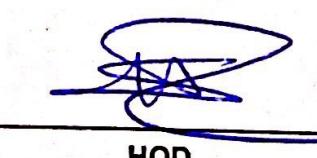
Level: Year 2

Reg. No: ND/ACC/19/020M

Name: Abba Hussaini

S/N	Course	Course Title	Units	Lecturer's Sign
1	ACC221	Financial Accounting II	4	ABD 3/1/21
2	ACC222	Cost Accounting II	4	TOLARU
3	ACC223	Auditing II	3	SHAY
4	ACC224	Taxation II	3	SHAY 2/2/21
5	ACC225	Public Sector Accounting I	2	MUSDP 6/2/21
6	ACC229	Project	2	
7	BAM222	Business Statistics II	2	SHAY 3/2/21
8	BFN211	Business Finance	3	SHAY


STUDENT


HOD


COLLEGE EXAM OFFICER



JIGAWA STATE POLYTECHNIC DUTSE
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES
DEPARTMENT OF ACCOUNTANCY

EXAMINATION CARD

SECOND SEMESTER, 2019/2020 SESSION



Programme: National Diploma in Accountancy

Level: Year 1

Reg. No: ND/ACC/19/020M

Name: Abba hussaini

S/N	Course	Course Title	Units	Lecturer's Sign
1	ACC121	Principles Of Accounting II	3	MUSA
2	BAM122	Business Mathematics	2	#
3	BAM126	Introduction To Entrepreneurship	3	Ash
4	BAM214	Business Law/sales Of Goods Act.	2	SA
5	BAM221	Practice Of Management	2	P.M
6	BFN121	Elements of Banking 2	2	Abas
7	BFN122	Principles of Economics 2	3	Hassan
8	GNS121	Citizenship Education2	2	TA
9	OTM201	Technical English	4	Edombe
10	OTM214	Information Communication Technology2	4	Mola

STUDENT

HOD



COLLEGE EXAM OFFICER



JIGAWA STATE POLYTECHNIC DUTSE
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES

DEPARTMENT OF ACCOUNTANCY

EXAMINATION CARD

FIRST SEMESTER, 2019/2020 SESSION



Programme: National Diploma in Accountancy

Level: Year 1

Reg. No: ND/ACC/19/020M

Name: Abba hussaini

S/N	Course	Course Title	Units	Lecturer's Sign
1	ACC111	Principles Of Accounts I	3	
2	BAM112	Business Mathematics I	2	
3	BAM113	Principles Of Law	3	
4	BAM211	Principles Of Management I	3	
5	DFN111	ELEMENTS OF BANKING 1	2	
6	BFN112	PRINCIPLES OF ECONOMICS 1	3	
7	GNS111	Citizenship Education I	2	
8	OTM101	Technical English	4	
9	OTM113	Information And Communication Technology (ict) I	3	

STUDENT

HOD

COLLEGE EXAM OFFICER



JIGAWA STATE POLYTECHNIC DUTSE
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES
DEPARTMENT OF ACCOUNTANCY

EXAMINATION CARD

FIRST SEMESTER, 2020/2021 SESSION



Programme: National Diploma in Accountancy
Level: Year 2
Reg. No: ND/ACC/19/020M
Name: Abba Hussaini

S/N	Course	Course Title	Units	Lecturer's Sign
1	ACC211	Financial Accounting I	4	ANUSHE 07/02/21
2	ACC212	Cost Accounting I	4	FAIDHA 15/09/21
3	ACC213	AUDITING I	3	MUSHTAQ 12/11/21
4	ACC214	TAXATION I	3	SAJID 15/09/21
5	BAM212	Business Statistics I	3	SAJID 15/09/21
6	BAM216	Practices Of Entrepreneurship	2	SAJID 15/09/21
7	BAM424	Company Law	2	SAJID 15/09/21
8	BFN111	ELEMENTS OF BANKING 1	2	SAJID 15/09/21
9	BFN213	BUSINESS RESEARCH METHOD	2	SAJID 15/09/21
10	NEWSIWE S201	Student industrial Work experience Scheme	4	

As
STUDENT

for
HOD



COLLEGE EXAM OFFICER

MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY JIGAWA STATE



STATEMENT OF RESULT: NECO 2016.....

Name of School G.S.S KAFIN HAUSA.

Code No. 0130046

Name of Student HUSSAINI ABBA

Adm. No.

Examination No. 60274983CG.

Date of Exam: JUNE/JULY.

S/N	SUBJECTS	GRADE INDICE	GRADE IN WORD
1	English Language	CG	Credit
2	Mathematics	CG	Credit
3	Hausa/Yoruba/Igbo Language	CG	Credit
4	Physics / Government	D7	Pass
5	Chemistry / History		
6	Biology		
7	Geography	CS	Credit
8	Agric Science		
9	Woodwork		
10	Metalwork		
11	Economics	CS	Credit
12	IRS / CRS	CG	Credit
13	Literature In English		
14	Hausa Literature		
15	Fine Arts		
	Civic Education	D7	Pass
	Animal Husbandry	CS	Credit

KEY TO SCORES

GRADE	WORDS	RANGE OF MARK
	Distinction	90+
B2	Credit two	80 - 89%
B3	Credit three	70 - 79%
C4	Credit four	60 - 69%
C5	Credit five	55 - 59%
C6	Credit six	50 - 54%
D7	Pass	45 - 49%
E8	Pass	40 - 44%
F9	Fail	0 - 39%



No of Distinction/s Nil

No of credit/s Seven

No of Pass/es Two

■PRINCIPAL
GDSS KI HAUSA
JIGAWA STATE

Principal Signature, Stamp & Date

EXAMS KI HAUSA
Evaluation Officer

Date 23/01/2019

JIGAWA STATE POLYTECHNIC DUTSE



JIGAWA STATE
POLYTECHNIC DUTSE
BURSARY DEPT.
DATE PAID

Payment Receipt
Generated on 24/06/2021

Remita Retrieval Reference (RRR)

2705-0091-9713

PAYER INFORMATION

NAME ABBA HUSSAINI
EMAIL abbahussaini17@yahoo.com
PHONE NUMBER

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGE (NGN)	VAT on Charges (NGN)	TOTAL (NGN)
24/06/2021	270500919713	SCHOOL FEES	18,200.00	0.00	0.00	18,200.00
		TOTAL PAID	18,200.00	0.00	0.00	18,200.00
		TOTAL AMOUNT				18,200.00
		BALANCE DUE				0.00

BILLER-REQUIRED INFORMATION

BANK NAME BRANCH BANK TELLER DEPOSIT SLIP No.
FIDELITY BANK PLC DUTSE BRANCH BAFFA ISHAQ 0498719

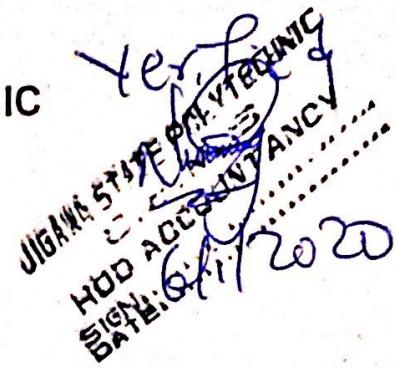
PAYMENT CHANNEL INFORMATION

JIGAWA STATE POLYTECHNIC

P.M.B 7040, DUTSE

www.jigpoly.edu.ng

OFFICE OF THE REGISTRAR



Ref: 08087174153

Date: 22 December 2019



NAME OF STUDENT: Abba hussaini

STATE: Jigawa

LGA: Auyo

PROVISIONAL ADMISSION INTO HND/ND/HIGHER DIPLOMA/DIPLOMA PROGRAMMES 2019/2020 SESSION

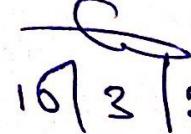
With reference to your application number 08087174153 for admission to the polytechnic, I am pleased to inform you that you have been offered provisional admission to read

ND Accountancy (MORNING) at the College of
Business and Management Studies in the Department of Accountancy.

The offer is subject to the following conditions:-

- a. Payment of non-refundable acceptance fee of N3000.
- b. That you will be registered only after presenting original credentials for verification and that all credentials provided on your application form are certified correct.
- c. That if at the time of registration, during or after the programme of your study, it is discovered that you do not satisfy the minimum requirement prescribed you will be asked to withdraw/forfeit the certificate as the case may be.
- d. That if you are provided with accommodation on the campus, you will undertake to be of good behaviour and abide by the regulations of the polytechnic.
- e. That you should provide a certificate of fitness from a government hospital.
- f. That you should settle, in full, all registration charges before you are registered.
- g. That registration fees are non-refundable.


REGISTRAR

Verified

16/3/20



JIGAWA STATE POLYTECHNIC DUTSE
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES
DEPARTMENT OF ACCOUNTANCY
COURSE REGISTRATION FORM



Application ID : ND/ACC/19/020M

Programme : National Diploma In

Name : Abba Hussaini

Session : 2020/2021

Semester : First

S/No	Course Code	Course Title	Unit	Level Coordinator's Signature
1	ACC211	Financial Accounting I	4	
2	ACC212	Cost Accounting I	4	
3	ACC213	AUDITING I	3	
4	ACC214	TAXATION I	3	
5	BAM212	Business Statistics I	3	
6	BAM216	Practices Of Entrepreneurship	2	
7	BAM424	Company Law	2	
8	BFN111	ELEMENTS OF BANKING 1	2	
9	BFN213	BUSINESS RESEARCH METHOD	2	
10	NEWSIWES201	Student industrial Work experience Scheme	4	

Total Unit of First Semester is 29

Semester : Second

S/No	Course Code	Course Title	Unit	Level Coordinator's Signature
1	ACC221	Financial Accounting II	4	
2	ACC222	Cost Accounting II	4	
3	ACC223	Auditing II	3	
4	ACC224	Taxation II	3	
5	ACC225	Public Sector Accounting I	2	
6	ACC229	Project	2	
7	BAM222	Business Statistics II	2	
8	BFN211	Business Finance	3	

Total Unit of Second Semester is 23


JIGAWA STATE POLYTECHNIC
C. E. M. S.
DEPARTMENT OF ACCOUNTANCY
Head of Department
Sign/Date/Stamp

N/13/ACC/19/02022

JIGAWA STATE POLYTECHNIC DUTSE.



JIGAWA STATE
POLYTECHNIC DUTSE
Bursary Dept.
DATE: 24/06/2021

Payment Receipt
Generated on 24/06/2021

Remita Retrieval Reference (RRR)

2705-0091-9713

PAYER INFORMATION

NAME ABBA HUSSAINI
EMAIL abbahussaini17@yahoo.com
PHONE NUMBER

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGE (NGN)	VAT on Charges (NGN)	TOTAL (NGN)
24/06/2021	270500919713	SCHOOL FEES	18,200.00	0.00	0.00	18,200.00
		TOTAL PAID	18,200.00	0.00	0.00	18,200.00
		TOTAL AMOUNT				18,200.00
		BALANCE DUE				0.00

BILLER-REQUIRED INFORMATION

PAYMENT CHANNEL INFORMATION

BANK NAME FIDELITY BANK PLC
BRANCH DUTSE BRANCH
BANK TELLER BAFFA ISHAQ
DEPOSIT SLIP No. 0498719

PAYMENT CHANNEL INFORMATION

The West African Examinations Council

West African Senior School Certificate For School Candidates

2016



This is to Certify that:
HUSSAINI ABBA

born on FEBRUARY 01, 1997

sex: MALE

whose photograph is embossed, having been in attendance at
GOVERNMENT DAY SECONDARY SCHOOL, K/HAUSA

sat the West African Senior School Certificate Examination
and obtained the results shown below:

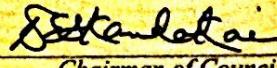
SUBJECT

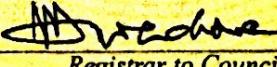
ECONOMICS
GEOGRAPHY
GOVERNMENT
ISLAMIC STUDIES
CIVIC EDUCATION
HAUSA
MATHEMATICS
ANIMAL HUSBANDRY
SUBJECT RECORDED

GRADE

C6
E8
E8
C6
D7
C5
C4
D7
EIGHT

CD 29

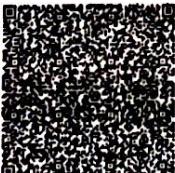

Chairman of Council


Registrar to Council

Candidate No.
4181002093

Certificate No.

NGWASSCS
23395806



WASC



Any alteration, erasure or absence of photograph renders this Certificate invalid.



Payment Receipt
Generated on 02/11/2021

Remita Retrieval Reference (RRR)

3505-6868-0158

PAYER INFORMATION

NAME	ABBA HUSSAINI
EMAIL	abbahussaini2019@gmail.com
PHONE NUMBER	234 808 717 4153

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGE (NGN)	VAT on Charges (NGN)	TOTAL (NGN)
02/11/2021	350568680158	NATIONAL IDENTITY MANAGEMENT COMMISSION (NIMC) FEES	500.00	152.50	11.44	663.94
		TOTAL PAID	500.00	152.50	11.44	663.94
		TOTAL AMOUNT				663.94
		BALANCE DUE				0.00

BILLER-REQUIRED INFORMATION

ITEM	DESCRIPTION
Description	CHANGE OF NAME

PAYMENT CHANNEL INFORMATION

PAYMENT CHANNEL	MASKED CARD PAN	AUTHORIZATION REF.	CARD SCHEME
CARD PAYMENT		8510951932 -	

PAYMENT CHANNEL INFORMATION

JIGAWA STATE POLYTECHNIC, DUTSE



S/No: 0001/0000

Payment Receipt
Generated on 24/12/2019

Remita Retrieval Reference (RRR)

1303-6280-6842

PAYER INFORMATION

NAME ABBA HUSSAINI
EMAIL abbahussaini17@yahoo.com
PHONE NUMBER 08087174153

Jigawa State Polytechnic

06/01/2020

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGE (NGN)	VAT on Charges (NGN)	TOTAL (NGN)
24/12/2019	130362806842	APPLICATION FORM PURCHASE	3,000.00	0.00	0.00	3,000.00
		TOTAL PAID	3,000.00	0.00	0.00	3,000.00
		TOTAL AMOUNT				3,000.00
		BALANCE DUE				0.00

BILLER-REQUIRED INFORMATION

PAYMENT CHANNEL INFORMATION

PAYMENT CHANNEL

AUTHORIZATION REF.

CARD PAYMENT

5363017095 - 5363017581

DEPOSITED FOR ACCOUNT OF:



Account Name
Bute

RRR No

Name of MDA State Polytechnic

Name of payer Alba Hisseini

Email Address of payer abubahir.hisseini@jps.edu.ng

Amount in words Eighteen thousand and

Five hundred naira only

Telephone Number 08087174152

Purpose of Payment School fees

Note: Customers are informed that the Bank reserves the right at its discretion to postpone payment on cheque drawn against uncleared effects which may have been credited to the account.

No 0498719

Date: 21-06-2021 Branch: Bute



CHEQUE(S) CASH DETAILS			NAIRA	Kobo
CASH				
BANK	LOCATION	CHEQUE NO	CASH/ ONLY	
			N1000	19700
			N500	500
			N200	200
			N100	100
			N50	50
			N20	20
			N10	10
			N5	5
			N2	2
			N1	1
			N50K	50
			Other Coins	
			TOTAL	18200



NATIONAL ASSOCIATION OF POLYTECHNIC

ACCOUNTANCY STUDENTS (NAPAS)
COLLEGE OF BUSINESS AND MANAGEMENT STUDIES
DUTSE JIGAWA STATE POLYTECHNIC.
MOTTO: Accountability & integrity jigawapoly@yahoo.com



CASH RECEIPT

Date: 15/11/2020

Received From: Abba Hessaini
The sum of: five hundred Naira Only.

Kobo
..... Naira: Kobo

Being Payment for: NAPAS

=N= 500 :K

100 1

15/11/2020

Autorized Sign



AUYO LOCAL GOVERNMENT COUNCIL
ORIGINAL
JIGAWA STATE

NO. 3112

HEAD _____

SUB-HEAD _____

DEPARTMENTAL RECEIPT

Poss month DEPARTMENT

Received from As ba Hillaiyu

Nakarba daga hannun the sum of Five

Five Naira Only Kobo

On Account of Being Payment of
Sabo da Mr. George certificate

Signature of Revenue Collector

Hannun mai karban kudi

Date 10/05/19
Rana

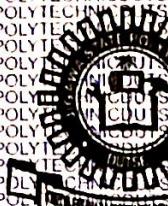
N 500/- K

Signature of Payer

Hannun mai biya

**REVENUE
RECEIPT**

A 0918145



JIGAWA STATE POLYTECHNIC DUTSE

Received from

The sum of

Naira

Being

Signature or

Mark of Payer

Signature of Witness

Occupation and

Address of Witness

Signature of
Revenue Collector

DUTSE

2014

Department

2014

Station



For

HEAD

No

Title

Sub Head

No