



FORM EC 8A
S/N: 103

SN	POLITICAL PARTY	VOTES SCORED		NAME / SIGNATURE OF POLLING AGENT
		IN FIGURES	IN WORDS	
1	ADC	0	NO VOTE SCORED ZERO	
2	ADP	0	Zero	
3	APC	0	NO VOTE SCORED ZERO	Amir Abdulaziz
4	LP	0	Zero	
5	PDP	0	NO VOTE SCORED ZERO	Sadiq Ali
6	SDP	0	NO VOTE SCORED ZERO	
TOTAL VALID VOTES		0	NO VOTE SCORED ZERO	

I, _____ (Name of Presiding Officer) hereby certify that the information furnished by me is true and accurate account of votes cast in this Polling Unit and that the election was conducted in accordance with the provisions of the Election Code.

Presiding Officer

