

This declaration is made to the best of our knowledge, information and belief.

Dated thisday of 20

Names and signatures of three authorised officials:

1. Name

Signature

ID/Passport No.

2. Name

Signature

ID/Passport No.

3. Name

Signature

ID/Passport No.

PART II

NUMBER OF MEMBERS OF THE POLITICAL PARTY ACCORDING TO COUNTIES

S/No.	Name of County	Number of members
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47.		
	TOTAL	

PART III

LOCATION AND ADDRESS OF PARTY HEAD OFFICE AND COUNTY BRANCH OFFICES

The location of the head office of the political party is.....
..... and the address is P.O. Box or/and Telephone Number
..... (Add building, L.R No., street, road or nearest location)

The location and address of party branch offices which shall be in more than half of the counties are as follows:

S/No.	County	Location	Address/Telephone No.
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