



PAKISTAN National Identity Card
ISLAMIC REPUBLIC OF PAKISTAN



Name
Isaac M Paul



Father Name
John

آیزک ایم پاول



Gender | Country of Stay
M | Pakistan

جان

Identity Number | Date of Birth
41409-89691251 | 22.11.1999

Date of Issue | Date of Expiry
26.08.2020 | 26.08.2030

DECLARED NEGATIVE
CHIEF MEDICAL OFFICER
CIVIL HOSPITAL THATA

IO WHO
Laigaz
21/7/2023

Signature

SICKNESS PERIOD: (1) Days

414 39-89691
گوشی: 414 39-89691
بلوچ، ڈاک خانہ، خان، تحصیل گجرات
باری، ضلع ٹھٹھہ



مستقل پتہ: سردار گل، ٹریڈنگ کالونی وارڈ 1، ٹھٹھہ

Uzma Y. Noor
Registrar General of Pakistan

0303125429

گمشدہ کارڈ ملنے پر قریبی ایئر بس میں ڈال دیں



Note: All answers must be in Physician's handwriting.
Please don't leave any blank, unanswered question, date and/or signature, wherever applicable

1. Deceased's Information

a. Deceased Name: ISAAC - MPAUL
 b. Father's Name/Husband's Name: JOHN
 c. Date of Birth of deceased: 01-07-2023 Age: 29 CNIC No. 41409-8969125-1
 d. Residential Address: CHRISTIAN - COLONY - THATTA
 Contact No. _____

2. Event Information

a. Date of Death 01-07-2023
 b. Place of Death MAKLI - CIVIL - HOSPITAL - THATTA
 If died in hospital or other medical institution, please give name DEATH - CERTIFICATE
 c. Primary Cause of Death Shortness of Breaths of Breaths
 d. Secondary Cause of Death Severe chest pain & respiratory cardiac arrest
 e. Interval between onset and death

From	To	No of Days
<u>01-07-2023</u>	<u>01-07-2023</u>	<u>01</u>

3. Past Medical History

a. When did deceased first complain of or give other indications of his/her last illness? Breath Shortness
 b. Date last consulted or took medical advise of his/her last illness? 01-07-2023
 c. Have you treated or advised any treatment prior to last illness? Yes No
 d. Did the deceased, to your knowledge, receive treatment during the last five year from any other physician, or hospital? Yes No

Date	Physician/hospital Name	Nature of Illness	Treatment

4. Accidental Death/Suicide, Homicide

a. Cause of death, please specify Accident Suicide Homicide Other Breath Shortness
 b. Please describe event in detail Arrived Hospital in collapse Shortness breath & expired due to cardiac arrest.
 c. Was an inquest/investigation held? Yes No
 d. Was an autopsy performed Yes No if yes, please describe findings in detail

5. Declaration

I hereby declared that to the best of my knowledge and belief the information given herein is true and complete

Signature: [Signature] Date of statement: _____
 Name: DR. Zulfikar Gill Contact No. 0313-2920481

MEDICAL OFFICER
CIVIL HOSPITAL THATTA

PAK-QATAR FAMILY TAKAFUL LIMITED

102-105, Business Arcade, Block-6, P.E.C.H.S, Shakra-e-Faisal, Karachi 75400, Phone: (92-21) 34311747-56 (Ext-162)
 Fax: (9221) 34386451, UAN: 021-111-TAKAFUL (825238). Email: life.claims@pakqatar.com.pk, www.pakqatar.com.pk



Employer's Statement - D1 (for Death Claim)

Note : Please don't leave any blank, unanswered question, date and/or signature, wherever applicable

1. Policy holder's information

Name of Company	
Takaful Policy No.	Policy Start Date

2. Participant's information

a. Deceased Name: ISAAC - MPAUL

b. Father's Name/Husband's Name: JOHN

c. Date of Birth of deceased: 22-11-1993 Age 29 CNIC No. 41409-8969125-1

d. Residential Address: CHRISTIAN-COLONY-THATTA

e. Proof of age: National Identity Card Matric Certificate Other (Please specify) _____

3. Occupational Information

a. Employee No. _____ b. Date of joining of Company _____

c. Designation UCPO d. Monthly Salary _____

e. Occupation (at date of Death) UCPO

4. Event Information

a. Date of Diagnosis 01-07-2023

b. Date of Death 01-07-2023 c. Place of Death Mashki Hospital

d. Primary Cause of Death Coronary Artery e. Secondary cause Coronary Artery

f. On what date did deceased last attend his usual work? 01-07-2023

g. When did deceased first complain of or give other indications of his/her last illness? 01-07-2023

5. Claim Information

a. Amount of Claim _____

b. Title of Cheque _____

6. Declaration by Employer/Authorized representative

The undersigned, hereby makes claim to said Takaful coverage and hereby agrees that the written statements and affidavits of all the physicians who attended to or treated the Participant shall constitute and they are hereby made a part of these proofs of death and further agrees that the furnishing of this form, or of any nor a waiver of any of its right or defenses.

Furthermore, I/We hereby authorize, any physicians, hospitals, clinic or medical service provider, insurance company, or any other institution, or any person, who has any record or information about above mentioned life to provide Pak-Qatar Family Takaful Limited complete information including copies of records with reference to any sickness, accident, disability treatment, examination, medical investigation, advise or hospitalization underwent. A photocopy of this authorization shall be as valid as the original.

Claimant Signature: _____

Name: Mr. JOHN.

Date: 15-8-2023

Company Stamp

Checklist

- Form D-2 Physician's Statement
- CNIC - Deceased
- Death Certificate - NADRA
- Death Certificate Hospital
- Complete past treatment record (if any)
- Attendance record of six months before death
- Salary record of six months before death
- AML Questionnaire
- Copy of FIR/Police report (in case of unnatural cause)
- Copy of Autopsy report (if any)
- Copy of Driving license (in case of accident)

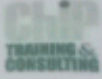
Please ensure to enclosed above mentioned document in order to avoid any delay

PAK-QATAR FAMILY TAKAFUL LIMITED

102-105, Business Arcade, Block-6, P.E.C.H.S, Shakra-e-Faisal, Karachi 75400, Phone: (92-21) 34311747-56 (Ext-162)
Fax: (9221) 34386451, UAN: 021-111-TAKAFUL (825238), Email: life.claims@pakqatar.com.pk, www.pakqatar.com.pk

ID	Name	Cnic	Position	Job type	Date	Address	Time	Attendance
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-02-22	24.742367	10:18:46an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-02-28	24.751357	09:32:11an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-04	24.752001	09:36:08an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-06	24.565926	09:41:43an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-07	24.760010	09:03:10an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-08	24.752417	01:18:55pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-09	24.753356	09:20:29an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-10	24.752998	09:17:59an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-11	24.752998	08:43:00an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-13	24.702392	09:31:05an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-14	24.706980	09:08:53an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-15		09:32:13an	Leave Request
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-16		09:32:13an	Leave Request
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-17	24.754225	09:14:16an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-18	24.751534	09:40:38an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-20	24.310994	12:12:58pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-21	24.760010	09:58:37an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-22	24.753874	12:03:00pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-23	24.752681	09:47:58an	ph
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-24	24.752417	09:32:41an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-01	24.733466	07:32:54pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-02	24.733672	07:34:26pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-03	24.733671	07:34:45pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-25	24.752682	09:58:35an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-27	24.743228	09:35:48an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-28	24.732363	07:44:03an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-29	24.750422	09:42:41an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-30	24.752681	09:53:09an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-03-31	24.752417	09:31:37an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-01	24.555428	09:36:44an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-03	24.752587	09:33:09an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-04	24.718799	10:02:40an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-05	24.731013	09:36:48an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-06	24.724953	09:22:52an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-07	24.713520	09:28:59an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-08	24.706039	09:38:33an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-10		12:15:32an	leave
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-11		12:15:32an	leave
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-12	24.706980	10:13:34an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-13	24.718780	09:31:45an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-14	24.728240	09:47:18an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-15	24.742153	09:51:12an	Present

533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-17	24.564913	09:53:33an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-18	24.739797	07:22:31an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-19	24.754770	04:29:20pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-20	24.747863	10:43:40an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-26	24.757204	09:37:12an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-27	24.718869	09:39:55an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-02	24.752464	09:31:24an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-03	24.738804	08:44:55an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-04	24.553389	09:24:28an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-05	24.723674	09:31:22an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-06	24.552277	09:47:39an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-08	24.556971	09:50:25an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-09	24.757155	09:26:02an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-10	25.377690	03:22:16pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-01	25.377727	07:38:54pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-11	25.377716	07:44:36pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-12	25.377716	07:47:16pr	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-13	24.560153	09:49:56an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-15	24.561574	09:18:51an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-16	24.561574	09:23:12an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-18	24.579295	09:45:47an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-19	24.745826	09:57:41an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-04-28	24.742307	09:39:02an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-17	24.742307	09:44:29an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-23	24.555684	10:48:24an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-24	24.549771	10:00:02an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-05-25	24.745944	10:23:42an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-21	24.755199	10:10:19an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-22	24.745886	09:50:03an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-23	24.548435	10:00:12an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-24		12:31:24an	Absent
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-26	24.547405	09:41:52an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-27	24.705159	09:20:22an	Present
533	Isaac M Pa	4.14E+12	UCPO-Sind	UCPO	2023-06-28	24.745788	10:25:23an	Present



Chip Training & Consulting (Pvt) Ltd

Month: May, 2023

EMPLOYEE NAME: Isaac M Paul		DESIGNATION: UCPO	
CNIC: 4140989691251		LOCATION: Thatta	
BANK NAME: MCB			
BANK A/C # 1009901941004072			
EARNINGS	AMOUNT IN PKR	EXPENSES	AMOUNT IN PKR
Base Salary	59,091		
Medical Allowance	5,909		
		TOTAL EXPENSES/ ARREARS	
		DEDUCTIONS	AMOUNT IN PKR
		Income Tax Paid By Employee	227
		Others Deductions	
		EOBI Employee Contribution	250
		Withheld Amount (5 Days)	
Gross Salary	65,000	TOTAL DEDUCTIONS	475

NET PAY 64,523

Regards;
Payroll Department,

Below is your salary slip for the month of April 2023.



CHIP TRAINING & CONSULTING (PVT) LTD

MONTH: APRIL, 2023

EMPLOYEE NAME: Isaac M Paul Mr		DESIGNATION: UCPO	
CNIC: 4140969691251		LOCATION: THATTA	
BANK NAME: MCB		Mode of Payment: Bank Transfer	
BANK A/C #: 1009901941004072		Project: PTPP	
EARNINGS	AMOUNT IN PKR	EXPENSES	AMOUNT IN PKR
Basic Salary	50,400	DSA/POL	
Medical Allowance	5,040	Internet & Phone	-
Stationery & Misc. Allowance	0	Accident Health Insurance	-
Vehicle/Fuel Allowance	0	DSC Allowance	-
Salary Arrears	0	Ice Allowance	-
Additional Allowance	0	Other Arrears	-
		TOTAL EXPENSES	
		DEDUCTIONS	AMOUNT IN PKR
		Income Tax Paid By Employee	10
		Others Deductions	-
		EOBI Employee Contribution	250
Gross Salary	55,440	TOTAL DEDUCTIONS	260

NET PAY : 55,180/-

Note: This is computer generated pay-slip and does not required any signature or stamp

Regards;

Payroll Department,

Below is your salary slip for the month of March 2023.



CHIP TRAINING & CONSULTING (PVT) LTD

MONTH: MARCH, 2023

EMPLOYEE NAME: Isaac M Paul Mr		DESIGNATION: UCPO	
CNIC: 4140989691251		LOCATION: THATTA	
BANK NAME: MCB		Mode of Payment: Bank Transfer	
BANK A/C #: 1009901941004072		Project: FTTP	
EARNINGS	AMOUNT IN PKR	EXPENSES	AMOUNT IN PKR
Basic Salary	50,400	DSA/POL	
Medical Allowance	5,040	Internet & Phone	-
Stationery & Misc. Allowance	0	Accident Health Insurance	-
Vehicle/Fuel Allowance	0	DSC Allowance	-
Salary Arrears	0	Ice Allowance	-
Additional Allowance	0	Other Arrears	-
		TOTAL EXPENSES	
		DEDUCTIONS	AMOUNT IN PKR
		Income Tax Paid By Employee	10
		Others Deductions	-
		EOBI Employee Contribution	250
Gross Salary	55,440	TOTAL DEDUCTIONS	260

NET PAY : 55,180/-

Note: This is computer generated pay-slip and does not required any signature or stamp

Regards;

Payroll Department,

Employee Name: Isaac M Paul Mf
 Salary is your salary slip for the month of January 2023



CHIP TRAINING & CONSULTING (PVT) LTD
 MONTH: JANUARY, 2023

EMPLOYEE NAME	Isaac M Paul Mf	DESIGNATION	LCPO
CNIC #	4140999691251	LOCATION	THAITTA
BANK NAME	MCB	Mode of Payment	Bank Transfer
BANK A/C #	1109901941004072	Project	PTPP
EARNINGS	AMOUNT IN PKR	EXPENSES	AMOUNT IN PKR
Basic Salary	50,400	DSA/POL	-
Medical Allowance	5,000	Interest & Pkese	-
Stationery & Misc. Allowance	0	Accident Health Insurance	-
Vehicle/Fuel Allowance	0	DSC Allowance	-
Salary Arrears	0	Ice Allowance	-
Additional Allowance	0	Other Arrears	-
TOTAL EXPENSES		AMOUNT IN PKR	
DEDUCTIONS		AMOUNT IN PKR	
		Income Tax Paid By Employee	10
		Others Deductions	-
		ECBL Employee Contribution	250
Gross Salary	55,440	TOTAL DEDUCTIONS	260

NET PAY: 55,180/-

Note: This is computer generated pay-slip and does not require any signature or stamp
 Regards,
 Payroll Department,





AML-CFT REGULATIONS AND TYPOLOGIES

Typologies work is the study of methods, techniques and trends of money laundering and terrorist financing. The research of the following typologies has been undertaken for better understanding the money laundering and terrorist financing environment in the Asia/Pacific region.

The following are a few key money laundering and terrorist financing methods, techniques, schemes and instruments:-

Typologies	HIGH		Medium High		Medium	
	Yes	No	Yes	No	Yes	No
Narcotics and Trafficking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Corruption and Bribery	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Smuggling in relation to Custom and Excise Duty and taxes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tax Crime related to direct and indirect taxes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Illegal MMTS/Hawala/Hand Cash Smuggling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Terrorism and Terrorism Financing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Geography (Porous Borders Afghanistan & Iran)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Delivery Channels (branchless banking, Wires Transfers, Microfinance Bank)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Participation in an organized criminal group and racketeering	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Human Trafficking / Migrant Smuggling or Trafficking in Person and Smuggling of Migrants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Illicit Arm Trafficking	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fraud/Forgery / Cheating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kidnapping for ransom	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Robbery / theft	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Extortion for Business	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cyber crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Insider Trading and market Manipulation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Delivery Channels (Non-Banking Financial Companies & Moderabs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Counterfeiting Currency	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Counterfeiting and Piracy of Products	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Murder, Grievous Bodily Harm	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Piracy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If answered "YES" to Question no. 06 and accordingly selected any of the options above then please share the below details:-

Dealing Court/ Agency: N/A Nature: N/A Title: N/A

Year: 2023 NA City: N/A

Few Details about the case:-

Use separate sheet where ever needed

CORPORATE AML QUESTIONNAIRE

PAK-QATAR
FAMILY TAKAFUL
Together for the Future



Participant Name :

1. Is your company/establishment/entity aware about and subsequently compliant as per the Anti-Money laundering/CFT laws prevalent in Islamic republic of Pakistan? If No, then why?

yes

2. Is your company exposed to any risk determined as per the AML/CFT Laws? If yes, then please share the details.

No

3. Does your company have any AML/CFT related Policy in the field? Yes No

4. Is any of your Director or Member of the Senior Management a Politically Exposed Person (PEP)? If yes, then please share the details of the respective individual(s).

For this question PEP means individuals who are or have been entrusted domestically with prominent public functions, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials.

NO

5. Is any of your Director or Member of the Senior Management a Foreign National? If yes, then please also inform us that if any of your foreigner Director or Senior Management is Foreign Politically Exposed Person? If yes, then please share the details of the respective individual(s).

foreign PEPs, individuals who are or have been entrusted with prominent public functions by a foreign country, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party official

*AND
Persons who are or have been entrusted with a prominent function by an international organization, senior members of senior management and members of the board or equivalent functions*

NO

6. Has your company/institution/entity been the subject of any money laundering or terrorist financing-related proceedings (please see overleaf) investigations, sanctions, punitive actions indictment, had fines, conviction or civil enforcement action imposed on your company/institution/entity or directors or member of your senior management by a regulator or law enforcement body during the last five years? Yes No

7. Does your company/institution/entity receives any kind of funding/donations/charities received from any sources which are under investigation locally or from any sources which are based in foreign? If yes, then please share the details.

N/A

8. Has your company/institution/entity, to your knowledge, been the subject to any investigation, indictment penalty, fine, conviction or civil enforcement action related to terrorism financing in the past five years? Yes No

9. Is your company/institution/entity engaged in any sort of business activities with the countries being marked as AML non-compliant by the FATF or UN? If so, then please share the details.

N/A

I/We hereby declare that all the information provided above are correct and true, and if any changes are made in aforementioned queries during the term of the contract, then the same may be intimated to PQFTL forthwith.

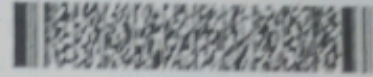
Signature & Stamp

Date

15/8/23

Use separate sheet where ever needed

Page 1 of 2



اندراج وفات سرٹیفکیٹ

Death Registration Certificate

Tracking Id: 91100025458155

CRMS No. D91485332

OLD/M REG #:

THATTA MC_200151 : دفتر اندراج

Old CRMS No.:

Deceased Person's Details متوفی کے حوالہ

Name : Isaac M Paul	نام : آیزک ایم پل
Nationality : Pakistani	قومیت : پاکستانی
CNIC No : 41409-8969125-1	شناختی نمبر : 41409-8969125-1
Date of Birth : 22-Nov-1993	تاریخ پیدائش : 22-Nov-1993
Gender : Male Religion : Christianity	جنس : مرد مذہب : مسیحی
Sickness Period : 01 Days 00 Months 00 Years	مدت علالت : 01 دن 00 ماہ 00 سال
Date of Death : 01-Jul-2023	تاریخ وفات : 01-Jul-2023
Date of Burial/Last rite : 02-Jul-2023	تاریخ تدفین/آخری رسومات : 02-Jul-2023
Place of Death : Hospital	جائے وفات : ہسپتال
Reason of Death : Natural Nature of Death : Normal	وجہ وفات : عام کیفیت وفات : عادی
Buried/Last rite at : Christian Colony Thatta	جگہ تدفین/آخری رسومات : گرسچن کالونی ٹھٹھہ

Parental Information والدین کے حوالے

Father's Name : John	والد کا نام : جان
CNIC No : 41409-0384528-9	شناختی نمبر : 41409-0384528-9
Mother's Name : Sirafeen	والدہ کا نام : سرافین
CNIC No : 41409-5148021-8	شناختی نمبر : 41409-5148021-8

Address

Address : Sadar Nagar Christian Colony Ward # Thatta	پتہ : سردار نگر گرسچن کالونی وارڈ # 1 ٹھٹھہ
Textile :	تحصیل : ٹھٹھہ
District :	ضلع : ٹھٹھہ

Applicant's Details درخواست دہندہ کے حوالے

Name : John	نام : جان
CNIC No : 41409-0384528-9	شناختی نمبر : 41409-0384528-9
Relation with Deceased : Father	متوفی سے رشتہ : والد

Information of Burial/Last rite by تدفین/آخری رسومات کنندہ کے حوالے

Name : Babar Simon	نام : بابر سیمین
CNIC No : 41409-6610579-9	شناختی نمبر : 41409-6610579-9
Relation with Deceased : Other	متوفی سے رشتہ : دیگر

Entry Date : 18-Jul-2023 تاریخ اندراج : 18-Jul-2023

Issue Date : 18-Jul-2023 تاریخ اجراء : 18-Jul-2023

Entry Status : Normal اندراج اسٹیٹس : نارمل

Additional Information : اضافی معلومات :

دستخط

COUACH OFFICER
Municipal Committee
Thatta

