



RfShare

دستخط حامل کارڈ

حکومت پاکستان

قومی شناختی کارڈ

42101-5243759-4

نام : افضال حسین

پہیلیں : عورت

تعمیر کا نام : حفیظہ انہ

شناختی علاقہ: کوئی نہیں

تاریخ پیدائش: 01/01/1980

عثمان یوسف حسین

دستخط رجسٹرار جنرل



JSOF60 خاندان نمبر:

42101-5243759-4 شناختی نمبر:

سوجود پتہ: مکان نمبر 41/6 محلہ چنال آباد ٹائم آباد، کراچی وسطی

سہیل پتہ: مکان نمبر 492 محلہ محمد پورہ، اوکاڑہ

06/10/2030 تاریخ منتهی:

06/10/2020 تاریخ اجراء:

تاریخ اجراء: 06/10/2020 تکسٹ کارڈ کے پر قومی لیٹر بکس میں ڈال دیں





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

1. Policy holder's Information

Name of Company	C-TE	Policy Start Date	30-Nov-2023
Takaful Policy No			

2. Participant's Information

a. Deceased Name:	Afshin Jabbar		
b. Father's Name/Husband's Name:	Hafeez Ullah		
c. Date of Birth of deceased:	01-01-1980	Age	43
		CNIC No	44101-5843759-4
d. Residential Address:	H-no: 41/G Jalalabad Majnahad no:1 Karachi		
		Contact No	0316-1144847
e. Proof of age:	<input checked="" type="checkbox"/> National Identity Card	<input checked="" type="checkbox"/> Maric Certificate	<input type="checkbox"/> Other (Please specify)

3. Occupational Information

a. Employee No	1033090004853	b. Date of joining of Company	01-04-2023
c. Designation	CHW	d. Monthly Salary	31,680
e. Occupation (at date of Death)	27-10-2023		

4. Event Information

a. Date of Diagnosis	31-10-23	c. Place of Death	Ahmad Shauq Hospital
b. Date of Death	27-10-23	e. Secondary cause	Heart attack
d. Primary Cause of Death	Heart	f. On what date did deceased last attend his usual work?	19-10-23
e. When did deceased first complain of or give other indications of his/her last illness?			

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: Abbu Bakran 

Name: Abbu Bakran

Date: 13-11-2023



- 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
 - ANL 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



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's Name: Arshad Jabbar

b. Father's Name/Husband's Name: Hafeez Ullah

c. Date of Birth of deceased: 01-01-1980 Age: 43 CNIC No. 42101-5243759-4

d. Residential Address: Hinor 4/16 Jalandhar Majra Bahad no: 1 Karachi Contact No. _____

2. Event Information

a. Date of Death 27-10-23

b. Place of Death Abbasi Shaheed Hospital Abbasi Hospital

If died in hospital or other medical institution, please give name

c. Primary Cause of Death Heart Attack

d. Secondary Cause of Death _____

e. Interval between onset and death _____

From	To	No of Days
<u>21-10-23</u>	<u>27-10-23</u>	<u>7 Days</u>

3. Past Medical History

a. When did deceased first complain of or give other indications of his/her last illness? 21-10-23

b. Date last consulted or took medical advice of his/her last illness? 27-10-23 Yes No

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
<u>2-9-22</u>	<u>Dusmund Clinic</u>	<u>Hearty Pain</u>	<u>Yes</u>

4. Accidental Death/Suicide, Homicide

a. Cause of death, please specify Accident Suicide Homicide Other Illness

b. Please describe event in detail _____

c. Was an inquest/investigation held? Yes No

d. Was an autopsy performed? Yes No If yes, please describe findings in detail _____

If yes, please describe findings _____

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: Arshad Jabbar Contact No. 0913-2549872 Stamp: _____

PAK-QATAR FAMILY TAKAFUL LIMITED

102-105, Business Arcade, Block-6, PECHS, Shahr-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



حکومت سندھ
Government of Sindh

اندراج وفات سرٹیفکیٹ

Death Registration Certificate

دفتر اندراج : UC25 MADINA COLONY 300370

018 CRMS No :

Tracking Id: 91100012028186

CRMS No: 0794272191

COLONY CODE: U-1

مطابق سے نمونہ

Deceased Person's Details

Name: Afshan Jabbeem
Nationality: Pakistani
CNIC No: 42101-5243759-4
Date of Birth: 01-Jan-1980
Gender: Female
Religion: Islam
Sickness Period: 0 Days 0 Months 0 Years
Date of Death: 26-Oct-2023
Date of Burial/Last rite: 26-Oct-2023
Place of Death: Home
Reason of Death: Natural
Nature of Death: Normal
Buried/Last rite at: Papos Nagar Nazimabad

نام : Afshan Jabbeem
قومیت : پاکستانی
شناختی کارڈ : 42101-5243759-4
تاریخ پیدائش : 01-Jan-1980
جنس : عورت
مدت علالت : 0 دن 0 ماہ 0 سال
تاریخ وفات : 26-Oct-2023
تاریخ تدفین/آخری رسومات : 26-Oct-2023
جسے وفات : گھر
وجہ وفات : قدرتی
کیٹ وراث : عام
جگہ تدفین/آخری رسومات : پاپوش نگر ناظم آباد

والدین کے کوائف

Father's Name: Naqi
CNIC No:
Mother's Name: Hajira
CNIC No:
نام والد کا نام : Naqi
شناختی کارڈ :
والدہ کا نام : Hajira
شناختی کارڈ :

Husband's Information

Name: Hafeez Ullah
CNIC No: 42101-2364749-3

شوہر کے کوائف

نام : Hafeez Ullah
شناختی کارڈ : 42101-2364749-3

Address

Address: House No. 41/6, Muzallih Jalal Abad Nazimabad, City Karachi Central
Tehsil: Karachi Central
District: Karachi Central

پتہ

پتہ : مکان نمبر 41/6 ، محلہ جلال آباد ناظم آباد ، شہر کراچی وسطی
تحصیل : کراچی وسطی
ضلع : کراچی وسطی

ارٹھوٹس بلڈہ کے کوائف

Name: Hafeez Ullah Bhatti
CNIC No: 42101-2364749-3
Relation with Deceased: Husband

Applicant's Details

نام : Hafeez Ullah Bhatti
شناختی کارڈ : 42101-2364749-3
متوفی سے رشتہ : خاوند

Entry Date: 02-Nov-2023

تاریخ اندراج : 02-Nov-2023

Issue Date: 02-Nov-2023

تاریخ اجراء : 02-Nov-2023

Entry Status: Normal

اندراج اسٹیٹس : نارمل

اضافی معلومات :

اضافی معلومات :



Additional Information:
Union Council, Madina Colony, District Karachi

یونین کمیٹی 25 مدینہ کالونی

کراچی غربی

پاپوش نگر قریب

نمبر 730 2023ء

تاریخ	نمبر	نام بچہ ولدیت شوہر کا نام	عمر	جنس	مقام انتقال	گھر کا پتہ	وجہ موت	تاریخ وفات بعد اوقات	اطلاع کنندہ	مذہب	دستخط
26/10/2023	1	محمد حیات اکرام اللہ	90	مرد	گھر	سٹار 187/5 اورش آباد ناظم آباد	کبھی	26/10/2023 10:00 AM	نور احمد	السن	محمد حیات
26/10/2023	2	سجاد علی	44	مرد	11	4A 1109	زخم	26/10/2023 12-30	جعالی	السن	سجاد علی
7/10/2023	3	ظہیرہ اشرف محمد اشرف	83	مرد	گھر	سٹار 1138 اورش آباد ناظم آباد	کبھی	27/10/2023 9:30 AM	بیٹا	السن	ظہیرہ اشرف
14/10/2023	4	مشاق مشاق ولد مشاق	28	مرد	گھر	سٹار 4A7/4 ناظم آباد کربھی	کبھی	26/10/2023 9:30 PM	جانی	السن	مشاق
16/10/2023	5	افشار محمد افشار	30	مرد	ہسپتال	سٹار 41/6 ناظم آباد کربھی	بیمار	27/10/2023 11:00 PM	شوہر	السن	محمد افشار
05/10/2023	6	میرزا یوسف ولد یوسف		مرد	ہسپتال	5481 ناظم آباد کربھی	بیمار	4:20 PM 27/10/2023	الہ صابم	السن	میرزا یوسف
20/10/2023	7	شہناز جمیل جہاں محمد	55	مرد	ہسپتال	سٹار 177/3 ناظم آباد	بیمار	6:00 PM 20/10/2023	جانی	السن	شہناز جمیل
21/10/2023	8	سہیل اشرف	83	مرد	گھر	آب سرد گھر	بیمار	7:30 AM 21/10/2023	بیٹا	السن	سہیل اشرف

(2)



Name : Afshan Jabeen

Position : CHW-Central Karachi-Mazimabad-01-49

Afshan Jabeen
Issuing Authority:
(Project Manager)

EMP ID: 10000000000000000000

CNIC #: 4 2 1 0 1 5 3 0 3 7 0 0 0

Date of Birth: 01-01-1980

Emergency please call no: 0246-1313034 Issue Date: Apr 2003

- This card is non-transferable and should never be loaned to anyone.
- In case the card is lost or stolen, it should be reported immediately to concerned person.
- This card is valid till 31-Dec-2003 from the date of issuance. The card will deem to be invalid if the contract is not extended or terminated.
- In case if card found, please drop it in nearest Post Office or CHW House plot #01, street # 03, Feyyaz market, G-072, Islamabad



حکومت پاکستان

قومی شناختی کارڈ

42101-5356135-9



نام : ابو بکر

جنس : مرد

والد کا نام : حفیظ اللہ

شناختی علامت : کوئی نہیں

محمد طارق ملک تاریخ پیدائش : 09/11/2003

دستخط حامل کارڈ

دستخط رجسٹرار جنرل



شناختی نمبر : 42101-5356135-9 خاندان نمبر : JS0F60

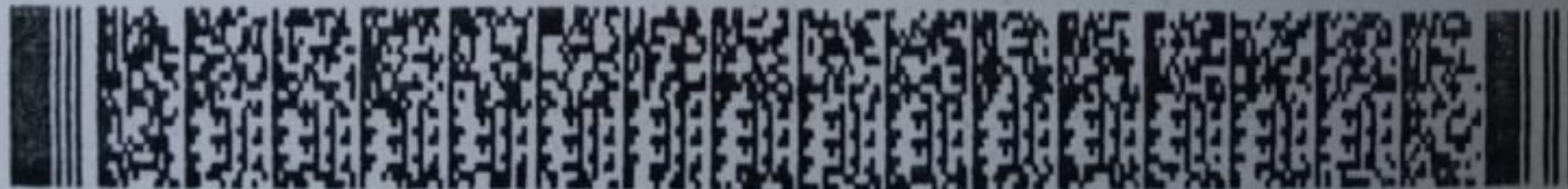
موجودہ پتہ : مکان نمبر 693، محلہ نیو کراچی، سیکٹر 4، کراچی وسطی



مستقل پتہ : مکان نمبر 492، سٹریٹ نمبر 2، محلہ صمد پورہ، اوکاڑہ

تاریخ اجراء : 20/03/2022 تاریخ ترمیم : 20/03/2032

گمشدہ کارڈ ملنے پر قریبی لیٹر بکس میں ڈال دیں





ABBASI SHAHEED HOSPITAL, NAZIMABAD, KMC
MEDICAL CERTIFICATE OF CAUSE OF DEATH



Hospital Abbasi Shaheed Hospital S# 33855

Name of patient and father's Name Afsham W/O Hafiz Admission No. 202310200446

Age 38 Sex Male Female Martial Status Married M.R. No. 20231024858

Date of death 27.10.2023 Occupation Housewife Date of admission 20.10.2023

Time of death 1:00 pm

Address Province SINDH Town or Village _____

Disease or condition I
 directly leading to death. (a) Hypoxic Brain
due to (or as a consequence
of) Cerebrovascular
Abscess

Antecedent causes Morbid sup. Mesbr Reprin
 conditions if any giving rise due to (or as a consequence
 to the above cause starting of
 the underlying condition PC: IHD, IHD, EF 25%
(Atrial Septal Defect)
infarct brain IHD
on EF & Sternum
Prison to Surgery
 last.

Other significant conditions II
 contributing to the death but None

blis
 NIC 542101-2364749-3

Abbasi Shaheed Hospital
ABBASI SHAHEED HOSPITAL,
K.M.C.