

## [CTC - HRO - PTPP - Recruitment & Selection - 7.8.5-c-061] [Insurance Nomination form- June 2024]

	Form of N	Jomination for	Death Insurance for CTC	
	I_ Reham	2 Tobasum	5/d/W/o Auxange	Employees
	CNIC # 1730/1/124	0.000	s/d/w/o_Ausange	7eb bearing
	CNIC # 1730/1431 nominate the person/ pe	702X	_working as _ chu	4
	beneficiary(ies) to receive the	ersons mentioned	d below who is/ are m	hereby hereby family as
	beneficiary(ies) to receive the	ie death insurance	e amount (sum assured) in	the event of my death
		(1)	First choice)	or my death.
	Name of Nominee/	41 1 31		
	Nominees	Relationship	Specification of Share	Contact Number
×	M. Hassan	Dr. 89.	0.	
	Auxange Zeb	N -	80-4	03149147544
İ		/cgr	80%	03149147544
L	Shand Zeab	20		
	7200	3,	100 1	03149147544
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1				
_		In case of death o	f first choice) - 2nd Option	
<u></u>	Name of Nominee/		f first choice) – 2 <sup>nd</sup> Option	
	Name of Nominee/ Nominees	In case of death o	f first choice) – 2 <sup>nd</sup> Option  Specification of Share	Contact Number
	Name of Nominee/			Contact Number
	Name of Nominee/			Contact Number
	Name of Nominee/			Contact Number
	Name of Nominee/ Nominees	Relationship	Specification of Share	
	Name of Nominee/ Nominees	Relationship	Specification of Share	
III me	Name of Nominee/ Nominees  hereby certified that the above e.	Relationship	Specification of Share  s) of my family mentioned as	re wholly dependent upon
III me	Name of Nominee/ Nominees  hereby certified that the above e.	Relationship	Specification of Share  s) of my family mentioned as	re wholly dependent upon
III me	Name of Nominee/ Nominees	Relationship	Specification of Share  s) of my family mentioned as	re wholly dependent upon
III me	Name of Nominee/ Nominees  hereby certified that the above e.	Relationship	Specification of Share  s) of my family mentioned as	re wholly dependent upon
III me	Name of Nominee/ Nominees  hereby certified that the above e.  he earlier nomination made by	Relationship	Specification of Share  s) of my family mentioned as kindly be treated as cance.	re wholly dependent upon lled and of no effect
III me	Name of Nominee/ Nominees  hereby certified that the above e.	Relationship	Specification of Share  s) of my family mentioned as kindly be treated as cance.  SIGNATURE OR THE	re wholly dependent upon  lled and of no effect  JMB IMPRESSION OF
III me	Name of Nominee/ Nominees  hereby certified that the above e.  he earlier nomination made by	Relationship	Specification of Share  s) of my family mentioned as kindly be treated as cance.	re wholly dependent upon  lled and of no effect  JMB IMPRESSION OF
III me	Name of Nominee/ Nominees  hereby certified that the above e.  he earlier nomination made by	Relationship	Specification of Share  s) of my family mentioned as kindly be treated as cance.  SIGNATURE OR THE	re wholly dependent upon  lled and of no effect  JMB IMPRESSION OF