

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

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| | | s | • |
| Form of N | Omination for D | | |
| Form of Nomination for Death Insurance for CTC Employees | | | |
| I FARHAD KHAN s/d/y/d SYEDLAL bearing | | | |
| | S/ | alm/8 - SYEDLA | L |
| | | | |
| CNIC # 21202 - 8125857 - 3 working as CHW hereb beneficiary(ies) to receive the death insurance amount (sum assured) in the current of | | | |
| beneficiary(ies) to receive it | inentioned | below who is/ are | member(s) of my () |
| beneficiary (ies) to receive the death insurance amount (sum assured) in the event of my death. | | | |
| m the event or my death. | | | |
| | (F | irst choice) | |
| Name of Nominee/ | [4 : 251] | | |
| Nominees | Relationship | Specification of Share | Collins |
| 1.011mlees | | L OI OI OI I | Contact Number |
| 1 | | | |
| MUSHTAG UIJAH | Bostupo | F-0 1 | |
| | CROTHER | 50 % | 03149127060 |
| 1 | | | 0319 1127000 |
| MUHAMMAD LAL | BROTHER | 50% | -2 |
| | | 50 /0 | 03005990022 |
| | | | |
| | (In case of day) | C C. | |
| (In case of death of first choice) – 2nd Option | | | |
| Name of Nominee/ | | | |
| Nominees | Relationship | Specification of Share | Contact Number |
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| | S S | | |
| MUSHTAR VIIAH | Barrel | 100% | |
|) OIIAA | PROTHER ! | 00 70 | 03149127060 |
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| I havabas as side as a | | | |
| Thereby certified that the above | ve noted member(s | s) of my famile | |
| me. | | of my fairnly mentioned | d are wholly dependent upon |
| I hereby certified that the above noted member(s) of my family mentioned are wholly dependent upon | | | |
| The earlier nomination made | by me (if any) may | · 1.1. 17 1 | 4 |
| The earlier nomination made by me (if any) may kindly be treated as cancelled and of no effect | | | |
| | | | |
| | | | - |
| | | CICNIA MITTIN | |
| DATED: | | SIGNATURE OR THUMB IMPRESSION OF | |
| | | THE EMPLOYEE | |