

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

TRANING & CONSULTING	[CTC – HRO – PTPP – Recruitment & Selection – 7.8.5-c-061] [Insurance Nomination form– June 2024]	
Form of N	Omination for Dooth I	
I Abid uttal	omination for Death Insurance for CTC Employees	
2 DIOI OILAM	s/d/w/o Ajmal khan	bearing
CNIC # 21202-98691	80-6	
P CIDOIL/	ISUIIS: INDITIONAL Later 1	nereby
a arrester to (ies) to lecelve th	e death insurance amount (sum assured) in the event of my d	eath.
	(First choice)	
Name of Nominee/	Relationship Specification of Share Control	
Nominees	Relationship Specification of Share Contact N	umber
Sajidullah	Brother 100%	1.00
Mashakhela	Nothex 100% 0344259	
1	11 OTNEX 100/6 0308813	8486
(In case of death of first choice) – 2nd Option		
Name of Nominee/ Nominees	Relationship Specification of Share Contact Nu	mber
Abdur-Rehman	Brother 100% 034193670	361
**		
I hereby certified that the abo	ve noted member(s) of my family mentioned are wholly depen	1
The earlier nomination made	by me (if any) may kindly be treated as cancelled and of no e	
	killing be treated as cancelled and of no e	ffect
•	Application of the state of the	***
DATED:	SIGNATURE OR THUMB IMPRESSION	ON OF
E 0 20211	THE EMPLOYEE	-1, 01
5-9-2024	AMbida	
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