

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

| PANNOS Consuling | [CTC – HRO – I [Insu | TPP – Recruitment & Sele ance Nomination form– Ju | ction – 7.8.5-c-061] ne 2024] | |
|---|-------------------------|--|----------------------------------|----------------|
| | | | | |
| Form of Nomination for Death Insurance for CTC Employees | | | | |
| I Tika khan s/d/w/o Zaman Khan bearing | | | | |
| CNIC # 2/203 4290 | | | | |
| CNIC # 2/203_42902027 working as CH W hereby | | | | |
| nominate the person/ persons mentioned below who is/ are member(s) of my family as beneficiary(ies) to receive the death insurance amount (sum assured) in the event of my death. | | | | |
| | | (sala abbarea) | in the event of my | death. |
| Name of N. | (Fi | rst choice) | | |
| Name of Nominee/ | Relationship | Specification of Shar | re Contact | Number |
| Wali Ullah | Brother | 100 % | 0333.560 | (C), (2) |
| | | | 0333360 | 3487 |
| | | | | |
| Name of N | n case of death of | first choice) – 2 nd Optic | on | |
| Name of Nominee/ | Relationship | Specification of Share | Contact No | 7 |
| | | | - Contract IN | ımber |
| Abidullah | Je Phew | 100 % | | |
| | | | 0331-6620 | 320. |
| I hereby certified that the above me. | noted momban(s) | | | |
| me. | intentiber(s) | of my family mentione | ed are wholly deper | ndent upon |
| The earlier nomination made by | | | | |
| The earlier nomination made by me (if any) may kindly be treated as cancelled and of no effect | | | | |
| • · · · · · · · · · · · · · · · · · · · | | | | |
| D A CEPP | | CICATA | | A ¹ |
| DATED: | | SIGNATURE OR THE | THUMB IMPRESSI | ON OF |
| 15-09-2024 | | | EMPLOYEE | |
| | | Ickil | e Khem | |