

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

TRAINING & CONSULTING	[CTC – HRO –	PTPP – Recruitment & Selecti urance Nomination form– June	on – 7.8.5-c-061] 2024]	
Form of N			ŧ	
I Polh I	omination for D	eath Insurance for CT(	Employees	
Remmet u	den s	/d/w/o Tx010	71-1-	bearing
CNIC # 21203-76 nominate the person/ pe	71075-5	_ working as C.f-	1W	hovel
nominate the person/ perbeneficiary(ies) to receive the	rsons mentioned e death insurance	below who is/ are n	nember(s) of m	hereby y family as
		( appared) III	the event of my	death.
Name of Nominee/	11 2 27 1	irst choice)		
Nominees	Relationship	Specification of Share	Contact	Number
Khuliter Rehman	0			
1	Diother	100%	0333-99	87882
Irag Shah	Futher	100%	~ .	
(In case of death of first choice) - 2 <sup>nd</sup> Option				
Name of Nominee/	Relationship			
Nominees		Specification of Share	Contact No	ımber
Skeem Shah	0			
	Brother	100%	0332-9041	905
I hereby certified that the above	e noted member/	1) 05		
I hereby certified that the above me.	a meniber (s	s) of my family mentioned	are wholly deper	ndent upon
The earlier nomination made	by me (if any) may	V kindle L		
	, , , , , , , , , , , , , , , , , , ,	xuldiy be treated as cano	elled and of no $\epsilon$	effect
*	Part of the second seco	•		y one
DATED:		SIGNATURE OR TH	IUMB IMPRESSI	ON OF
15-9-2024		THE EMPLOYEE		
·		- 1	Den	
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