

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

TRAINING & CONSULTING	[CTC-HRO-	PTPP – Recruitment & Selection urance Nomination form– June 2	n – 7.8.5-c-061] 024]	
Form of	Nomination for L	Death Insurance for CTC	JT 1	
100	16 196	1 -		
CNIC # 2/203-52	789//7	/d/w/o ABDUI- QA working as A1ea Su below who is/ are	Vi	bearing
nominate the person/	1001	working as Hiea Su	Porlison	hereby
beneficiary(ies) to receive	the death insurance	below who is/ are me amount (sum assured) in the	ember(s) of my	family as
		in cary in t	he event of my d	leath.
	(F	irst choice)		
Name of Nominee/	Relationship	Specification of Share	Carl	
			Contact N	umber
Abdul QAVI	Faller	Cod		
Abdul CAVI RUhu (Lah		50%	0335939	3045
4 com a rear	Brother	50%	11/11	
	(In case of death o	f first choice) – 2 nd Option		
Name of Nominee/ Nominees	Relationship			,
ronunees		Specification of Share	Contact Nur	nber
D	300		•	
Ruhullah	Brother	10%		
			Nill-	
I hereby certified that the abo	Overnoted mon-L			
I hereby certified that the abo	soled member(s) of my family mentioned ar	e wholly depend	entunon
The earlier nomination made				apon
The earlier nomination made	me (if any) may	kindly be treated as cancel	led and of no eff	0.04
*	7 Transport			CCL
DATED:		SICNIA		
		SIGNATURE OR THU	MB IMPRESSIO	N OF
15-9-2024		THE EMI	LOYEE	
1		cuas		
•			•	
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