

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

TPAINIGO TPAINIGO CONSULTING	[CTC - HRO -	PTPP – Recruitment & S rance Nomination form–	Selection – 7.8.5-c-06 June 2024]	1]
Form of N	omination for D	eath Insurance for	CTC Employee	S
Abdul Kehmar	2 s/	d/w/o Mac	0 111	
CIVIC# _0005. 11			1.4	
nominate the person/ pe beneficiary(ies) to receive th	rsons mentioned	below who is/ a	re member(i)	hereby
beneficiary(ies) to receive th	e death insurance	amount (sum assure	d) in the event of	my family as
	11 130	irst choice)		
Name of Nominee/	Relationship	Specification of S	hare Cont	act Number
		100 Hard 100		
Masal Khan	Father	100%	241.3	232873
1 11			00 11.2	-6320/3
,	(In case of death o	f first choice) – 2 nd O _l	otion	
Name of Nominee/ Nominees	Relationship	Specification of Sha	ire Contac	t Number
	A passed of the second of the	The state of the s	Coma	rindiliber
Habib was a.	Control of the contro			
Habib-ur-Rehman	brother	100%	0345-8	154673
		11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -		
I hereby certified that the above me.	re noted member (s	s) of my family menti	oned are wholly d	lependent upon
	11 - 111			
The earlier nomination made	by me (if any) may	y kindly be treated as	s cancelled and of	no effect
•				. "
DATED:		SIGNATURE	OR THUMB IMPR	ECCIONA
alla Ola in		TI	HE EMPLOYEE	ESSION OF
04/04/2024	in the second se		Reh	* **
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