

LIFE CERTIFICATE

TO WHO IT MAY CONCERN

Stock Reg. No. _____

That is to certify that _____ S/O of _____

Holder of P.P.O No. _____ CNIC No. _____,

Whose specimen signature / thumb impression and address are appended below alive to date

_____ address _____

Pensioner Signature thumb impression _____.

Signature of Attesting Officer

Phone No., _____

Name _____

Signature of Attesting Officer

Phone No., _____