## Indemnity Bond/Lien submitted by the Beneficiary INDEMNITY BOND

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The Manager, National Bank of Pakistan,	
Mational Bank of Pakistan, (Branch N	Name)
(Branch (	
(City)	souc)
National Bank of Pakistan I agree to inden with all sums of money whatsoever includir undertake that my legal heirs, successors, of	instructions for payment of benevolent grant through anify you and keep you indemnified about liabilities ag mark-up of my benevolent grant Account. I further executors shall be liable to refund excess amount, if ant in full to such excess amount for onward credit to
Co-Indemnifier/Nominee/Successor/	Signature:
Next of Kin:	Name of Beneficiary:
(Name and father name)	
CNIC:	CNIC:
Relation with beneficiary:	Case No:
Address:	Rate of monthly benevolent grant:
Signature:	_ Date of commencement of benevolent grant:
	Bank Account No:
Witness-1	Witness-2
Name and father name:	Name and father name:
CNIC:	CNIC:
Address:	Address:
Signature:	Signature:

Date:\_\_\_\_\_