

**MODE OF CONTRIBUTIONS WHILE ON DEPUTATION/SECONDMENT ETC.  
AND ON REPATRIATION  
MEDICAL WELFARE SCHEME (OFFICERS)  
(RAISE IN FOUR COPIES AND COMPLETE IN BLOCK CAPITALS)**

**PERSONAL PARTICULARS AND MODE OF PAYMENT**

1. RANK	NAME	PAK NO.
BRANCH	UNIT	MEMBERSHIP NO.
*2. WHILE PROCEEDING ON DEPUTATION / SECONDMENT ETC. I AM PROCEEDING ON DEPUTATION / POSTING/COURSE ABROAD TO (COUNTRY) _____ / I HAVE BEEN SECONDED TO (DEPARTMENT) _____ W.E.F. (DATE/MONTH/YEAR) _____ FOR ABOUT DURATION) _____. MY MONTHLY CONTRIBUTIONS TOWARDS THE MWS (O) THROUGH MY SALARY SHOULD BE STOPPED FROM (MONTH/YEAR) _____. UNDER CLAUSE "FIVE OF THE TERMS AND CONDITIONS FOR MWS (O), I AM ENCLOSING BANK DRAFT NO. _____ DATED _____ FOR RS _____ IN FAVOUR OF "MEDICAL WELFARE SCHEME (OFFICERS) SHAHEEN FOUNDATION PAF" DRAWN ON BANK LIMITED, ISLAMABAD AS MY CONTRIBUTIONS AT THE RATE OF RS 100/- PM FOR (PERIOD) _____. I WILL CONTINUE TO REMIT MY CONTRIBUTIONS IN ADVANCE FOR THE REMAINING PERIOD, IF ANY, TILL MY REPATRIATION TO THE PAF.		
*3. <u>ON REPATRIATION TO THE PAF. I WILL BE/HAVE BEEN REPATRIATED TO THE PAF AFTER MY DEPUTATION / SECONDMENT ETC. WITH EFFECT FROM (DATE/MONTH/YEAR) _____ . I HAD DIRECTLY REMITTED MY ADVANCED CONTRIBUTIONS TOWARDS THE MWS (O) TILL (MONTH/YEAR) _____ . NOW MY MONTHLY CONTRIBUTIONS AT THE RATE OF RS 100/- PM MAY BE COLLECTED THROUGH MY SALARY, STARTING FROM THE FOLLOWING MONTH, UNDER CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS (O)</u>		
4. SIGNATURE	DATE	

**COUNTER SIGNATURE BY UNIT COMMANDER**

5. FORWARDED FOR NECESSARY ACTION. REMARKS OVERLEAF, IF ANY.		
6. NAME AND RANK	DATE	SIGNATURE WITH STAMP
UNIT		

**ACTION BY SHAHEEN FOUNDATION HEAD OFFICE**

7. THE BANK DRAFT MENTIONED AT PARA 2 ABOVE HAS BEEN RECEIVED AND ACTION HAS BEEN TAKEN TO STOP/START COLLECTION OF THE MEMBER'S CONTRIBUTIONS THROUGH HIS SALARY [REFER TO CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS(O)]. ADDITIONAL REMARKS OVERLEAF, IF ANY.		
8. NAME AND RANK	DATE	SIGNATURE WITH STAMP
DESIGNATION		

SHAHEEN FOUNDATION COPY

**MODE OF CONTRIBUTIONS WHILE ON DEPUTATION/SECONDMENT ETC.  
AND ON REPATRIATION  
MEDICAL WELFARE SCHEME (OFFICERS)  
(RAISE IN FOUR COPIES AND COMPLETE IN BLOCK CAPITALS)**

**PERSONAL PARTICULARS AND MODE OF PAYMENT**

1. RANK	NAME	PAK NO.
BRANCH	UNIT	MEMBERSHIP NO.
<p>*2. WHILE PROCEEDING ON DEPUTATION / SECONDMENT ETC. I AM PROCEEDING ON DEPUTATION / POSTING/COURSE ABROAD TO (COUNTRY) _____ / I HAVE BEEN SECONDED TO (DEPARTMENT) _____ W.E.F. (DATE/MONTH/YEAR) _____ FOR ABOUT DURATION) _____. MY MONTHLY CONTRIBUTIONS TOWARDS THE MWS (O) THROUGH MY SALARY SHOULD BE STOPPED FROM (MONTH/YEAR) _____. UNDER CLAUSE "FIVE OF THE TERMS AND CONDITIONS FOR MWS (O), I AM ENCLOSING BANK DRAFT NO. _____ DATED _____ FOR RS _____ IN FAVOUR OF "MEDICAL WELFARE SCHEME (OFFICERS) SHAHEEN FOUNDATION PAF" DRAWN ON BANK LIMITED, ISLAMABAD AS MY CONTRIBUTIONS AT THE RATE OF RS 100/- PM FOR (PERIOD) _____. I WILL CONTINUE TO REMIT MY CONTRIBUTIONS IN ADVANCE FOR THE REMAINING PERIOD, IF ANY, TILL MY REPATRIATION TO THE PAF.</p>		
<p>*3. <u>ON REPATRIATION TO THE PAF. I WILL BE/HAVE BEEN REPATRIATED TO THE PAF AFTER MY DEPUTATION / SECONDMENT ETC. WITH EFFECT FROM (DATE/MONTH/YEAR) _____ . I HAD DIRECTLY REMITTED MY ADVANCED CONTRIBUTIONS TOWARDS THE MWS (O) TILL (MONTH/YEAR) _____ . NOW MY MONTHLY CONTRIBUTIONS AT THE RATE OF RS 100/- PM MAY BE COLLECTED THROUGH MY SALARY, STARTING FROM THE FOLLOWING MONTH, UNDER CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS (O)</u></p>		
4. SIGNATURE	DATE	

**COUNTER SIGNATURE BY UNIT COMMANDER**

5. FORWARDED FOR NECESSARY ACTION. REMARKS OVERLEAF, IF ANY.		
6. NAME AND RANK	DATE	SIGNATURE WITH STAMP
UNIT		

**ACTION BY SHAHEEN FOUNDATION HEAD OFFICE**

7. THE BANK DRAFT MENTIONED AT PARA 2 ABOVE HAS BEEN RECEIVED AND ACTION HAS BEEN TAKEN TO STOP/START COLLECTION OF THE MEMBER'S CONTRIBUTIONS THROUGH HIS SALARY [REFER TO CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS(O)]. ADDITIONAL REMARKS OVERLEAF, IF ANY.		
8. NAME AND RANK	DATE	SIGNATURE WITH STAMP
DESIGNATION		

PAF CAO COPY

**MODE OF CONTRIBUTIONS WHILE ON DEPUTATION/SECONDMENT ETC.  
AND ON REPATRIATION  
MEDICAL WELFARE SCHEME (OFFICERS)  
(RAISE IN FOUR COPIES AND COMPLETE IN BLOCK CAPITALS)**

**PERSONAL PARTICULARS AND MODE OF PAYMENT**

1. RANK	NAME	PAK NO.
BRANCH	UNIT	MEMBERSHIP NO.
<p>*2. WHILE PROCEEDING ON DEPUTATION / SECONDMENT ETC. I AM PROCEEDING ON DEPUTATION / POSTING/COURSE ABROAD TO (COUNTRY) _____ / I HAVE BEEN SECONDED TO (DEPARTMENT) _____ W.E.F. (DATE/MONTH/YEAR) _____ FOR ABOUT DURATION) _____. MY MONTHLY CONTRIBUTIONS TOWARDS THE MWS (O) THROUGH MY SALARY SHOULD BE STOPPED FROM (MONTH/YEAR) _____. UNDER CLAUSE "FIVE OF THE TERMS AND CONDITIONS FOR MWS (O), I AM ENCLOSING BANK DRAFT NO. _____ DATED _____ FOR RS _____ IN FAVOUR OF "MEDICAL WELFARE SCHEME (OFFICERS) SHAHEEN FOUNDATION PAF" DRAWN ON BANK LIMITED, ISLAMABAD AS MY CONTRIBUTIONS AT THE RATE OF RS 100/- PM FOR (PERIOD) _____. I WILL CONTINUE TO REMIT MY CONTRIBUTIONS IN ADVANCE FOR THE REMAINING PERIOD, IF ANY, TILL MY REPATRIATION TO THE PAF.</p>		
<p>*3. <u>ON REPATRIATION TO THE PAF. I WILL BE/HAVE BEEN REPATRIATED TO THE PAF AFTER MY DEPUTATION / SECONDMENT ETC. WITH EFFECT FROM (DATE/MONTH/YEAR) _____ . I HAD DIRECTLY REMITTED MY ADVANCED CONTRIBUTIONS TOWARDS THE MWS (O) TILL (MONTH/YEAR) _____ . NOW MY MONTHLY CONTRIBUTIONS AT THE RATE OF RS 100/- PM MAY BE COLLECTED THROUGH MY SALARY, STARTING FROM THE FOLLOWING MONTH, UNDER CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS (O)</u></p>		
4. SIGNATURE	DATE	

**COUNTER SIGNATURE BY UNIT COMMANDER**

5. FORWARDED FOR NECESSARY ACTION. REMARKS OVERLEAF, IF ANY.		
6. NAME AND RANK	DATE	SIGNATURE WITH STAMP
UNIT		

**ACTION BY SHAHEEN FOUNDATION HEAD OFFICE**

7. THE BANK DRAFT MENTIONED AT PARA 2 ABOVE HAS BEEN RECEIVED AND ACTION HAS BEEN TAKEN TO STOP/START COLLECTION OF THE MEMBER'S CONTRIBUTIONS THROUGH HIS SALARY [REFER TO CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS(O)]. ADDITIONAL REMARKS OVERLEAF, IF ANY.		
8. NAME AND RANK	DATE	SIGNATURE WITH STAMP
DESIGNATION		

INDIVIDUAL'S COPY

**MODE OF CONTRIBUTIONS WHILE ON DEPUTATION/SECONDMENT ETC.  
AND ON REPATRIATION**  
**MEDICAL WELFARE SCHEME (OFFICERS)**  
**(RAISE IN FOUR COPIES AND COMPLETE IN BLOCK CAPITALS)**

**PERSONAL PARTICULARS AND MODE OF PAYMENT**

1. RANK	NAME	PAK NO.
BRANCH	UNIT	MEMBERSHIP NO.
<p>*2. WHILE PROCEEDING ON DEPUTATION / SECONDMENT ETC. I AM PROCEEDING ON DEPUTATION / POSTING/COURSE ABROAD TO (COUNTRY) _____ / I HAVE BEEN SECONDED TO (DEPARTMENT) _____ W.E.F. (DATE/MONTH/YEAR) _____ FOR ABOUT DURATION) _____. MY MONTHLY CONTRIBUTIONS TOWARDS THE MWS (O) THROUGH MY SALARY SHOULD BE STOPPED FROM (MONTH/YEAR) _____. UNDER CLAUSE "FIVE OF THE TERMS AND CONDITIONS FOR MWS (O), I AM ENCLOSED BANK DRAFT NO. _____ DATED _____ FOR RS _____ IN FAVOUR OF "MEDICAL WELFARE SCHEME (OFFICERS) SHAHEEN FOUNDATION PAF" DRAWN ON BANK LIMITED, ISLAMABAD AS MY CONTRIBUTIONS AT THE RATE OF RS 100/- PM FOR (PERIOD) _____. I WILL CONTINUE TO REMIT MY CONTRIBUTIONS IN ADVANCE FOR THE REMAINING PERIOD, IF ANY, TILL MY REPATRIATION TO THE PAF.</p>		
<p>*3. <u>ON REPATRIATION TO THE PAF. I WILL BE/HAVE BEEN REPATRIATED TO THE PAF AFTER MY DEPUTATION / SECONDMENT ETC. WITH EFFECT FROM (DATE/MONTH/YEAR) _____ . I HAD DIRECTLY REMITTED MY ADVANCED CONTRIBUTIONS TOWARDS THE MWS (O) TILL (MONTH/YEAR) _____ . NOW MY MONTHLY CONTRIBUTIONS AT THE RATE OF RS 100/- PM MAY BE COLLECTED THROUGH MY SALARY, STARTING FROM THE FOLLOWING MONTH, UNDER CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS (O)</u></p>		
4. SIGNATURE	DATE	

**COUNTER SIGNATURE BY UNIT COMMANDER**

5. FORWARDED FOR NECESSARY ACTION. REMARKS OVERLEAF, IF ANY.		
6. NAME AND RANK	DATE	SIGNATURE WITH STAMP
UNIT		

**ACTION BY SHAHEEN FOUNDATION HEAD OFFICE**

7. THE BANK DRAFT MENTIONED AT PARA 2 ABOVE HAS BEEN RECEIVED AND ACTION HAS BEEN TAKEN TO STOP/START COLLECTION OF THE MEMBER'S CONTRIBUTIONS THROUGH HIS SALARY [REFER TO CLAUSE "FIVE" OF THE TERMS AND CONDITIONS FOR MWS(O)]. ADDITIONAL REMARKS OVERLEAF, IF ANY.		
8. NAME AND RANK	DATE	SIGNATURE WITH STAMP
DESIGNATION		

UNIT DOCUMENTS COPY