

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator, MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam.

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS		
NAME	MR. GUPTA ASHWANI		
EC NO.	181677		
DESIGNATION	CUSTOMER SERVICE ASSOCIATE		
PLACE OF WORK	ASOTHAR		
BIRTHDATE	08-07-1988		
PROPOSED DATE OF HEALTH	14-12-2024		
CHECKUP	the property of the state of th		
BOOKING REFERENCE NO.	24D181677100121964E		
	the state of the s		

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 14-11-2024 till 31-03-2025 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

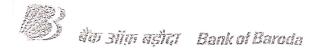
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM & Marketing Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s, Arcofemi Healthcare Pvt. Ltd.))





To,

The Coordinator, MedlWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam.

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY			
NAME	SARASWATI DEVI		
DATE OF BIRTH	31-12-1995		
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-12-2024		
BOOKING REFERENCE NO.	24D181677100121970\$		Annual Control of the
SPOUSE DETAILS			
EMPLOYEE NAME	MR. GUPTA ASHWANI		
EMPLOYEE EC NO.	181677	,	ter francis for traffic at jungs friend francis and section from the
EMPLOYEE DESIGNATION	CUSTOMER SERVICE ASSOCIATE		and the second s
EMPLOYEE PLACE OF WORK	ASOTHAR		5.
EMPLOYEE BIRTHDATE	08-07-1988		EM [®]

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 14-11-2024 till 31-03-2025. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM & Marketing Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))