

[Health checkup at tie-up Ctr](#)[HealthChkup Authorisatn letter](#)

Union Bank of India

RO - KOLLAM
KOLLAM, KOLLAM, Kerala, - 0

To,

The Chief Medical Officer

M/S Mediwheel

[https://mediwheel.in/signup011-](https://mediwheel.in/signup011-41195959)

41195959(A brand name of

Arcofemi Healthcare Ltd),

Mumbai400021

Dear Sir,

Tie-up arrangement for Health Checkup under Health Checkup**40-50 Male**

Shri/Smt./Kum. VARGHESE,ANTONY

P.F. No. 653473

Designation : Single Window Operator - A

Checkup for Financial Year

2023-

2024

Approved Charges Rs.

3500.00

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you,

Yours Faithfully,

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned[Notify](#)[Add](#)[Update/Display](#)[Health checkup at tie-up Ctr](#) [HealthChkup Authorisatn letter](#)