



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

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. ROY PRANOY
EC NO.	120978
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	BHANDHRGACHHA
BIRTHDATE	02-01-1991
PROPOSED DATE OF HEALTH CHECKUP	12-01-2024
BOOKING REFERENCE NO.	23M120978100081336E

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 29-12-2023 till 31-03-2024 The list of employees is attached in the annexure to this letter. Please note that the