

Health checkup at tie-up Ctr

HealthChkUp Authorisatn letter



Union Bank of India

RO - MYSORE
NO.2254, KAUSALYA, THIRD FLOOR,
SOUTH WING, VINOBHA ROAD, , - 0

To,

The Chief Medical Officer

M/S Mediwheel
<https://mediwheel.in/signup011-41195959>(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. RAMACHANDRA K N.,

P.F. No. 714715 Designation : Office Assistant

Checkup for Financial Year 2024-2025 **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