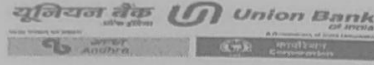


Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - CHENNAI NORTH  
139, BROADWAY, , , Chennai- 44

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**

**Executive Male 35+**

Shri/Smt./Kum. MISHRA, DHANANJAY KUMAR

P.F. No. 469107

Designation : Chief Manager(Law)

Checkup for Financial Year 2024-  
2025

**Approved Charges Rs.**

**4000.00**

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup(for Executives) 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,

(Signature of the Employee)

कृते यूनियन बैंक ऑफ इंडिया  
Yours Faithfully  
FOR UNION BANK OF INDIA

BRANCH MANAGER / SENIOR MANAGER  
उप क्षेत्रीय प्रमुख (वि.ओ) / Deputy Regional Head (B.C.)  
क्षेत्रीय कार्यालय, चेन्नै / Regional Office, Chennai

PS. : Status of the application- Sanctioned

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter

### Employee Request for Health Checkup at Tie-up Centre/Clinic

Employee Id 469107

Name MISHRA,DHANANJAY KUMAR Date of Birth 26/02/1975 Gender Male

Designation Chief Manager(Law) Grade SCALE 4 OFFICER

Department RO - CHENNAI NORTH Location RO - CHENNAI NORTH

I wish to undergo Health Checkup at M/S Mediwheel  
under tie up arrangement with our bank for the FinancialYear 2024-2025

The health checkup charges payable to above Centre as per bank's agreement with them is Rs. 4000.00

Kindly make the payment to them towards their health checkup charges after deducting TDS and Service Tax as applicable.

\*\*As bank is making payment to the above Centre/Clinic as per my request, I will undergo health checkup at above mentioned Centre only.

Submit

Date of Request 25/07/2024

Status of the application Sanctioned

Approve

Decline

Approved by: 672884

Date 26/07/2024

Remarks, if declined

Approved

Approver Name PUNITHA BALASUNDARAM,.