

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - NAGPUR
Ashirwad Commercial Complex, 2nd Floor,
34/2, Central Bazar Roac, Ramdas Peth,
Nagpur, Maharashtra,

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. SHELKE,AKASHASHOK

P.F. No. 669460

Designation : SPECIAL ASSISTANT

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,

(Signature of the Employee)

Yours Faithfully,

BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned

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

Employee Id 669460

Name SHELKE,AKASH ASHOK Date of Birth 19/08/1982 Gender Male

Designation SPECIALASSISTANT Grade CLERK

Department RO - NAGPUR Location WADI - NAGPUR

I wish to undergo Health Checkup at M/S Mediwheel
under tie up arrangement with our bank for the FinancialYear 2023-2024

The health checkup charges payable to above Centre as per bank's agreement with them is Rs. 3500.00

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 06/01/2024

Status of the application Sanctioned

Approve

Decline

Approved by: 670718

Date 30/12/2023

Remarks, if declined

Approved

Approver Name GHARPINDE,KHEMENDRA AMBAR

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