

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. PUREKAR DHANANJAY KRISHNA
EC NO.	65953
DESIGNATION	ESTATE MANAGEMENT
PLACE OF WORK	MUMBAI,BKC, BARODA CORPORATE C
BIRTHDATE	06-12-1980
PROPOSED DATE OF HEALTH CHECKUP	13-03-2024
BOOKING REFERENCE NO.	23M65953100097048E

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 **06-03-2024** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the health checkup is a cashless facility as per our tie up arrangement. We request you to