Remarks, if declined

HealthChkup Authorisatn letter

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

Employee Id 712842

Name SEEMA PANT JOSHI,. Date of Birth 10/07/1988 Gender Female

Designation Asst Manager Grade SCALE 1 OFFICER

Department RO - GHAZIABAD Location RO - GHAZIABAD

I wish to undergo Health Checkup at 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.

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.

3000.00

Date 20/03/2024

Submit Date of Request 20/03/2024 Status of the application Sanctioned

Approve Decline Approved 830206 by:

Approved

Approver Name SINGH, ANURAG