

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter

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

Employee Id 555882

Name KUMAR,RAJESH Date of Birth 25/02/1979 Gender Male

Designation Manager Grade SCALE 2 OFFICER

Department NPC Location CO Annex Patna

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. 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 19/07/2024 Status of the application Sanctioned

Approve

Decline

Approved by: 494386 Date 19/07/2024

Remarks, if declined

Approved

Approver Name PANDEY,JEETENDRA KUMAR



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Union Bank of India  
CENTRAL OFFICE  
111100

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. KUMAR,RAJESH

P.F. No. 555882

Designation : Manager

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,

(Signature of the Employee)

Yours Faithfully,



BRANCH MANAGER / SENIOR MANAGER

PS. : Status of the application- Sanctioned