

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	MS. SHUBHA ANAND KUBAL
EC NO.	168850
DESIGNATION	HEAD CASHIER "E" II
PLACE OF WORK	BANGALORE,BASAVANAGUDI
BIRTHDATE	01-08-1987
PROPOSED DATE OF HEALTH CHECKUP	09-12-2023
BOOKING REFERENCE NO.	23D168850100077684E

This letter of approval / recommendation is valid if submitted along with copy of the Baroda employee id card. This approval is valid from **02-12-2023** till **31-03-2024**. The medical tests to be conducted is provided in the annexure to this letter. Please note that said health checkup is a **cashless facility** as per our tie up arrangement. We request you attend to the health checkup requirement of our employee and accord your top priority best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager

HRM Department