

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - NIZAMABAD
D.NO.5-6-570/2/7A & 7B WARD NO.5.,
BLOCK, NO.6., PRAGATHINAGAR, - 0

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,MOTTE SANJAY

P.F. No. 559182

Designation : Manager (Branch Head)

Checkup for Financial Year 2023-2024 **Approved Charges Rs.** 3500.00

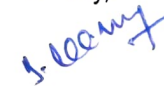
The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you,

Yours Faithfully,


(Signature of the Employee)


Dy. BRANCH MANAGER/SENIOR MANAGER



PS. : Status of the application- Sanctioned