

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - BARODA
2nd Floor, Union Bank Bhavan, Opp. M.S.,
University, Station Road, Near Kala Ghoda,
Sayajiganj, Barod

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 35-40 Female

Shri/Smt./Kum. ~~XXXXXXXXXXXX~~,

P.F. No. ~~XXXXXXXXXX~~ Designation : Single Window Operator-B

Checkup for Financial Year 2023-2024 **Approved Charges Rs.** 3000.00

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,

(Handwritten signature)
(Signature of the Employee)



Yours Faithfully

(Handwritten signature)
BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned

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