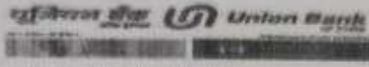


Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India  
RO - SECUNDERABAD  
III FLOOR,, SULTAN BAZAR,,  
HYDERABAD 500095, Telangana. - 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. B SATYANARAYANA.

P.F. No.	689454	Designation :	Asst Manager
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,  
  
(Signature of the Employee)

Yours Faithfully,  
  
BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned

Notify

Add