

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - BANGALORE NORTH  
NO.1/1, GROUND FLOOR, JEEVAN  
SAMPIGE, 2ND MAIN, SAMPIGE ROAD,  
-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 50-60 Male**

Shri/Smt./Kum. KANTHARAJA M.,

P.F. No. 628421 Designation : Manager (Branch Head)

Checkup for Financial Year 2024-2025 **Approved Charges Rs.** 4000.00

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,

कृते यूनियन बैंक ऑफ इंडिया / For UNION BANK OF INDIA

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER

प्रबंधक / Manager  
कुमार पार्क (पश्चिम) शाखा बेंगलूरु - 560020  
Kumar Park (West) Branch, Bengaluru-560020

PS. : Status of the application- **Sanctioned**

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कृते यूनियन बैंक ऑफ इंडिया / For UNION BANK OF INDIA

P. Kartee Kumar  
प्रबंधक / Manager  
कुमार पार्क (पश्चिम) शाखा बेंगलूरु - 560020  
Kumar Park (West) Branch, Bengaluru-560020