Health checkup at tie-up Ctr	**HealthChkup Authorisatn letter**

यूनियन बैंक 🔵 **Union Bank**
of India

Andhra   Corporation

Union Bank of India

RO - GANDHINAGAR
Gift City, Fourth Floor,,, Gandhinagar,
Gujarat, - 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   **Executive Male 35+**

Shri/Smt./Kum.   GOPAL,HARI

P.F. No.   412690   **Designation :**   Chief Manager (Branch Head)

Checkup for Financial Year   2023-   **Approved Charges Rs.**   4000.00
                                   2024

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup(for Executives) 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)   BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application-   Sanctioned

Health checkup at tie-up Ctr	HealthChkup Authorisatn letter

Employee Request for Health Checkup at Tie-up Centre/Clinic

Employee Id   412690

Name GOPAL,HARI	**Date of Birth**	10/07/1973	**Gender**	Male

Designation   Chief Manager (Branch Head)   **Grade**   SCALE 4 OFFICER

Department   RO - GANDHINAGAR   **Location**   UMFB DRIVE IN ROAD

I wish to undergo   Health Checkup at   M/S Mediwheel

under tie up arrangement with our bank for the FinancialYear   2023-2024

The health checkup charges payable to above Centre as per bank's agreement with them is Rs.   4000.00

Kindly make the payment to them towards their health checkup charges after deducting TDS and Service Tax as applicable.

**As bank is making payment to the above Centre/Clinic as per my request, I will undergo health checkup at above mentioned Centre only.

Submit	**Date of Request** 28/02/2024	**Status of the application** Sanctioned

Approve	Decline	**Approved by:** 698483	**Date** 28/02/2024

Remarks, if declined   Approved

Approver Name   ANIL KUMAR RATHAUR,.