nbursement Application X	DOD CASH FOR CONTROL OF THE PARTY OF THE PAR
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an/psc/PS92HPRD/view/%76V2%7	7djnefMp_Q6sAyBGbOXiVGSfvb2e8n9TkYOatDr ☆
loud – +	€ 2 of 3 ③ □
ub: Annual Health Checkup for	r the employees of Bank of Baroda
his is to inform you that the followashless Annual Health Checkup	wing spouse of our employee wishes to avail the fa provided by you in terms of our agreement.
NAME	OF HEALTH CHECK UP BENEFICIARY
DATE OF BIRTH	VIJAITA RANI
PROPOSED DATE OF HEALTH	26-08-1991 14-10-2023
CHECKUP FOR EMPLOYEE SPOUSE	
BOOKING REFERENCE NO.	23D120629100070914S
EMBI OVEE NAME	SPOUSE DETAILS
EMPLOYEE NAME	MR. SINGH SHIVASHISH KUMAR
EMPLOYEE EC NO. EMPLOYEE DESIGNATION	120629 SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	SANDILA
EMPLOYEE BIRTHDATE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Baroda employee id card. This appreciate tests to be conducted is partially said health checkup is a cashless attend to the health checkup requiriority and best resources in the number as given in the above table.	ndation is valid if submitted along with copy of the Bar oproval is valid from 03-10-2023 till 31-03-2024. The li- provided in the annexure to this letter. Please note that is facility as per our tie up arrangement. We request your uirement of our employee's spouse and accord your his regard. The EC Number and the booking refere e shall be mentioned in the invoice, invariably.
We solicit your co-operation in this	s regard.
Yours faithfully,	
Sd/-	
Chief General Manager	
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