

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. KUMAR PRASHANT
EC NO.	167279
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	DARBHANGA,DONAR ROAD
BIRTHDATE	07-11-1987
PROPOSED DATE OF HEALTH CHECKUP	09-09-2023
BOOKING REFERENCE NO.	23S167279100068934E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **08-09-2023** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to