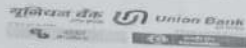


Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - PUNE EAST
"JEEVAN PRAKASH", 6/7, L.I.C. BLDG.,
University Rd, p.b.no.960, Shivaji Nagar,
Pune, maharashtra, Pin

To,

The Chief Medical Officer

M/S Mediwheel
<https://mediwheel.in/signup011-41195959>(A brand name of
Arcofemi Healthcare Ltd),
Mumbai 400021

Dear Sir,

Tie-up arrangement for Health Checkup under Health Checkup 50-60 Mals

Shri/Smt./Kum. PATIL PRASHANT ANANDA..

P.F. No. 678963 Designation: HEAD CASHIER II CUM CLERK

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

