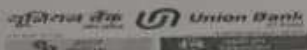


Health checkup at tie-up Ctr | HealthChkup Authorisatn letter



Union Bank of India

RO - GREATER PUNE  
201/202, 2ND FLOOR,, STELLAR  
ENCLAVE,, D.P.ROAD,, NEAR PARIHAR  
CHOWK, AUNDH,, - 0

To,

The Chief Medical Officer

M/S Mediwheel  
https://mediwheel.in/signup011-  
41195559(A brand name of  
Arocleni Healthcare Ltd),  
Mumba-400021

Dear Sir,

**Tie-up arrangement for Health Checkup under Health Checkup 40-50 Male**

Shri/Smt./Kum. **BAVALE SATYAVAN SUDAM,,**

P.F. No. 647087 Designation : **HEAD CASHIER II CUM CLERK**

Checkup for Financial Year 2023- **Approved Charges Rs. 3500.00**  
2024

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



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

View Worklist

Notify

Add

Update/Display

Health checkup at tie-up Ctr | HealthChkup Authorisatn letter