



## LETTER OF APPROVAL / RECOMMENDATION

To.

The Coordinator, MediWheel (M/s. Arcofemi Healthcare Pvl. Ltd.)

Dear Sir / Madam.

## 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. RAO CHANDRASHEKHAR EDDIMI
EC NO.	68029
DESIGNATION	JOINT MANAGER
PLACE OF WORK	BASIRHAT
BIRTHDATE	21-07-1971
PROPOSED DATE OF HEALTH	30-10-2024
BOOKING REFERENCE NO.	24D68029100119114E

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 28-10-2024 till 31-03-2025 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 attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

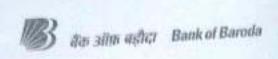
Yours faithfully,

Sd/-

## Chief General Manager HRM & Marketing Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any charification, please contact Med-Wheel (Mis. Arcolemi Healthcare Pvt. Ltd.))

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To.

MediWheel (M/s. Arcofemi Healthcare Pvt, Ltd.)

Dear Sir / Madam,

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

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

PARTICULARS (	OF HEALTH CHECK UP BENEFICIARY
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AME	05-02-1979
ATE OF BIRTH ROPOSED DATE OF HEALTH HECKUP FOR EMPLOYEE	30-10-2024
POUSE	24D68029100119116S
BOOKING REFERENCE NO.	
MPLOYEE NAME	MR. RAO CHANDRASHENHAN COS
MPLOYEE EC NO.	68029
MPLOYEE DESIGNATION	JOINT MANAGER
MPLOYEE DESIGNATION	BASIRHAT
MPLOYEE PLACE OF WORK MPLOYEE BIRTHDATE	21-07-1971

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 28-10-2024 till 31-03-2025. 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 attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably,

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager **HRM & Marketing Department** Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcolem Heathcare Pvt. Ltd.))