

LETTER OF APPROVAL / RECOMMENDATION

To:

The Coordinator, MediWheel (M/s. Arcoferni Healthcare PvI, 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. GUPTA ASHWANI
EC NO.	181677
DESIGNATION	CUSTOMER SERVICE ASSOCIATE
PLACE OF WORK	ASOTHAR
BIRTHDATE	08-07-1988
PROPOSED DATE OF HEALTH	14-12-2024
CHECKUP	Service Control of the Control of th
BOOKING REFERENCE NO.	24D181677100121964E

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 14-11-2024 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.

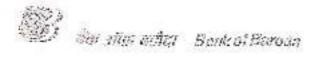
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM & Marketing Department Bank of Baroda

(Note: This is a computer generaled lotter. No Signature required. For any derification, please contact MediWheet (M/s. Argoferni Healthcare Pvt. Ltd.))





To.

The Coordinator, MediWheel (M/s. Arcoforni Healthcare Pvt. Ltd.)

Bear Air / Madam.

Sub: Annual Health Checkup for the employees of Bank of Barods

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

NAME	OF HEALTH CHECK UP BENEFICIARY SARASWATI DEVI
DATE OF BIRTH	31-12-1995
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-12-2024
BOOKING REFERENCE NO.	24D181377100121970S
	SPOUSE DETAILS
EMPLOYEE NAME	MR. GUPTA ASHWANI
EMPLOYEE EC NO.	181677
EMPLOYEE DESIGNATION	CUSTOMER SERVICE ASSOCIATE
EMPLOYEE PLACE OF WORK	ASOTHAR
EMPLOYEE BIRTHDATE	08-07-1988

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 14-11-2024 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 montioned 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 distribution, please contact MediMheel (M/s. Arcoferni Heelthcare Pvt. Ltd.))