



Health checkup at tie-up Ctr

HealthCheckup Authorisatn letter



Union Bank of India

RO - MYSORE
NO.2254, KAUSALYA, T- RD FLOOR
SOUTH WING, VINGBHA ROAD, - C

To:

The Chief Medical Officer

M/S Medwheel
<https://medwheel.in/signup011-41185959>(A brand name of
Arocloni Healthcare Ltd),
Mumbai-400021

Dear Sir,

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

Shri/Smt./Kum. MANJUNATHA B A.

P.F. No. 693824 Designation : Senior Manager(Credit)

Checkup for Financial Year 2024-2025 Approved Charges Rs. 3500.00

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,

Yours Faithfully,

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER

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