



भारत सरकार

Government of India

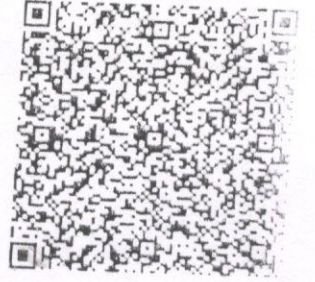


प्रीतम मंडल

Pritam Mondal

जन्म तिथि / DOB : 18/12/1990

पुरुष / Male



2590 6050 4660

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

आत्मज: मदन मॉडल, पुरबाशा  
कॉलोनी, आसंसोल (एम कोर्प.),  
बर्द्धमान, उशग्राम, वेस्ट बंगाल,  
713303

Address:

S/O: Madan Mondal, Purbasha  
Colony, Asansol (m Corp.),  
Barddhaman, Ushagram, West  
Bengal, 713303

2590 6050 4660



1947

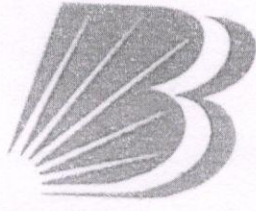


help@uidai.gov.in

WWW

www.uidai.gov.in





बैंक ऑफ़ बड़ौदा  
Bank of Baroda



नाम प्रीतम मोन्दल  
Name : Pritam Mondal

कर्मचारी कूट. क्र.  
E.C. No. 116318

जारीकर्ता प्राधिकारी  
Issuing Authority: C.M. (Co-ord), EZ

Pritam Mondal.  
धारक के हस्ताक्षर  
Signature of Holder

मिलने पर निम्नलिखित को लौटाए  
सहायक महाप्रबन्धक (सुरक्षा), बैंक ऑफ़ बड़ौदा, बड़ौदा कॉर्पोरेट सेंटर  
सी-26 जी ब्लॉक, बान्द्रा-कुर्ला कॉम्प्लेक्स, मुंबई 400 051, भारत  
फोन 91 22 6698 5196 फैक्स 91 22 2652 5747

E. Z.

If found, please return to  
Asst. General Manager (Security), Bank of Baroda, Baroda Corporate Centre  
C-26, G Block, Bandra-Kurla Complex, Mumbai 400 051, India  
Phone : 91 22 6689 5196 Fax 91 22 2652 5747

व्यक्ति का नाम एवं दूरभाष जिनसे आपातकाल में संपर्क करें

Name & Ph./Person of emergency contact

**Madan Mondal (Father)**  
**94751 89461**

रक्त समूह/Blood Group : **B+ve** एलर्जी/Allergy **Dust**

पहचान चिह्न/Identification mark **None**

जारीकर्ता कार्यालय / Issuing Office  
BOB, Eastern Zone, Plot No. 38/2, Block - GN, Sector - V, Salt Lake City, Kolkata - 700 051

Fwd: Health Check up Booking Confirmed Request(bobE1202),Package Code-PKG10000227, Beneficiary Code-27607

pritam mondal <sspritam14@gmail.com>

Thu 6/3/2021 1:00 AM

To: Pritam Mondal <PRITAM.MONDAL@bankofbaroda.com>

1 attachments (11 KB)

image001.png;

**\*\*सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

**\*\*CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.

----- Forwarded message -----

From: **Wellness : MediWheel** <[wellness@mediwheel.in](mailto:wellness@mediwheel.in)>

Date: Sat, May 29, 2021, 4:51 PM

Subject: Health Check up Booking Confirmed.Request(bobE1202),Package Code-PKG10000227, Beneficiary Code-27607

To: <[sspritam14@gmail.com](mailto:sspritam14@gmail.com)>

Cc: <[customer-care@mediwheel.in](mailto:customer-care@mediwheel.in)>

[https://mediwheel.in/assets/img/emailer\\_logo.png](https://mediwheel.in/assets/img/emailer_logo.png)

011-41195959

[Email:wellness@mediwheel.in](mailto:wellness@mediwheel.in)

Dear **MR. MONDAL PRITAM,**

Please find the confirmation for following request.

**Booking Date** :29-05-2021

**Package Name** :BOB Full Body Health Checkup Male Below 40

:Apollo Clinic Sinthi More

Name of  
Diagnostic/Hospital

Address of  
Diagnostic/Hospital :36 C, BT Road

Contact Details :8017205969

City :Kolkata

State :West Bengal

Pincode :700002

Appointment Date :05-06-2021

Confirmation  
Status :Confirmed

Preferred Time :09:00:AM

Comment :Appointment Time 10:00 am ( please bring your HRM letter ,  
BOB ID CARD , and id proof )

**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).

<https://outlook.office.com/mail/inbox/id/AAQkAGVIZTIkMmE2LWQ5MWYtNDA0...> 03-06-2021

<https://outlook.office.com/mail/inbox/id/AAQkAGVIZTIkMmE2LWQ5MWYtNDA0...> 03-06-2021

4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

© 2021-2022 , Arcofemi Healthcare Limited.

Fwd: Health Check up Booking Confirmed Request(bobS1203),Package Code-PKG10000228, Beneficiary Code-27607

pritam mondal <sspritam14@gmail.com>

Thu 6/3/2021 12:11 AM

To: Pritam Mondal <PRITAM.MONDAL@bankofbaroda.com>

1 attachments (11 KB)

image001.png

**\*\*सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

**\*\*CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.

----- Forwarded message -----

From: **Wellness : MediWheel** <[wellness@mediwheel.in](mailto:wellness@mediwheel.in)>

Date: Sat, May 29, 2021, 4:53 PM

Subject: Health Check up Booking Confirmed Request(bobS1203),Package Code-PKG10000228, Beneficiary Code-27607

To: <[sspritam14@gmail.com](mailto:sspritam14@gmail.com)>

Cc: <[customer-care@mediwheel.in](mailto:customer-care@mediwheel.in)>

[https://mediwheel.in/assets/img/emailer\\_logo.png](https://mediwheel.in/assets/img/emailer_logo.png)

<sup>h</sup> 011-41195959

Email: [wellness@mediwheel.in](mailto:wellness@mediwheel.in)

Dear **Sarbani sarkar**,

Please find the confirmation for following request.

**Booking Date** :29-05-2021

**Package Name** :BOB Full Body Health Checkup Female Below 40

:Apollo Clinic Sinthi More

**Name of  
Diagnostic/Hospital**

**Address of  
Diagnostic/Hospital** :36 C, BT Road

**Contact Details** :8017205969

**City** :Kolkata

**State** :West Bengal

**Pincode** :700002

**Appointment Date** :05-06-2021

**Confirmation  
Status** :Confirmed

**Preferred Time** :09:00:AM

**Comment** Appointment Time 10:00 am ( please bring your HRM letter ,  
BOB ID CARD , and id proof )

**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).

4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

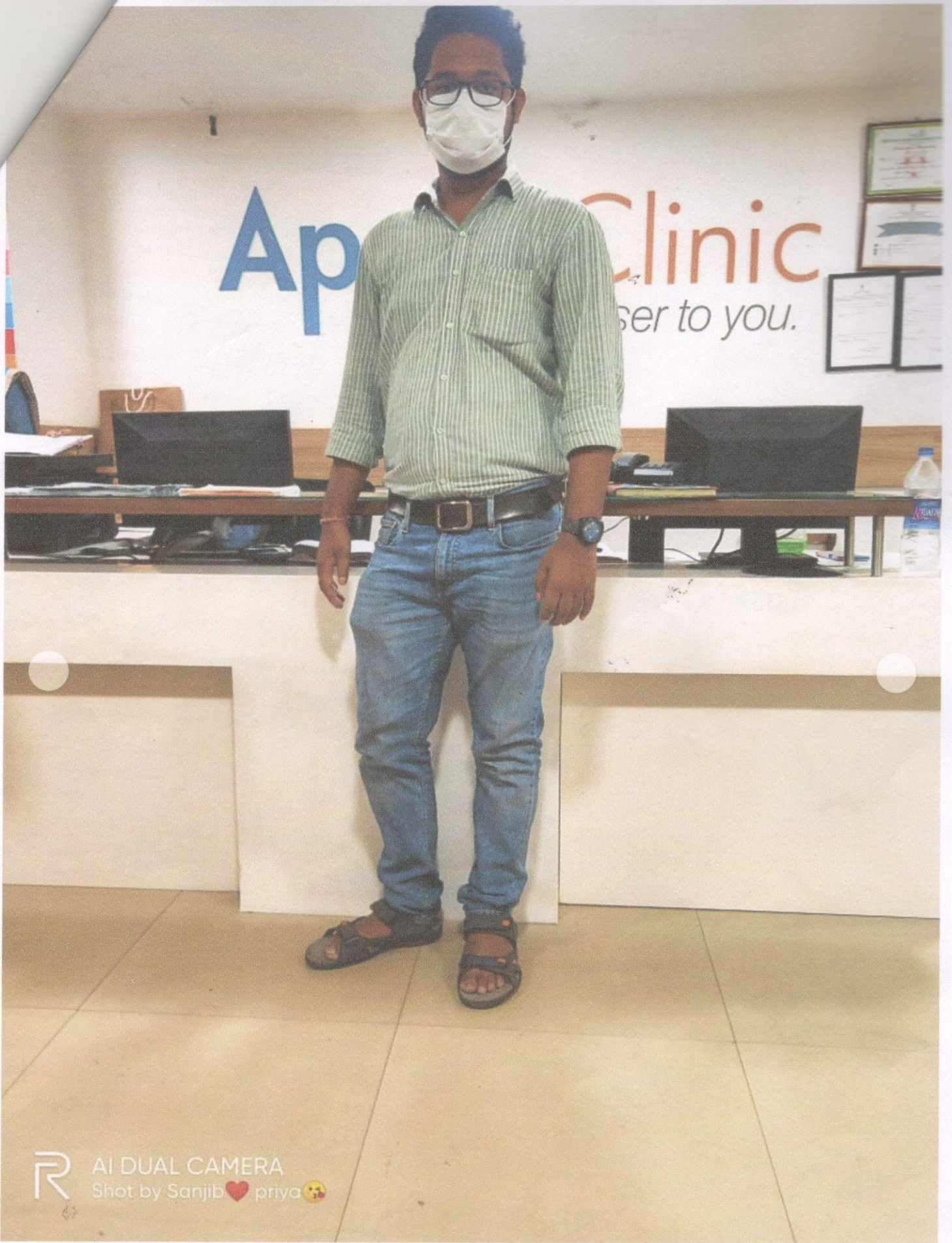
In case of further assistance, Please reach out to Team Mediwheel.


© 2021-2022 . Arcofemi Healthcare Limited.





AI DUAL CAMERA  
Shot by Sanjib ❤️ priya 🙏



 AI DUAL CAMERA  
Shot by Sanjib ❤️ priya 🥰