10/18/22, 4:14 PM Patanjali Wellness



Patanjali Yogpeeth Haridwar

Delhi-Haridwar National Highway, Near Bahadrabad, Haridwar, Uttarakhand, India - 249405

Refund Form Date: 18-10-2022

To Sevepramukh Patanjali Wellness Center

I request you to please refund my money due to following reason. Details given below:

Health Seekers Name: Meera Devi

Room No: 120-D-1

Date of Arrival: 27-09-2022

Payment Date: 18-10-2022

Mode of Payment: Bank Transfer

Bank: CENTRAL BANK OF INDIA

Account Holder Name: MADAN LAL GUPTA

Mobile Number: 9557973243

Addess: RBL ROAD, VRINDAVAN YOJNA,

Date of Discharge: 08-10-2022 Transition No: C76855735 Deposit Amount: 16500 Ifsc Code: CBIN0282857 Account Number: 2236502645

By Office

Booking Id: .IPD1411454148

Refund Days %:

MR Number: 22030909032901

Refund Amount:

Reason for Refund: DOUBLE PAYMENT

Refund Payment By: Bhupender Singh

Need to Attach Documents:

Cancelled Cheque/Bank Statement/Payment Receipt:

Front Office Head Authorized Health Seekers
Signature Signature Signature