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| **ACCESS Health International, INC** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Nomita Drall |
|  | Address | H-914 Jalvayu Towers, Sector 56, Gurgaon 122011 |
|  | Legal Status of | Self-employed |
|  | Country of Registration | NA |
|  | Registration Number | NA |
|  | Date of Contract and Doc Ref No. | 01-Jul-21 |
|  | Completion of Contract | 31-Dec-21 |
|  | Name of Point of Contact | Nomita Drall |
|  | Contact No. / Email ID of Person to Contact | 9811898286 / nomitadrall@gmail.com |
|  | Name of the Project | BHSRC |
|  | Grant Start Date | 01-Nov-18 |
|  | Grant End Date | 31-Dec-21 |
|  | Budget Line Item | Consultant |
|  | Available Budget | INR 90,000 per month (INR 5,40,000 for 6 months) |
|  | Service/ Goods Description | Copyediting and Proofreading |
|  | Name of Approver of Contract | Maulik Chokshi |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to | Nomita Drall |
|  | Bank Name | ICICI Bank |
|  | Account Number | 17701580539 |
|  | Bank Address | DLF Phase I, Qutub Plaza, Gurgaon |
|  | IFSC Code | ICIC0000177 |
|  | Swift Code | ICICINBBNRI |