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| **ACCESS Health International Southeast Asia Ltd.** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Dr. Ryusuke Miki |
|  | Address | 7-2-5 Kamitsutsui-dori Kobe, Hyogo 651-0061 Japan |
|  | Legal Status of | Citizen |
|  | Country of Registration | Japan |
|  | Registration Number | NA |
|  | Date of Contract and Doc Ref No. | 24-Aug-21 |
|  | Completion of Contract | 25-Aug-21 |
|  | Type of Contract | Service Agreement |
|  | Name of Point of Contact | Dr. Ryusuke Miki |
|  | Contact No. / Email ID of Person to Contact | +81 90 7293 9333, [ryusukemiki.consultant@gmail.com](mailto:ryusukemiki.consultant@gmail.com) |
|  | Name of the Project | Health Futures |
|  | Budget Line Item | Other Program Expenses |
|  | Available Budget | Total USD 500 |
|  | Service/ Goods Description | Consulting |
|  | Name of Approver of Contract | Sejal Mistry |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to |  |
|  | Bank Name |  |
|  | Account Number |  |
|  | Bank Address |  |
|  | IFSC Code (Routing Number) |  |
|  | Swift Code |  |
|  |  |  |
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|  | **Submitted to** |  |
|  | **Name of the Person** | Sejal Mistry |
|  | **Designation** | Regional Director, Southeast Asia |
|  |  |  |
|  |  |  |
|  | **Signature** |  |
|  | **Designation** |  |
|  | **Program Name** |  |
|  |  |  |
|  |  |  |
|  | **Date** | 24-Aug-21 |
|  | **Place** | Singapore |