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| --- | --- | --- | --- |
| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Anupama Sharma |
|  | Address | | C 376 prodhyogiki apartment Sector 3, Plot 11, Dwaraka, New Delhi-110078 |
|  | Legal Status | | N/A |
|  | Country of Registration | | N/A |
|  | Registration Number | | N/A |
|  | Date of Contract | | 15th September 2021 |
|  | Completion of Contract | | 15th December 2021 |
|  | Name of Point of Contact | | Anupama Sharma |
|  | Contact No. / Email ID of Person to Contact | | 9958293008/ Anupama.heller@gmail.com |
|  | Name of the Project | | BHSRC |
|  | Grant Start Date | | November 4, 2018 |
|  | Grant End Date | | December 31, 2021 |
|  | Budget Line Item | | Support Cost (Research Scholar Small Grant) |
|  | Available Budget | | Total consultancy fee is 5000 USD |
|  | Service/ Goods Description | | Consultant for Mentor-Mentee Program |
|  | Name of Approver of Contract | | Maulik Chokshi |
|  |  | |  |
| **Bank Details\*** | | | |
|  | Please make payment to | Anupama Sharma | |
|  | Bank Name | HDFC Bank | |
|  | Account Number | 02491140010467 | |
|  | Bank Address | AGGARWAL CENTRAL PLAZA, PLOT NO 11, SECTOR-5, DWARKA, NEW DELHI-110075 | |
|  | IFSC Code | HDFC0000249 | |
|  | Swift Code | HDFCINBB | |

\*Please note: It is mandatory to provide all these details.