| **ACCESS Health International, INC** | | |
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| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name of Organization | REG NAME: ATUL JAIN (TRADE NAME: LEARALL) | |
|  | Address | 204, 5-5-63, Darussalam Road, Hyderabad – 500012 | |
|  | Legal Status of | Proprietorship | |
|  | Country of Registration | India | |
|  | Registration Number | 36AICPJ1849G1ZD (GST) | |
|  | Type of Contract | Quality Health Service Contract (ZOHO PROVIDING LICENSE OF ZOHO PROJECTS) | |
|  | Start Date of Contract | November 1, 2021 | |
|  | End Date of Contract | October 31, 2022 | |
|  | Name and designation of Authorized Signatory of the Vendor | ATUL JAIN | |
|  | Contact No. / Email ID of Authorized Signatory of the Vendor | 9550590673, [atul.jain@learnall.co.in](mailto:atul.jain@learnall.co.in) | |
|  | Name of the Project | PSI (PROVIDING LICENSE OF ZOHO PROJECTS) | |
|  | Grant Start Date | October 1, 2021 | |
|  | Grant End Date | September 30, 2023 | |
|  | Total Contract Value | All Inclusive Rs. 59,472/- (Rs.280\*12Months\*15User +18%GST) | |
|  | Budget Line Item | To be filled by ACCESS Health | |
|  | Service/ Goods Description | Project Management Tool | |
|  | Name of Approver of Contract | Girish/Dr. Krishna Reddy | |
|  |  |  | |
| **Bank Details** | | |
|  | Please make payment to | ATUL JAIN | |
|  | Bank Name | STATE BANK OF INDIA | |
|  | Account Number | 20190606228 (SB Account) | |
|  | Bank Address | NAMPALLY, HYDERABAD | |
|  | PAN No | AICPJ1849G1ZD | |
|  | IFSC Code | SBIN006060146 | |
|  | Swift Code (Mandatory) | SBININBB | |