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| **ACCESS Health International, INC** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Dr. Amatur Rehman Summayyah |
|  | Address | 16-10-123/13/1, Old Malakpet, Jamal Colony, Hyderabad-500036 |
|  | Legal Status of | NA |
|  | Country of Registration | NA |
|  | Registration Number | NA |
|  | Date of Contract and Doc Ref No. | 19-April-22 |
|  | Completion of Contract | 18-April-24 |
|  | Type of Contract | AHI Full Time Consultant Contract |
|  | Name of Point of Contact | Kaleem Mohammed |
|  | Contact No. / Email ID of Person to Contact | +91 9502168736, [arsummayyah@gmail.com](mailto:arsummayyah@gmail.com) |
|  | Name of the Project | Osmania General Hospital (OGH) |
|  | Budget Line Item | Consultants |
|  | Available Budget | INR 80,000 per month (INR 960,000 per annum) |
|  | Service/ Goods Description | Quality Manager |
|  | Name of Approver of Contract | Dr. Krishna Reddy/Girish |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to | Amatur Rehman Summayyah |
|  | Bank Name | State Bank of India |
|  | Account Number | 31035769883 |
|  | Bank Address | vijayawada , BRP Road, one town |
|  | IFSC Code | SBIN0000948 |
|  | Swift Code | SBININBB325 |