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| --- | --- | --- | --- | --- | --- | --- |
| **ACCESS Health International, INC** | | | |  |  |  |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |  |  |  |
|  | Name | | ASK Health Consulting Company Ltd |  |  |  |
|  | Address | | Room 171, 3rd Floor, No.328 Tian Tong Road, Hongkou District, Shanghai, PRC, 200085 |  |  |  |
|  | Legal Status of | |  |  |  |  |
|  | Country of Registration | |  |  |  |  |
|  | Registration Number | |  |  |  |  |
|  | Date of Contract | | 01/03/2022 |  |  |  |
|  | Completion of Contract | | 31/05/2022 |  |  |  |
|  | Name of Point of Contact | | Chang Liu |  |  |  |
|  | Contact No. / Email ID of Person to Contact | | [chang.liu@accessh.org](mailto:chang.liu@accessh.org) |  |  |  |
|  | Name of the Project | |  |  |  |  |
|  | Type of Contract | | Chang Liu salary loan |  |  |  |
|  | Budget Line Item | | Interoffice transfer |  |  |  |
|  | Available Budget | | USD 57,278.75 |  |  |  |
|  | Service/ Goods Description | | N/A |  |  |  |
|  | Name of Approver of Contract | | Sejal Mistry for Singapore and Chang Liu for China |  |  |  |
|  |  | |  |  |  |  |
| **Bank Details** | | | |  |  |  |
|  | Please make payment to |  | |  |  |  |
|  | Bank Name |  | |  |  |  |
|  | Account Number |  | |  |  |  |
|  | Bank Address |  | |  |  |  |
|  | Routing Number |  | |  |  |  |
|  | Routing Number |  | |  |  |  |
|  | IFSC Code |  | |  |  |  |
|  | Swift Code |  | |  |  |  |
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|  |  |  |  |  |
|  |  |  |  |  |
|  | **Submitted to** |  |  |  |
|  | **Name of the Person** | Sejal Mistry | |  |  |  |
|  | **Designation** | Regional Director - Southeast Asia | |  |  |  |
|  | **Program Name** | Health Futures | |  |  |  |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
|  | **Date** | 26-Apr-21 | |  |  |  |
|  | **Place** | Singapore | |  |  |  |