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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 | China | |  |  |  |
|  | Country of Registration | China | |  |  |  |
|  | Registration Number |  | |  |  |  |
|  | Date of Contract | 8/1/2022 | |  |  |  |
|  | Completion of Contract | 10/31/2022 | |  |  |  |
|  | Name of Point of Contact | Pearl (Yue Xu) | |  |  |  |
|  | Contact No. / Email ID of Person to Contact | [yue.xu@accessh.org](mailto:yue.xu@accessh.org) | |  |  |  |
|  | Name of the Project | Meta/AGA | |  |  |  |
|  | Type of Contract | Inter Office Agreement | |  |  |  |
|  | Budget Line Item | Inter Office Agreement | |  |  |  |
|  | Available Budget | USD 8000 | |  |  |  |
|  | Service/ Goods Description | Interoffice | |  |  |  |
|  | 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** | | 27-Jul-22 |  |  |  |
|  | **Place** | | Singapore |  |  |  |