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| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Sreeramudu Kuruva |
|  | Address | | H-No-1/260, Gurujala Village, Nandavaram Mandal, Kurnool Dist, Andhra Pradesh 518343 |
|  | Legal Status of | | India |
|  | Country of Registration | | India |
|  | Registration Number | | NA |
|  | Date of Contract | | 10-Oct-22 |
|  | Completion of Contract | | 09-Oct-23 |
|  | Name of Point of Contact | | Tushar Mokashi |
|  | Contact No. / Email ID of Person to Contact | | 9819276929/sreeramudukuruva@gmail.com |
|  | Name of the Project | | Research & Policy Projects |
|  | Type of Contract | | QHAP Full time consultant contract |
|  | Grant Start Date | | NA |
|  | Grant End Date | | NA |
|  | Budget Line Item | | Consultants |
|  | Available Budget | | INR 75,000 per month |
|  | Service/ Goods Description | | Technical Specialist-Quantitative Research |
|  | Name of Approver of Contract | | Dr. Krishna Reddy |
|  |  | |  |
| **Bank Details** | | | |
|  | Please make payment to | Sreeramudu Kuruva | |
|  | Bank Name | State Bank of India | |
|  | Account Number | 34222226195 | |
|  | Bank Address | Post Box 1, Park Road, Yemmiganur | |
|  | IFSC Code | SBIN0000955 | |
|  | Swift Code | NA | |