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| --- | --- | --- | --- | --- | --- |
| **ACCESS Health International Southeast Asia Ltd.** | | | |  |  |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |  |  |
|  | Name | | A Kanageswari |  |  |
|  | Address | | Blk 363, Yung An Road, Unit No. 02-133, Singapore 610363 |  |  |
|  | Legal Status of | | Singapore |  |  |
|  | Country of Registration | | NA |  |  |
|  | Registration Number | | NA |  |  |
|  | Date of Contract and Doc Ref No. | | 01/12/2022 |  |  |
|  | Completion of Contract | | 31/01/2023 |  |  |
|  | Type of Contract | | Independent Consultant |  |  |
|  | Name of Point of Contact | | Sejal Mistry |  |  |
|  | Contact No. / Email ID of Person to Contact | | (+65) 9436 0429/kanages95@gmail.com |  |  |
|  | Name of the Project | | Health Futures |  |  |
|  | Budget Line Item | | Other Program Expenses |  |  |
|  | Available Budget | | SGD 800/monthly |  |  |
|  | Service/ Goods Description | | Consulting |  |  |
|  | Name of Approver of Contract | | Sejal Mistry |  |  |
|  |  | |  |  |  |
| **Bank Details** | | | |  |  |
|  | Please make payment to | A Kanageswari | |  |  |
|  | Bank Name | Oversea Chinese Banking Corporation Limited | |  |  |
|  | Account Number | 713-271443-001 | |  |  |
|  | Bank Address | NA | |  |  |
|  | IFSC Code (Routing Number) | NA | |  |  |
|  | Swift Code | OCBCSGSG | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  | **Submitted to** |  | |  |  |
|  | **Name of the Person** | Sejal Mistry | |  |  |
|  | **Designation** | Regional Director, Southeast Asia | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  | **Signature** |  | |  |  |
|  | **Designation** |  | |  |  |
|  | **Program Name** |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  | **Date** | 16-Nov-22 | |  |  |
|  | **Place** | Singapore | |  |  |