|  |  |  |  |
| --- | --- | --- | --- |
| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Kimberly Hazel |
|  | Address | | 9782 Jackson Way  Avon, Indiana 46123  (USA) |
|  | Legal Status of | | USA |
|  | Country of Registration | | USA |
|  | Registration Number | | NA |
|  | Date of Contract | | 1-Feb-23 |
|  | Completion of Contract | | 31-Jan-24 |
|  | Name of Point of Contact | | Courtney Biggs |
|  | Contact No. / Email ID of Person to Contact | | (862) 377-1424/ kimmyhazel@outlook.com |
|  | Name of the Project | | COO |
|  | Type of Contract | | AHI US Full time employment contract |
|  | Grant Start Date | | NA |
|  | Grant End Date | | NA |
|  | Budget Line Item | | Employees |
|  | Available Budget | | USD 70,000 per annum/After 3 months probation, salary will be revised to USD 75,000 per annum |
|  | Service/ Goods Description | | Science Communications Associate |
|  | Name of Approver of Contract | | William Haseltine |
|  |  | |  |
| **Bank Details** | | | |
|  | Please make payment to |  | |
|  | Bank Name |  | |
|  | Account Number |  | |
|  | Bank Address |  | |
|  | IFSC Code |  | |
|  | Swift Code |  | |