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| **ACCESS Health International, INC** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Sudha Ramani |
|  | Address | 905, Jasmine, Neelkanth Gardens, Govandi E, Mumbai 400088 |
|  | Legal Status of | NA |
|  | Country of Registration | NA |
|  | Registration Number | NA |
|  | Date of Contract | May 1, 2023 |
|  | Completion of Contract | March 31, 2024 |
|  | Name of Point of Contact | Diwakar |
|  | Contact No. / Email ID of Person to Contact | 9986001220 / sudha\_ramani@yahoo.com, sudha921@gmail.com |
|  | Name of the Project | HSTP-NHA |
|  | Type of Contract | AHI Part Time Consultant Contract |
|  | Grant Start Date | 14-Nov-19 |
|  | Grant End Date | 31-Mar-24 |
|  | Budget Line Item | Consultants |
|  | Available Budget | INR 20,000 per day for 4 working days in a month. |
|  | Service/ Goods Description | Consultant – Health Policy & Systems Research |
|  | Name of Approver of Contract | Himani Sethi/Dr. Krishna Reddy |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to | Sudha Ramani |
|  | Bank Name | CITI BANK |
|  | Account Number | 5161794227 |
|  | Bank Address | JEEVAN BHARTI BUILDING, 124, CONNAUGHT CIRCUS, NEW DELHI - 110001 |
|  | IFSC Code | CITI0000002 |
|  | Swift Code |  |
|  | PAN No | AFLPR6918N |