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| **ACCESS Health International Southeast Asia Ltd.** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Pham The Vinh |
|  | Address | 192 Huynh Van Banh, Ward 11, Phu Nhuan district, Ho Chi Minh City |
|  | Legal Status of | NA |
|  | Country of Registration | NA |
|  | Registation Number | NA |
|  | Date of Contract and Doc Ref No. | May 11, 2023 |
|  | Completion of Contract | December 29, 2023 |
|  | Type of Contract | Consultant |
|  | Name of Point of Contact | Rajvi |
|  | Contact No. / Email ID of Person to Contact | [(+84) 938188814 / phamthevinh.1967@gmail.com](mailto:phamthevinh.1967@gmail.com) |
|  | Name of the Project | CVD Alliance |
|  | Budget Line Item | Other Program Expenses |
|  | Available Budget | USD 5,000 |
|  | Service/ Goods Description | Consulting |
|  | Name of Approver of Contract | Rajvi Mehta Dalal |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to |  |
|  | Bank Name |  |
|  | Account Number |  |
|  | Bank Address |  |
|  | IFSC Code (Routing Number) |  |
|  | Swift Code |  |
|  |  |  |
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|  |  |  |
|  | **Submitted to** |  |
|  | **Name of the Person** | Rajvi Mehta Dalal |
|  | **Designation** | Operations Director |
|  |  |  |
|  |  |  |
|  | **Signature** |
|  | **Designation** |  |
|  | **Program Name** |  |
|  |  |  |
|  |  |  |
|  | **Date** | 10-May-23 |
|  | **Place** | Singapore |