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| **ACCESS Health International, INC** | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | |
|  | Name | Dr. Kameshwar Rao Punyamurtula |
|  | Address | 2704, Mohinder Apartments, Plot 17, Sector 12, Dwarka, New Delhi, 110075 |
|  | Legal Status of | NA |
|  | Country of Registration | NA |
|  | Registration Number | NA |
|  | Date of Contract | August 1, 2023 |
|  | Completion of Contract | July 31, 2024 |
|  | Name of Point of Contact | Diwakar |
|  | Contact No. / Email ID of Person to Contact | +91 9823125915/vizykam@hotmail.com |
|  | Name of the Project | HSTP-NHA |
|  | Type of Contract | AHI Consultant Contract |
|  | Grant Start Date | 14-Nov-19 |
|  | Grant End Date | 31-Mar-24 |
|  | Budget Line Item | External Consultants |
|  | Available Budget | INR 20,000 per day working for 11 days in a month |
|  | Service/ Goods Description | Consultant |
|  | Name of Approver of Contract | Dr. Krishna Reddy |
|  |  |  |
| **Bank Details** | | |
|  | Please make payment to |  |
|  | Bank Name |  |
|  | Account Number |  |
|  | Bank Address |  |
|  | IFSC Code |  |
|  | Swift Code |  |
|  | PAN No |  |