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| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Nidhi Rastogi |
|  | Address | | 150b, 3rd Floor, Jeewan Nagar, Ashram, New Delhi 110014 |
|  | Legal Status | | NA |
|  | Country of Registration | | NA |
|  | Registration Number | | NA |
|  | Date of Contract | | 22 Aug 2023 |
|  | Completion of Contract | | 25 Aug 2023 |
|  | Name of Point of Contact | | Himani |
|  | Contact No. / Email ID of Person to Contact | | +91 9811921715, nidsrastogi@gmail.com |
|  | Name of the Project | | State Engagement |
|  | Budget Line Item | | Short term Consultant |
|  | Available Budget | | Total INR 35,000 for the entire assignment |
|  | Service/ Goods Description | | Graphic designer for creating the AV on the Patient Support System for the August 25th event. |
|  | Name of Approver of Contract | | Dr. Krishna Reddy |
|  |  | |  |
| **Bank Details\*** | | | |
|  | Please make payment to |  | |
|  | Bank Name |  | |
|  | Account Number |  | |
|  | Bank Address |  | |
|  | IFSC Code |  | |
|  | Swift Code |  | |