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| --- | --- | --- | --- |
| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Munesh Gaur |
|  | Address | | RZ-173/2, Street No-04, Durga Park, New Delhi -110045, India |
|  | Legal Status of | | India |
|  | Country of Registration | | India |
|  | Registration Number | | NA |
|  | Date of Contract | | 8-February-24 |
|  | Completion of Contract | | 7- February -26 |
|  | Name of Point of Contact | | Biswajeet Chatterjee |
|  | Contact No. and Email ID of Person to Contact | | 9811800897, muneshgaur@gmail.com |
|  | Name of the Project | | India Overhead |
|  | Type of Contract | | AHI Consultant Contract |
|  | Grant Start Date | | NA |
|  | Grant End Date | | NA |
|  | Budget Line Item | | Consultants |
|  | Available Budget | | INR 1,500,000 per annum (INR 125,000 per month) |
|  | Service/ Goods Description | | Manager - Legal, Procurement and Administration |
|  | Name of Approver of Contract | | Dr. Reddy |
|  |  | |  |
| **Bank Details** | | | |
|  | Please make payment to |  | |
|  | Bank Name |  | |
|  | Account Number |  | |
|  | Bank Address |  | |
|  | IFSC Code |  | |
|  | Swift Code |  | |
|  | PAN No |  | |