1	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi - 110020	PIC of the free lance
This is to certify that conducting interviews Research Data by N	Executive Name: DIPANKAR BASO Mobile No.: 0830603916 Mobile No.: 0830603916	(Card Holder's Signature)
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Α	7221	21111	1011		

W. 1903 113 11 11 11 11 11 11 11 11 11 11 11 1	20040745	Freelancer Code: M & KOLF 2013 -000
Freelancer Name KALY BY KRGA	6\$11 Job No: 20 2 (4-21-75734) Request	Reference No:
House Address	The state of the s	Date: 29/7/2024
130/10. B.S. 8000	Fieldwork Location: Research Study Restriction Medical Aesthetic Restriction Total Treatments	
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Behalor. 34	and their tasks Ismerson by an entry transmit and	using anneal and and and and a second and an analysis

This has reference to the discussion we had with you regarding the assignment pertaining to the captioned subject matter and explained in

detail at the project briefing which you had attended on. We now offer you fees for the assignment and other associated fees as mentioned hereunder, on the terms and conditions mentioned below and overleaf.

(A) Fees for Assignment:

Data Collection Type	Segment - Center	Quantity (Nos)	Rate Rs. (Per Qty)
offline	Kolkata		5001
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The above stated assignment will start from 20 and end on 20 The completed assignment should be delivered in required numbers/quantity through the device handed over to you for the data collection task in complete quantity and data be synced on daily basis so that data collected in the device is sent directly into the secured server. The device location should be always in active and GPS be captured live as communicated at the above stated briefing. Non-Compliance of agreed schedule may result in non-acceptance and may to rejection of the assignment in part/full without any further reference/intimation to you. This is not an employment but merely an assignment to you as a freelancer, and you are free to pursue any other vocation of your choice or work for any other person, and that no request from you for permanent/temporary employment in the Company shall be entertained in future. The Company reserves its right to terminate your assignment without showing any reason thereof.

I solemnly declare the information mentioned herein (both sides of the page) is true and correct to the best of my beliefs and I agree with all terms and conditions.

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Date: 29/7/2024	Signed in the presence of:
Name of signee: Kalyun Ko Ghosh.	1) Witness Name: Dipankon Base
그 일반 1일 - 전 - 그리는 경반 그는 이번 아버리는 바람이 이번에 가장한 경우 회에 아내면 경기를 내려왔다면 화면 가장 이번 중에 되었다.	Contact number: <u>9830603916</u>
y vitan. I teorotese, egi ambonjenen sed segeregi di e nevesadi sanco su rispya. Egis yerigi. Abses trove itali bodopolare pronded Missasson, sidi almojiro ezi rispyasen giripyaga yerigi.	Signature: D. Basu.
Signature: Karyankor Cherch	2) Witness Name: Goutaro Sark
and the second of the second o	Contact number: 983042491
	Signature:

W 17									7
From Name of the Freelancer:- KAL Address:- 13ののらら、 Mobile No:- 9の7	YAN K Rood P	R GH Sebel 39	1054 1 ₀ , lw	1-34					
7367			В						1
				For (Commerci	al Use:			
Customer's Name & Address To: MARKET XCEL DATA MATE P-36 Ground Floor, Gariahat Road, South Dha [Near Dhakuria Electricit Distribution Station (PAN No.: AAECM5086D	kuria, CESC), Kolkata	3-700031		Bill No: 24939 Date: 121812814					
Toward	s my Cha	rges/Fe	esaga	inst As	signmen	t/sstate	d bel	ow:	
Job No: 20240745			Oi	Original Assignment Number and Date			Revised Assignment		Quantity And Amount Payble
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3- Main interview -			_						
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Other Fees/Charges	, H (44)		T .		1				
Supervision Charges Executive Name: TAPPM	KAR	BAS	313						
EIC Employee ID: Date: Signat		3 41	319	D.	Bar				
Totals FIVE HUND		30	ly.						
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Assignment Number Job No. Segment Centre	Date Collection Type	Quantity Subn	Synched/ nitted		Rejectedby greed by me	Invoice Q Accep		Quantity Paidinthis Invoice	Quantity Payable in Subsequent Invoices
To In Shear North	Politib	1				١		ł	1
I solemnly declare the information mentioned here My PAN Account Number is: $A \otimes R$ Beneficiary Bank Account Name: R Beneficiary Bank Account Number:	G 441	7G KUM	ASL. O	SHACI	Benefic	cia r y Bar	ık Nam	e: AxIS B :UTIB00	ANK
(Signature & Date) 178	7 -			y with da	12/8/21 ate	92 ¹⁴	-	eceived On: hecked & Cleare	d On:

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