Name of the Freelancer:- Albertaddress: Jangilua Luc Mobile No:-	shelckus.	m			39		
Mobile No:- 70502270	3	BIL	L			17.4	
Customer's Name & Address To: MARKET XCEL DATA MATR House No.151, Sec 20, Near CNS Hospital, Ind Lucknow - 226016 PAN No.: AAECM5086D	POSSON MARKETON MARKE	For Commercial Use: Bill No: 35181 Date: 135181 Freelance Code: 10XLX oF 2013 - 295					
Towards	s my Charges/	Feesagain	st As	signment			
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Dear Sir/Madam,

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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)	
	Luckton	5	200	
A TOTAL PROPERTY OF	the leaves on bridge of his work received		To restrict to	

The above stated assignment will start from graph and end on formula and end on formula 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.

Date: 8/5/24

Name of signee: Ablighate Kuban

Signature: Must

Signed in the presence of:

1) Witness Name:

Contact number:

Signature:

2) Witness Name:

Contact number:

Signature: