

From  
Name of the Freelancer:- Divvi Sai  
Address:- 53-6-11, Maddilafalem, Ramalingam, VDA  
Mobile No:- 9515347514

## BILL

Customer's Name & Address  
To : MARKET XCEL DATA MATRIX PVT. LTD.  
No. 15, 1st Floor, AA Road, Kasturi Bai Gandhi Nagar,  
Perambur, Chennai - 600011  
PAN No.: AAECM5086D

For Commercial Use:

Bill No: 4784  
Date: 10/10/24  
Freelancer Code: 1005649

Towards my Charges/Fees against Assignment/stated below:

Job No:	Original Assignment Number and Date	Revised Assignment Number and Date	Quantity And Amount Payable
Job Title: UC census data			
Fieldwork Locations: Andhra Pradesh			

### Fees for Assignment

Data Collection Type & Segment	Quantity	Rate	Amount
1- Briefing charges			
2- Recruitment/Contact/Listing			
3- Main Interview - Free Lamer	616	30	18480/-
4- Main Interview-			
5- Moderation/Translation/Transcription/Others (Specify).....			

### Other Fees/Charges

Supervision Charges			
Executive Name: M-Omega Lamer			
EIC Employee ID: Date: Signature: mx096			

### Totals

A) Fees for Assignemt	Job No.	Task Code	Amount:- 18480/-
B) Supervision Charges			Amount:- 18480/-

Grand Total (A+B) For Net Payment

Rupees in Words: Eighteen Thousand Four hundred and fifteen only

### Summary

Assignment Number	Job No.	Segment	Centre	Date Collection Type	Quantity Synched/ Submitted	Quantity Rejectedby IQC and Agreed by me	Invoice Quantity Accepted	Quantity Paidinthis Invoice	Quantity Payable in Subsequent Invoices
	8024 0730		A-P	manu	616	0	616	616	0

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.

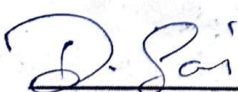
My PAN Account Number is: H20PD3390D

Beneficiary Bank Account Name: Divvi Sai

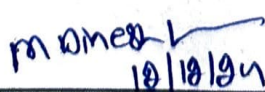
Beneficiary Bank Account Number: 8011 8956 391

Beneficiary Bank Name: 888 Bank

Beneficiary IFSC Code: 888IN 000 6057



(Signature & Date)


  
10/10/24

Approved by with date

Bill Received On:

Bill Checked & Cleared On:



	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: <u>M. Pooja Kumar</u> Mobile No.: <u>9700240011</u>	PIC of the freelancer
	This is to certify that <u>Divvi Sai</u> registered with us as a freelance supplier for conducting interviews and collecting data. He/She has been authorized to collect Market Research Data by Market Xcel as per project specific Assignment Letter. Reference No: <u>10/10/24</u> Valid From: <u>24-9-24</u> to <u>10-10-24</u> Job Fieldwork Location: <u>Vizag</u> Mobile No: <u>9515347514</u> Address: This Authority Card is issued on the specific request of the freelance supplier to facilitate in his/her assignment.	
		(Card Holder's Signature)

### Assignment letter

Freelancer Name <u>Divvi Sai</u> House Address <u>53-6-19, Madhavi Palam, Ramajalam, Vizag</u>	Job No: <u>2240730</u> Job Title: <u>CC census 2240</u> Fieldwork Location: <u>Andhra Pradesh</u>	Freelancer Code: <u>1095649</u> Reference No: Date: <u>10/10/24</u>
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Dear Sir/Madam,

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)
Field	Andhra Pradesh	616	30

The above stated assignment will start from 24-9-24 and end on 10-10-24. 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.

Date: 12-12-24

Name of signee: Divvi Sai

Divvi Sai  
Signature:

Signed in the presence of:

1) Witness Name: M. Pooja Kumar

Contact number: 9700240011

Signature: M. Pooja Kumar

2) Witness Name: Shaili Saleem


Contact number: 8686648264

Signature: Shaili Saleem



PLEASE PRINT OR TYPE CLEARLY. SIGNATURE USED MUST BE IN BLOCK LETTERS.

acc = Account name	CB = Cash	pr = Principal
ad = Addressee/agent	dep = Deposit	pro = Profit
amt = Amount paid	dt = Draft	rd = Register
an = Address/amount	dst = Debit	rt = Return
ba = Balance	dr = Debit	sb = Savings
cap = Capital/amount	dch = Date of birth	sc = Short
chg = Change	et = Electronic transfer	sv = Savings
chk = Cheque	imp = Import	svs = Savings
cl = Customer Information	ins = Insurance	svs/sv = Savings
col = Closure	int = Interest	svs/sv/sv = Savings
col = Collection	int = Interest	svs/sv/sv = Savings
com = Commission	int = Interest	svs/sv/sv = Savings
cor = Correction	int = Interest	svs/sv/sv = Savings
cr = Credit	int = Interest	svs/sv/sv = Savings



Signature: *[Signature]*

Stamp: *[Circular stamp with text]*



Branch: SHANTIPURM, VISAKHAPATNAM  
STATE BANK OF INDIA  
1 BANK LTD  
Email: sbi.060576sbi.co.in  
Phone No: 3549835  
PSC: SBIN006057

Code: 6057

BUSS: HTS:10:00:00-16:00:00  
MISC: 530002023

NAME: DIVY SAI  
S/N/H/A: SHINIVASA PAO  
A/C Number: SB15028260  
Account No.: 2012950391  
A/C Type: REGULAR SAVINGS BANK ACCOUNT  
Address: 11/10-5-6-19,  
MAHOLIAPATNAM  
VISAKHAPATNAM  
Phone No: 09413646343

MOD: SINGLE  
A/C Opening Dt: 06/03/2013  
Nom Key No: 0000000053536040  
Customer's PAN:  
Date of Issue: 07/03/2022  
CONTINUATION

*D. Sai*





भारत सरकार  
GOVERNMENT OF INDIA

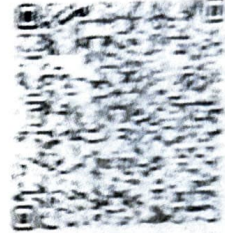


డిवि सै

Divvi Sai

DOB: 25-11-1993

Gender: Male



4758 8910 1991

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

S/o Divvi Srinu Late, 53-6-19,  
मदिलपलेम, रामलयेम,  
विशखपट्टनम अर्बन, पी & टी  
(वि एम), विशखपट्टनम अर्बन,  
विशखपट्टनम, अंध्र प्रदेश, 530013

Address:

S/o Divvi Srinu Late, 53-6-19,  
Maddilapalem, Ramalayam,  
Visakhapatnam (urban), P & T  
Colony (vm), Visakhapatnam  
(urban), Visakhapatnam, Andhra  
Pradesh, 530013



1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

P.O. Box No. 1947,  
Bangalore-560 001

D. Sai



# आयकर विभाग

INCOME TAX DEPARTMENT

भारत सरकार

GOVT. OF INDIA



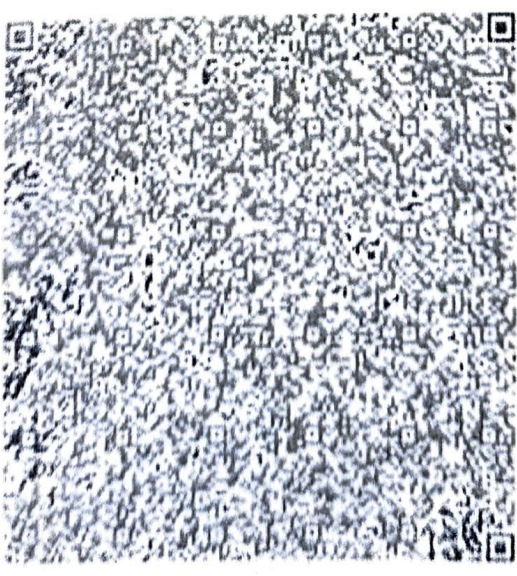
नाम / Name  
DIVVI SAI

पिता का नाम / Father's Name  
SRINU DIVVI

जन्म की तारीख /  
Date of Birth  
25/11/1993

स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

HQOPD3390D



15022022

P. Sai

हस्ताक्षर / Signature

P. Sai