

Name of the Institution:
Address:
Mobile No:

Free Commercial Use

To: MARKET XCEL DATA MATRIX PVT. LTD.
 Plot No. 501, Sector No. 1-B, Phase IV, 60 Feet Road, Mohali (Punjab)
 Dist. Sahibzada, Punjab, India. Gurgaon, Haryana, INDIA
 Pin No. 1403010001

Date _____

Frederick C. Davis

26580

05/10/24

Towards my Charges/Free against Assignment stated below:

Job No.	Original Assignment Number and Date	Revised Assignment Number and Date	Quantity and Amount Payable
224144			

44-38861-10000 Black and White photo

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

Data Collection: Type 2 Segment

Quantity

Safe

Amount

[Illegible handwritten text]

Journal of Management Education 30(6)

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 84

1000 1000 1000 1000

4. Non-union Transitory Transitory Effects

Author Note: Correspondence should be addressed to Dr. Robert C. Thompson, Department of Psychology, University of North Carolina at Chapel Hill, 101 South Chapel Hill, NC 27599-3290. E-mail: rct1@unc.edu

Supervision (100%)

Executive Name:

EBC Employee ID: Date: Signature:

Yuzhen

A: Steps for Assignment

Yes No



2000

Dr. Lawrence A. Meyer

2000

Grand Total (A+B) For Net Payment

Supplies of water

Summary

| Assignment Number | Job No. | Segment | Order | Date Collection Due | Quantity Submitted | Quantity Accepted by me | Invoice Quantity Accepted | Quantity Paid in this Invoice | Quantity Payable in Subsequent Invoices |
|-------------------|---------|---------|-------|---------------------|--------------------|-------------------------|---------------------------|-------------------------------|---|
|-------------------|---------|---------|-------|---------------------|--------------------|-------------------------|---------------------------|-------------------------------|---|

| | | | | | | | | |
|------|----|----|-----|----|---|----|----|----|
| 2019 | 71 | 68 | CAN | le | 4 | 06 | 06 | 06 |
|------|----|----|-----|----|---|----|----|----|

submitting this information, you warrant that the data is true and correct to the best of my belief and I agree with all terms and conditions.

My FAN Account Number is:

Beneficiary Bank Account Name:

Specialized Bank Account Number

502

Disability Rank Name


Sanitation FSC Case

2010 年 12 月 10 日

~~Page 1 of 1~~

Signature & Date:

Agreement to publish with the publisher

| | | |
|--|---|---------------------------|
|  | 17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020
Executive Name: <u>Satyanarayana</u>
Mobile No.: <u>81212503739</u> | PIC of the freelancer |
| | This is to certify that <u>Ramesh</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: _____
Date of Issue: <u>19/9/24</u> Valid From: <u>20/9/24</u> to <u>14/10/24</u> Job Fieldwork Location: <u>Hyd</u> Mobile No: <u>2675022552</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>Ramesh</u>
House Address: <u>Uppal</u> | Job No: <u>20240924</u>
Job Title: <u>Brand health study</u>
Fieldwork Location: <u>Hyd for BIC</u> | Freelancer Code: _____
Reference No: _____
Date: <u>19/9/24</u> |
|---|---|---|

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) |
|----------------------|------------------|----------------|--------------------|
| <u>Ramesh</u> | <u>6 Hyd</u> | <u>6</u> | <u>78.20</u> |
| | | | |

The above stated assignment will start from 20/9/24 and end on 14/10/24. 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: 19/9/24

Name of signee: Ramesh

Signature: Ra

Signed in the presence of:

1) Witness Name: Bindhu

Contact number: 9533044298

Signature: B

2) Witness Name: _____

Contact number: _____

Signature: _____

From
Name of the Freelancer:- Bindhu
Address:-
Mobile No:-

BILL

Customer's Name & Address

To : MARKET XCEL DATA MATRIX PVT. LTD.

Flat No.301, Hosue No. 3-6-269/301, 4th Floor, MYM Money Center ,

Opp. Telugu Academy, Himayathnagar, Hyderabad -500029

PAN No.: AAECM5086D

For Commercial Use:

Bill No:

26578

Date:

Freelancer Code:

25/10/24

Towards my Charges/Feesagainst Assignment/sstated below:

| Job No: | Original Assignment Number and Date | Revised Assignment Number and Date | Quantity And Amount Payble |
|----------------------------------|-------------------------------------|------------------------------------|----------------------------|
| 20240924 | | | |
| Job Title: Branding Health Study | | | |
| Fieldwork Locations: Hyd | | | |

Fees for Assignment

| Data Collection Type & Segment | Quantity | Rate | Amount |
|---|----------|------|--------|
| 1- Briefing charges | | | |
| 2- Recruitment/Contact/Listing | | | |
| 3- Main interview - | 11 | 7820 | 860 |
| 4- Main interview- | | | |
| 5- Moderation/Translation/Transcription/Others (Specify)..... | | | |

Other Fees/Charges

Supervision Charges

Executive Name: Sathyanarayana

EIC Employee ID: Date: Signature: MR 2275, 25/10/24, R. S. S.

Totals

| | | | |
|------------------------|---------|-----------|--------------|
| A) Fees for Assignemt | Job No. | Task Code | Amount:- |
| | | | |
| B) Supervision Charges | | | Amount:- 860 |

Grand Total (A+B) For Net Payment

Rupees in Words: Eight hundred and eighty 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 |
|-------------------|-----------|---------|--------|----------------------|-----------------------------|--|---------------------------|-----------------------------|---|
| | 2024 0924 | I-T | Hyd | CAP1 | 15 | 4 | 11 | 11 | 11 |

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:

Beneficiary Bank Account Name: Bindhu Sreeni

Beneficiary Bank Name: ~~BA~~ Indian Bank

Beneficiary Bank Account Number: 7489663256

Beneficiary IFSC Code: IDIB000DS49


E&OE

Bill Received On:

Bill Checked & Cleared On:

(Signature & Date)

Approved by with date

| | | |
|--|---|------------------------------|
|  | 17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020
Executive Name : <u>P. Satyanarayana</u>
Mobile No. : <u>812523739</u> | PIC of the freelancer |
| | This is to certify that <u>Bindhuchoe</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: _____
Date of Issue: <u>19/9/24</u> Valid From: <u>20/9/24</u> to <u>14/10/24</u> Job Fieldwork Location: <u>Hyd</u> Mobile No: <u>9532044298</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>Bindhuchoe</u>
House Address <u>Kothapet</u> | Job No: <u>20240924</u>
Job Title: <u>Brand health</u>
Fieldwork Location: <u>Hyd Study for Talk</u> | Freelancer Code: _____
Reference No: _____
Date: <u>19/9/24</u> |
|--|--|---|

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) |
|----------------------|------------------|----------------|--------------------|
| <u>CAP I</u> | <u>Hyd</u> | <u>11</u> | <u>78.20</u> |
| | | | |

The above stated assignment will start from 20/9/24 and end on 14/10/24. 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: 19/9/24

Name of signee: Bindhuchoe

Signature: 

Signed in the presence of:

1) Witness Name: Srinivas

Contact number: 8886036625

Signature: 

2) Witness Name: _____

Contact number: _____

Signature: _____

From
Name of the Freelancer:- *Srinivas*
Address:- *Kottapalli*
Mobile No:- *886026625*

BILL

Customer's Name & Address
To : MARKET XCEL DATA MATRIX PVT. LTD.
Flat No.301, Hosue No. 3-6-269/301, 4th Floor, MYM Money Center ,
Opp. Telugu Academy, Himayathnagar, Hyderabad -500029
PAN No.: AAECM5086D

For Commercial Use:

Bill No: **26576**
Date: *28/10/24*
Freelancer Code:

Towards my Charges/Fees against Assignment/s stated below:

| Job No: | Original Assignment Number and Date | Revised Assignment Number and Date | Quantity And Amount Payble |
|--|-------------------------------------|------------------------------------|----------------------------|
| <i>2024 0924</i> | | | |
| Job Title: <i>Brand Executive for talk</i> | | | |
| Fieldwork Locations: <i>Hyd</i> | <i>8th</i> | | |

Fees for Assignment

| Data Collection Type & Segment | Quantity | Rate | Amount |
|---|-----------|--------------|-------------------|
| 1- Briefing charges | | | |
| 2- Recruitment/Contact/Listing | | | |
| 3- Main interview - | <i>13</i> | <i>88.20</i> | <i>1016 = 60.</i> |
| 4- Main interview- | | | |
| 5- Moderation/Translation/Transcription/Others (Specify)..... | | | |

Other Fees/Charges

| | | | |
|---------------------|--|--|--|
| Supervision Charges | | | |
|---------------------|--|--|--|

Executive Name: *R. Subramanyam*

EIC Employee ID: *MB2225* Date: *28/10/24* Signature: *R. Sub*

Totals

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

Grand Total (A+B) For Net Payment *1016 = 60.*

Rupees in Words: *One Thoush Sinter rupees 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 |
|-------------------|------------------|------------|------------|----------------------|-----------------------------|--|---------------------------|-----------------------------|---|
| <i>15</i> | <i>2024 0924</i> | <i>Int</i> | <i>Hyd</i> | <i>Comp</i> | <i>13</i> | <i>-</i> | <i>13</i> | <i>13</i> | <i>13</i> |

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:

Beneficiary Bank Account Name: *Srinivas*

Beneficiary Bank Account Number: *20166146540*

E&OE

Beneficiary Bank Name: *SBI*


Beneficiary IFSC Code: *SBI00015882*

Bill Received On:

Bill Checked & Cleared On:

(Signature & Date)

Approved by with date

| | | |
|--|--|---------------------------|
|  | 17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi - 110020
Executive Name: <u>Satyanarayana</u>
Mobile No.: <u>81212503739</u> | PIC of the freelancer |
| | This is to certify that <u>Srinivas</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: _____
Date of Issue: <u>19/12/24</u> Valid From: <u>20/12/24</u> to <u>1/1/25</u> Job Fieldwork Location: <u>Hyd</u> Mobile No: <u>888603685</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>Srinivas</u>
House Address <u>Kothapet</u> | Job No: <u>20240924</u>
Job Title: <u>Brand Specialist</u>
Fieldwork Location: <u>Hyd</u> | Freelancer Code: _____
Reference No: _____
Date: <u>19/12/24</u> |
|--|---|--|

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) |
|----------------------|------------------|----------------|--------------------|
| <u>CAT I</u> | <u>Hyd</u> | <u>13</u> | <u>78.20</u> |
| | | | |

The above stated assignment will start from 20/12/24 and end on 1/1/25. 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: 19/12/24
 Name of signee: Srinivas

Signature: [Signature]

Signed in the presence of:

1) Witness Name: Binchu
 Contact number: 983044298
 Signature: [Signature]
 2) Witness Name: _____
 Contact number: _____
 Signature: _____

From
Name of the Freelancer:- P. Abhi Sheela
Address:- Kottayam
Mobile No:- 630 984 8409

BILL

Customer's Name & Address
To : MARKET XCEL DATA MATRIX PVT. LTD.
Flat No.301, Hosue No. 3-6-269/301, 4th Floor, MYM Money Center ,
Opp. Telugu Academy, Himayathnagar, Hyderabad -500029
PAN No.: AAECM5086D

For Commercial Use:

Bill No: 26577
Date: 25/10/24
Freelancer Code:

Towards my Charges/Fees against Assignment/s stated below:

| Job No: | Original Assignment Number and Date | Revised Assignment Number and Date | Quantity And Amount Payable |
|--|-------------------------------------|------------------------------------|-----------------------------|
| 20240924 | | | |
| Job Title: Broad based study for title | | | |

Fieldwork Locations: Hyderabad

Fees for Assignment

| Data Collection Type & Segment | Quantity | Rate | Amount |
|---|----------|------|--------|
| 1- Briefing charges | | | |
| 2- Recruitment/Contact/Listing | | | |
| 3- Main interview - | | | |
| 4- Main interview- | | | |
| 5- Moderation/Translation/Transcription/Others (Specify)..... | | | |

Other Fees/Charges

Supervision Charges 100 17 1700 = 0

Executive Name: R. Srinivasan

EIC Employee ID: Date: Signature: 25/10/24, RS

Totals

| | | | |
|------------------------|---------|-----------|----------|
| A) Fees for Assignemnt | Job No. | Task Code | Amount:- |
| | | | |
| B) Supervision Charges | | | Amount:- |

Grand Total (A+B) For Net Payment

Rupees in Words:

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 |
|-------------------|-----------|---------|--------|----------------------|-----------------------------|--|---------------------------|-----------------------------|---|
| 12 | 2024 0824 | Capri | Hyd | Capri | 100 | 20 | 100 | 100 | 100 |

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:

Beneficiary Bank Account Name: P. Abhisheela

Beneficiary Bank Account Number: 7154893190

E&OE

Beneficiary Bank Name: Indus Blue


Beneficiary IFSC Code: IDIB000D549

Bill Received On:

Bill Checked & Cleared On:

(Signature & Date)

Approved by with date

| | | |
|---|---|---------------------------|
|  | 17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi - 110020
Executive Name: <u>R. Satyanarayana</u>
Mobile No.: <u>81212503233</u> | PIC of the freelancer |
| | This is to certify that <u>Abhishek</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: _____
Date of Issue: <u>19/9/24</u> Valid From: <u>20/9/24</u> to <u>14/10/24</u> Job Fieldwork Location: <u>MYD</u> Mobile No: _____ 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>Abhishek</u>
House Address: <u>Kothapet</u> | Job No: <u>20240924</u>
Job Title: <u>Brand health</u>
Fieldwork Location: <u>Study for talc</u> | Freelancer Code: <u>19/9/24</u>
Reference No: <u>19/9/24</u>
Date: _____ |
|--|--|--|

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) |
|----------------------|------------------|----------------|--------------------|
| <u>CAP 2</u> | <u>MYD</u> | <u>100</u> | <u>17</u> |
| | | | |

The above stated assignment will start from 20/9/24 and end on 14/10/24. 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:

19/9/24

Name of signee:

Abhishek

Signature:

Abhishek

Signed in the presence of:

1) Witness Name:

Bindhu Ganes

Contact number:

9533044298

Signature:

[Signature]

2) Witness Name:

Contact number:

Signature: