marketycel	Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020  MM PP DAS G1 +105 H  GM
conducting interviews and collecting data Research Data by Market Xcel as per	registered with us as a freelance supplier for He/She has been authorized to collect Market roject specific Assignment Letter. Reference No: Valid From: 25/06/2 to 8/6/2 y Job Fieldwork 9000059 Address! This Authority Card is issued on ofacilitate in his/her assignment.
	(Card Holder's Signature)

## Assignment letter

Freelancer Name Sampar Das
House Address VTC . P. 0 - Amdo 1,
vimpuz Birbhum
73121

Job No: 202404123 Job Title: SIGMA
Fieldwork Location:
Asamsole W,09

Freelancer Code: MX KOLP 2024-0396
Reference No:
Date: 20/06/2024

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	H.H /W.B	30	851
		V 61 11	

The above stated assignment will start from 25/6/2 and end on 8/2 hy. 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:	20/6	12024		37
Name o	fsignee:	San	pa Z	>00
AND INC.	الا البيالات الدور الأسير التوليات			
Signatu	ire: \$	ampa	Den	

Signed in the presen	ce of:
1) Witness Name:	Norm & Gharle
Contact number:	1674477664
Signature:	The state of the s
2) Witness Name:	Dipankon Baro 983063916
Contact number:	<u>9830663916</u>
Signature:	U-Bar

rom ame of the Freelancer:- SAM ddress:- VTC, AMdol, VI lobile No:- 70290056	PADAS nugmi	3 is bhu	m 73	124			
		BI	LL		TI JAME		
ustomer's Name & Address	IV DVT LTD			mercial	Use:	2007 113 2007 112	Y
O: MARKET XCEL DATA MATRI -36 Ground Floor, Gariahat Road, South Dhaki istribution Station (CESC), Kolkata-700031 AN No.: AAECM5086D h.: +91-033-40076389	uria, Near Dhakui	na Electrici	Bill No: Date: 7	er Code	MXK		4-0396
Towards	my Charge	s/Feesagal	nst Assign	nment/s	stated belo	w:	
Job No: 202404123		Or	Original Assignment Number and Date		Revised	Assignment er and Date	Quantity And Amount Payble
ob Title: SIGMA							
ieldwork Locations:	Bengul	· ·					
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Data Collection Type & Segment		Qu	antity	Rate		Amount	
1- Briefing charges						·	
2- Recruitment/Contact/Listing						0.65.1.5	
3- Main interview -		1	5	85	1 2	75.ca	
4- Main interview-							
5- Moderation/Translation/Transc (Specify)	ription/Others						
Other Fees/Charges							
Supervision Charges	NA.						
Executive Name: Sum	11 T G	nHost	<b>)</b>				
EIC Employee ID: Date: Signat		1x 71	3			10 7 60	<b>1</b>
Totals				14		1275.	06
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7, 100 10. 1.03.3	20240412	13		*			
D) Commission Charges			Amoun	t:-			
B) Supervision Charges	1	Grand			Net Payme	nt	<del></del>
				<del>1</del>	1 1		Pare onl
Rupees in Words: ONE H	rouser	st to	vo m	mds	ned d	arenty	Myc Sic
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Assignment Number Job No. Segment Centr	e Collection Type	Quantity Synched/ Submitted		ectedby	Invoice Quantity Accepted	Quantity Paidinthis Invoice	Quantity Payable in Subsequent Invoices
20240 H.H Wis	3 H. H	30	-	3	15	15	
I solemnly declare the information mentioned her My PAN Account Number is: Beneficiary Bank Account Name: Seneficiary Bank Account Number:	AMPA	DAC		Benefici	ary Bank Nam	e: UNION	
E&OE			Bill Received On:  Bill Checked & Cleared On		and the state of t		
Sampadan		8				Checked & Clear	ed On: