

From: market xcel Data matrix
 Name of the Freelancer:- Dipali Gramare
 Address:- 304/1/3 Floor Swarali Apt Darshem nagar manvel virar (E)
 Mobile No:- 8468901180

BILL

Customer's Name & Address
To : MARKET XCEL DATA MATRIX PVT. LTD.
 204-207, 2nd Floor Ashok Premises, Nicholas Wadi Circle Road, Nicholas Wadi,
 Near Tiwari Chaiwala, Andheri East Mumbai-400069
 PAN No.: AAECM5086D

For Commercial Use:
 Bill No:
 Date: 10/11/23 34833
 Freelancer Code: mxmumf-2023-0383

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
20240927			
Job Title: Tobacco Track Phase 4			

Fieldwork Locations: Mumbai

Fees for Assignment

Data Collection Type & Segment	Quantity	Rate	Amount
1- Briefing charges			
2- Recruitment/Contact/Listing	7	200	1400
3- Main interview -			
4- Main interview-			
5- Moderation/Translation/Transcription/Others (Specify).....			

Other Fees/Charges

Supervision Charges

Executive Name: Abhishek Chavan

EIC Employee ID: Date: Signature: mx2271 10/11/25 

Totals

A) Fees for Assignemt	Job No. 20240927	Task Code	Amount:- 1400
B) Supervision Charges			Amount:-

Grand Total (A+B) For Net Payment

Rupees in Words: One Thousand Four Hundred 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
	20240927	EDI	Mumbai	Online					

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: EBKPG10492R
 Beneficiary Bank Account Name: Dipali Gramare
 Beneficiary Bank Account Number: 9147300677
 E&OE

Beneficiary Bank Name: Kotak Bank
 Beneficiary IFSC Code: KKBK0001389

 (Signature & Date)	 Approved by with date	Bill Received On: _____ Bill Checked & Cleared On: _____
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	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi - 110020 Executive Name: <u>Abhishek Chavan</u> Mobile No.: <u>8928286122</u>	PIC of the freelancer
	This is to certify that <u>Dipali Gamare</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>26/8/24</u> Valid From: <u>26/8/24</u> to <u>14/3/25</u> Job Fieldwork Location: <u>Mumbai</u> Mobile No: <u>8468901180</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>Dipali Gamare</u> House Address: <u>304/C/3 Floor Swarali APT Darshan Nagar Manve Road Virar (E)</u>	Job No: <u>20240927</u> Job Title: <u>Tobacco Track Phase 4</u> Fieldwork Location: <u>Mumbai</u>	Freelancer Code: <u>MXMUMF 2023-0383</u> Reference No: Date: <u>10/11/25</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)
<u>online</u>	<u>IDI - Mumbai</u>	<u>7</u>	<u>200</u>

The above stated assignment will start from 26/8/24 and end on 14/3/25. 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: 10/11/25

Name of signee: Dipali Gamare

Signature: Dipali

Signed in the presence of:

1) Witness Name: Abhishek Chavan

Contact number: 8928286122

Signature: Abhishek Chavan

2) Witness Name: _____

Contact number: _____

Signature: _____

From market xcel Data matrix
 Name of the Freelancer: - Priyanka Maruti Zedage
 Address: - Room No - 56 B.D.D. Chawl No-93 D.N. walsikar marg Mumbai-400018
 Mobile No: - 828534215

BILL

Customer's Name & Address
To : MARKET XCEL DATA MATRIX PVT. LTD.
 204-207, 2nd Floor Ashok Premises, Nicholas Wadi Circle Road, Nicholas Wadi,
 Near Tiwari Chaiwala, Andheri East Mumbai-400069
 PAN No.: AAECM5086D

For Commercial Use:
 Bill No: **34829**
 Date: 10/1/25
 Freelancer Code: mxmumf 2023-0188

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
<u>20240927</u>			
Job Title: <u>Tobacco Track Phase 4</u>			
Fieldwork Locations: <u>Mumbai</u>			

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	<u>1400</u>	<u>0.30</u>	<u>420</u>
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Executive Name: Abhishek chavan
 EIC Employee ID: MX2271 Date: 10/1/25 Signature: [Signature]

Totals

A) Fees for Assignemnt	Job No.	Task Code	Amount:-
B) Supervision Charges	<u>20240927</u>		Amount:- <u>420</u>

Grand Total (A+B) For Net Payment

Rupees in Words: Four Hundred Twenty 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
	<u>20240927</u>	<u>IDF</u>	<u>Mumbai</u>	<u>online</u>					


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: ABSP21438L
 Beneficiary Bank Account Name: Priyanka Maruti Zedage
 Beneficiary Bank Account Number: 013011100062748

Beneficiary Bank Name: Abhyudaya Bank
 Beneficiary IFSC Code: ABHY0065013

E&OE

<u>[Signature]</u> (Signature & Date)	<u>[Signature]</u> Approved by with date	Bill Received On: _____ Bill Checked & Cleared On: _____
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	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: <u>Abhishek Chavan</u> Mobile No.: <u>8928286122</u>	PIC of the freelancer
	This is to certify that <u>Priyanka Zedage</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>26/8/24</u> Valid From: <u>26/8/24</u> to <u>14/3/25</u> Job Fieldwork Location: <u>Mumbai</u> Mobile No: <u>8928534255</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>Priyanka Zedage</u> House Address <u>Room No -56</u> <u>B.D.D. Chowk No-93</u> <u>D.N. Waksikar Mumbai</u> <u>400018</u>	Job No: <u>20240927</u> Job Title: <u>Tobacco Track Phase 4</u> Fieldwork Location: <u>Mumbai</u>	Freelancer Code: <u>MXMUMF2023-0188</u> Reference No: Date: <u>10/11/25</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)
<u>Online</u>	<u>TDI - Mumbai</u>	<u>1</u>	<u>420</u>

The above stated assignment will start from 26/8/24 and end on 14/3/25. 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: 10/11/25

Name of signee: Priyanka Zedage

Signature: P.M. Zedage

Signed in the presence of:

1) Witness Name: Abhishek Chavan

Contact number: 8928286122

Signature: Abhishek

2) Witness Name: _____

Contact number: _____

Signature: _____