

	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: <u>A. Kathun Bae</u> Mobile No.: <u>7904173524</u>	PIC of the freelancer
	This is to certify that <u>Ashwini</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: _____ Valid From: <u>29/1/24</u> to <u>10/8/24</u> Job Fieldwork Location: <u>Chennai</u> Mobile No: <u>9790714494</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>Ashwini</u> House Address <u>Ottiyampakkam</u>	Job No: <u>20240796</u> Job Title: <u>GLB_Hem patient</u> Fieldwork Location: <u>Journey 2024</u> <u>Chennai</u>	Freelancer Code: <u>mcf2023-154</u> Reference No: _____ Date: <u>25/7/24</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)
<u>Qual</u>	<u>Pharma Chennai</u>	<u>1</u>	<u>200</u>
	<u>Supervision</u>	<u>1</u>	<u>60</u>

The above stated assignment will start from 29/1/24 and end on 10/8/24. 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:

Name of signee:

Signature:

Signed in the presence of:

1) Witness Name:

Contact number:

Signature:

2) Witness Name:

Contact number:

Signature:

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a term
ma

of the Freelancer:-
ess:-
ile No:-

Ashwin
9790114494

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: 32675

Date: 13/8/24

Freelancer Code: mxcf2023-154

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
20240796			

Job Title: GLB-Hcm patient journey 2024

Fieldwork Locations: Chennai

Fees for Assignment

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

Other Fees/Charges

Supervision Charges	1	60	60
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Executive Name:

A. Kathun

EIC Employee ID: Date: Signature:

mx1795 / 13/8/24 / A. Kathun

Totals

A) Fees for Assignemt	Job No.	Task Code	Amount:-
B) Supervision Charges			Amount:- 260/-

Grand Total (A+B) For Net Payment

Rupees in Words: Two hundred and sixty 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
	20240796	Chennai	Chennai	Qual	1	0	1	1	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: CPPPA3861M

Beneficiary Bank Account Name: T. Ashwin

Beneficiary Bank Account Number: 41926259403

E&OE

Beneficiary Bank Name: SB

Beneficiary IFSC Code: SBIN0013393

Bill Received On:

Bill Checked & Cleared On:

T. Ashwin

(Signature & Date)

Approved by with date