the specific request of ti	Mobile No. 9 44 967 S5 T Address: This Authority Card is issued on a freelance supplier to facilitate in his/her assignment.  Assignment letter	(Card Holder's Signature
	Estate, New Belhi, Delhi -110020  Estate, New Belhi, Delhi -110020  Mobile No. Tegistered with us as a freelance supplier for and collecting data. He/She has been authorized to collect Market arket Xcal as per project specific Assignment Letter. Reference No. Sue Valid From 1 2014 to 512 2014 fob Fieldwork Mobile No. 2014 1055 7 Address: This Authority Card is issued on a freelance supplier to facilitate in the facilitate	PIC of the freelancer

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)
Pharma	Pharma -Bangalote	02	250
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The above stated assignment will start from Independent of the device assignment will start from Independent 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.

1 1	
Date: 1/3/2024	Signed in the presence of:
Name of signee: P. K. Swesh kumal	1) Witness Name: Prathibha
P. P. Source	Contact number: 748 331 2433
	Signature: Prancy
Signature:	2) Witness Name: Smith G
Lateurs and It is not an in has anothingen has not associated by a	Contact number: 3449669097
	Signature: G. Smither

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Towards my Charges/Fee	esagair	ist As	signme	nt/sstate	ed be	low:	生 医双甲基 告证
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4- Main interview-							
5- Moderation/Translation/Transcription/Others (Specify)							
Other Fees/Charges							
Supervision Charges							
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30340194		A					
3) Supervision Charges		Amou					
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