

	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: <u>A. Kathun Bee</u> Mobile No.: <u>7904173542</u>	PIC of the freelancer
	This is to certify that <u>Harini</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: <u>711024</u> to <u>611124</u> Job Fieldwork Date of Issue: <u>7/11/24</u> Valid From: <u>7/11/24</u> to <u>6/11/24</u> Location: <u>Chennai</u> Mobile No: <u>9659618282</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>Harini</u> House Address: <u>3/128, Kudi Street</u> <u>Somur</u> <u>Karur</u>	Job No: <u>20241021</u> Job Title: <u>Erinome study</u> Fieldwork Location: <u>Chennai</u>	Freelancer Code: <u>MXCF2023-</u> Reference No: <u>135</u> Date: <u>07/10/24</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)
Pharma F2F	Chennai	10	175

The above stated assignment will start from 7/11/24 and end on 6/11/24. 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: 7/11/24

Name of signee: M. Harini

Signature: M. Harini

Signed in the presence of:

1) Witness Name: A. Kathun Bee

Contact number: 7904173524

Signature: A. Kathun

2) Witness Name: Vijayalakshmi

Contact number: 801666643

Signature: Viji

From
Name of the Freelancer:- Harini
Address:- 3/128, kudi street, Somur, barur.
Mobile No:- 9659678982

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: 06/10/2022
Date: 06/10/2022
Freelancer Code: MXCF2022-135

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>20241021</u>			
Job Title: <u>Eringome Study</u>			
Fieldwork Locations: <u>Chennai</u>			

Fees for Assignment

Data Collection Type & Segment	Quantity	Rate	Amount
1- Briefing charges			
2- Recruitment/Contact/Listing			
3- Main interview -	<u>10</u>	<u>175</u>	<u>1750</u>
4- Main interview-			
5- Moderation/Translation/Transcription/Others (Specify).....			

Other Fees/Charges

Supervision Charges

Executive Name: A. Kathun Bee

EIC Employee ID: MX1795 | Date: 8/11/24 | Signature: A. Kathun Bee | 1750/-

Totals

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

Grand Total (A+B) For Net Payment

Rupees in Words: Thousand Seven fifty 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 Paid in this Invoice	Quantity Payable in Subsequent Invoices
	<u>20241021</u>	<u>Pharma</u>	<u>Chennai</u>	<u>Field visit</u>	<u>10</u>	<u>0</u>	<u>10</u>	<u>10</u>	<u>0</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: ATVPIT7874D

Beneficiary Bank Account Name: Harini

Beneficiary Bank Account Number: 37116804179

E&OE

Beneficiary Bank Name: SBI

Beneficiary IFSC Code: SBIN0002285

M. Harini

(Signature & Date)

A. Kathun Bee

Approved by with date

Bill Received On:

Bill Checked & Cleared On: