| | Assignment letter | and a second or second or | | | | | | | |
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| | | (Card Holder's Signature | | | | | | | |
| 205 Date of Its | and collecting data. He/She has been authorized to collect Market sirket the last project specific hadgingent Letter Reference No: sue 3 Kerney Valid From: Address: This Authority Card is issued on the freelance supplier to facilitate in his/her assignment. | | | | | | | | |
| This is to certify that | Sayathelik registered with us as a freelance supplier for | | | | | | | | |
| marketxcel | narketxcel 17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Defhi, Defhi - 110020 Executive Name: Mobile No.: 9444669099 | | | | | | | | |

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) |
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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 | 9 | 2024 |
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| Name o | fsignee | C | 2024 rayathen K |
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Signed in the presence of:

1) Witness Name: Prattiubha 14

Contact number: 7483312433

Signature: Prattiubha 14

Contact number: 9449669097

Signature: 9449669097

Signature: 9449669097

| N. S. O. S. O. | | | | | | | | |
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| The Freelancer:- | ayathri | Re | am | May | gar | | | |
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| ARKET XCEL DATA MA 1, 2nd Floor, Lal Bagh Road, Old M 1, 2nd Flo | TRIX PVT. LTD. | | | | | | | |
| 71, 2nd Floor, Lal Bagh Road, Old N | Mission Compound, | | BIII | No: a - L | 12/1/2 |)54 | | |
| he Garuda Maruti Showroom, Bangai | lore - SOUUZI | | Date | lancer Co | ode:MX | 154 AMF 200 | 13-069 | |
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| Assignment Number Job No. Segment Centre | Date Collection Type Quantity Synt | THE RESERVE OF THE PARTY OF THE | out Qualitaty respectively | | Invoice Quantity Accepted | Quantity Paidinthis Invoice | Quantity Payable in Subsequent Invoices | |
| 01 20240 phay 1886 | pama gr. | Cest | Ago | sod . | Accept | ga | | |
| Legismaly declare the information mentioned herein | (both sides of the page) is tr | ue and co | rrect to th | ne best of my | beliefs and I agre | ee with all terms and co | nditions. | |
| 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: Beneficiary Bank Name: Beneficiary Bank Name: | | | | | | | | |
| Beneficiary IESC Code: | | | | | | | | |
| Beneficiary Bank Account Number: 10 70361923 | | | | | | | | |
| E&OE 0 7 | | | | | Bill F | Received On: | | |
| Bill Checked & Cleared On: | | | | | | d On: | | |
| (Signature & Date) Approved by with date | | | | | | | | |
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