From PARMA Name of the Presigners, AND F, NUTLAND ADDRESS:  No Bill L  Customer's Name & Address To: MARKET XCEL DATA MATRIX PVT. LTD. Rapin Nilly falous of Pray, F, 3 New Laul Tola, Behind CA Building, Pains-20001  Towards my Charges/Feesagalinst Assignment/Sstated below:  Towards my Charges/Feesagalinst Assignment/Sstated below:  Towards my Charges/Feesagalinst Assignment/Sstated below:  Towards my Charges/Feesagalinst Assignment/Stated below:  Towards my Charges/Feesagalinst Assignment/Stated below:  Presince Code: MyPATFDDU-200  Press for Assignment Number and Date  Revised Assignment Number and Date  Revised Assignment Number and Date  Amount  1 - Briefing charges 2 - Recrutiment/Contact/Listing 3 - Main interview- 5 - Moderation/Translation/Transcription/Others (Specify)  Other Fees/Charges Supervision Charges  EVECUTIVE Name:  ETC Employee ID: Date: Signature:  Totals  B) Supervision Charges  Grand Total (A+B) For Nat Payment  Assignment Job No. Sagment Job No. Sagment Job No. Sagment Job No. Warded Amount:  Assignment Job No. Sagment Job No. Sagment Leather Job No. Sagment Job No. Sagment Job No. Task Code Amount:  Assignment Job No. Sagment Job No. Sagmen	-												
Customer's Name & Address To: MARKET XCEL DATA MATRIX PVT. LTD. Bahind Color Building, Patha-300001 PN No: A&CNUSOSED  Towards my Charges/Feesagainst Assignment/satated below:  Towards my Charges/Feesagainst Assignment/satated below:  Towards my Charges/Feesagainst Assignment/satated below:  Original Assignment Number and Date  Pees for Assignment Date Collection Type & Segment  1- Briefing charges 2- Recruitment/Contact/Listing 3- Main Interview- 4- Main Interview- 4- Main Interview- 4- Main Interview- 4- Main Interview- 5- Moderation/Translation/Transcription/Others (Specify)	From Name of Address Mobile N	Patros f the Free :- SIO	lancer:	ANUP.	KUMAR andh u	and t	10-4	Neo	× 101	utry	fam	n Sadbhar	na Mogra May
Customer's Name & Address To: MARKET XCEL DATA MATRIX PVT. LTD. Rangi Nilay House of Rangu. F3 New Lai JI Tola, Behind CDA Bulling, Patha-800001 PAN No.: AACM5086D  Towards my Charges/Feesagalinst Assignment/Stated below: Treelancer Code: MAPATERIAN - 200  Towards my Charges/Feesagalinst Assignment/Stated below: Original Assignment Number and Date  Revised Assignment Number and Date Revised Assignment Number and Date Revised Assignment Number and Date Revised Assignment Number and Date Revised		99	7461	850		hooks					100		
Job No: 20241086  Job Title: Olffon BHT Fieldwork Locations: Parks Fees for Assignment Data Collection Type & Segment  1- Briefing charges 2- Recruitment/Contact/Listing 3- Main interview- 4- Main interview- 5- Moderation/Transcription/Others (Specify)	To : MA Ranju Nilay Behind CDA	RKET XC House of Ra Building, Pa	EL DAT	A MATR		TD.	and the same of th	Bill N	lo:	203	21 0	50/11/24 HTF2024-	-200
Job No: 20241086  Job Title: Olffon BHT Fieldwork Locations: Parks Fees for Assignment Data Collection Type & Segment  1- Briefing charges 2- Recruitment/Contact/Listing 3- Main interview- 4- Main interview- 5- Moderation/Transcription/Others (Specify)	- And And	or Builton	ole address	Towards	my Charg	ges/Fees	agair	st Ass	ignmer	nt/ssta	ted be	low:	N Shipping
Job Title: Office BHT   Fieldwork Locations: Patua   Fees for Assignment   Patua   P	THE PROPERTY OF THE PARTY OF THE PROPERTY OF THE PARTY OF				Original Assignment			nt	Revise	d Assignment	Amount		
Part	Job Title:	SUVER NO.	VIEW	on B	HT	S STORY	La Tha	t tour	none le 1	0 1001	Payble		Payble
Data Collection Type & Segment  1. Briefing charges 2. Recruitment/Contact/Listing 3. Main interview 4. Main interview 5. Moderation/Translation/Transcription/Others (Specify)	Fieldwork	Locations:		Paru	9	de de hie	4.000	brah	eyillib.	dimeu	Oprisa	o) bott bres list	ofference .
1- Briefing charges 2- Recruitment/Contact/Listing 3- Main interview- 4- Main interview- 5- Moderation/Translation/Transcription/Others (Specify)									Date			Amount	
2- Recruitment/Contact/Listing 3- Main Interview - 4- Main Interview - 5- Moderation/Translation/Transcription/Others (Specify)				gment			Quantity R		Kate		Amount		
3- Main interview 4- Main interview 5- Moderation/Transcription/Others (Specify)				Licting			-						
4- Main interview- 5- Moderation/Translation/Transcription/Others (Specify)				Listing			10	0 126		<	2-2-7-5/-		
S- Moderation/Translation/Others (Specify)							1	2	11				1
Supervision Charges  EXECUTIVE Name:  ETC Employee ID: Date: Signature:  MYTH Chara  A) Fees for Assignemt  B) Supervision Charges  Amount:-  Grand Total (A+B) For Net Payment  2775  Rupees in Words: Two Monsard two Mondard & Seventy five only  Summary  Assignment Number  Job No. Segment Centre Collection Type Quantity Synchedy Quantity Rejectedby Invoice Quantity Payable in Subsequent Invoices  13 13 13  I solemnity Cleare 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: ANUP KUMA!  Beneficiary Bank Account Number: ANUP KU	5- Moderation/Translation/Transcription/Others												
Executive Name:  EIC Employee ID: Date: Signature:  MXVIIT Cass  Totals  A) Fees for Assignemt  A) Job No.  Task Code  Amount:-  B) Supervision Charges  Grand Total (A+B) For Net Payment  Summary  Assignment  Number  Assignment  Number  Job No.  Segment  Centre  Collection  Type  Collection  Type  Collection  Collection  Collection  Collection  Collection  Collection  Type  Collection  Collection  Collection  Collection  Type  Collection  Collection  Collection  Collection  Type  Collection  Collection  Type  Collection  Collection  Type  Collection  Collection  Collection  Type  Collection  Collection  Type  Collection  C	Other Fe	es/Char	ges										
Totals  A) Fees for Assignemt  A) Fees for Assignemt  A) Fees for Assignemt  A) Fees for Assignemt  B) Supervision Charges  Crand Total (A+B) For Net Payment  CRUPES in Words: Two Mourand two Mondard & Seventy five only  Summary  Assignment Number  Assignment Job No.  Segment Centre Collection Type  Centre Collection Type  Cuantity Synched/ Submitted  Collection Type  CASSIGNMENT  Collection Type  Collection Ty	Supervisio	n Charges											
Totals  A) Fees for Assignemt  Job No.  Task Code  Amount:-  Grand Total (A+B) For Net Payment  275  Rupees in Words: Two Morsaul two Model & Ceventy five only  Summary  Assignment Number  Job No.  Segment Centre  Collection Type  Collection Type  LEG Pharma  Beneficiary Bank Name: Invoice  Bill Received On:  Bill Received On:  Bill Received On:  Bill Checked & Cleared On:					1				1	0.		-	
Assignment Number   Job No.   Segment   Centre   Collection Type   Quantity Synched/ Submitted   Quantity Rejected by me   Accepted   Accepted		loyee ID	: Date:	Signati	ıre:	10	100		+	Cu	2)	2-275	1_
B) Supervision Charges  Amount:-  Grand Total (A+B) For Net Payment 27+5  Rupees in Words: Two Monard two Mondard & Seventy five only  Summary  Assignment Number Job No. Segment Centre Collection Type Quantity Submitted IQ Quantity Rejectedby Invoice Quantity Paidinthis Invoice Subsequent Invoices  13 13 13 13  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 Account Name: ANUP KUMAR  Beneficiary Bank Account Number: 104401 509277  Beneficiary IFSC Code: TCTCD003342  Bill Received On:  Bill Checked & Cleared On:					Joh No.	Tack	Code	Amo	int:-		-	222	1_
Grand Total (A+B) For Net Payment  2775  Rupees in Words: Two Monard two madeed & Seventy five only  Summary  Assignment Number Job No. Segment Centre Collection Type Quantity Synched/ Submitted IQC and Agreed by me Invoice Quantity Paidinthis Invoice Subsequent Invoices  13 13 13  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 Account Number: ANUP KUMAL  Beneficiary Bank Account Number: 104401509277  Beneficiary Bank Account Number: 104401509277  Beneficiary IFSC Code: ICICO003342  Bill Received On:  Bill Checked & Cleared On:	A) Fees for	Assignem	t	-	JOD NO.	Idsk	Let Ste						
Grand Total (A+B) For Net Payment  2775  Rupees in Words: Two Monard two madeed & Seventy five only  Summary  Assignment Number Job No. Segment Centre Collection Type Quantity Synched/ Submitted IQC and Agreed by me Invoice Quantity Paidinthis Invoice Subsequent Invoices  13 13 13  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 Account Number: ANUP KUMAL  Beneficiary Bank Account Number: 104401509277  Beneficiary Bank Account Number: 104401509277  Beneficiary IFSC Code: ICICO003342  Bill Received On:  Bill Checked & Cleared On:		-i Chana					Amount:-						
Assignment Number Job No. Segment Centre Collection Type Collection Type Collection Type Collection Type Centre Collection Type Centre Collection Type Centre Collection Type Centre Collection Collec	B) Supervi	sion Charg	es			Gra	nd To						
Assignment Number Job No. Segment Centre Collection Type Quantity Synched/ Submitted Joc and Agreed by me Invoice Quantity Paidinthis Quantity Payable in Subsequent Invoices    2024   Pharmal Quantity Payable in Submitted Submitted   Quantity Rejected by Maccepted   Quantity Payable in Subsequent Invoices	Division in 1	Morde	T. O	M. in	. 100 L				- //	_		- 1	ouly
Assignment Number  Job No.  Segment Centre Collection Type Quantity Synched/ Submitted Quantity Rejected by Invoice Quantity Paidinthis Invoice Quantity Payable in Subsequent Invoices  13 13 13  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 Account Name: ANUP KUMAR Beneficiary Bank Account Number: 104401509277  Beneficiary Bank Account Number: 104401509277  Beneficiary IFSC Code: TCTCD005342  Bill Received On:  Bill Checked & Cleared On:	Rupees in	vvorus: /	100	2 noi	reporter					4 3		a g	
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 Account Name: ANNP KNMAR  Beneficiary Bank Account Number: 104401 509277  Beneficiary IFSC Code: ICIC0003342  Bill Received On:  Bill Checked & Cleared On:		Job No.	Segment	Centre	Collection	luantity Sync	nched/ Quantity Re		ejectedby			The state of the s	
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 Account Name: ANUP KUMAR  Beneficiary Bank Name: ICICI BANK  Beneficiary Bank Account Number: 104401 509277  Beneficiary IFSC Code: ICICO003342  Bill Received On:  Bill Checked & Cleared On:			Phamo	patre	- not	13	k II,	C		- 13	3	13	13
Bill Received On:  Bill Checked & Cleared On:	My PAN Ad Beneficiary Beneficiary	clare the information of the count Num y Bank Account	ber is: ount Nam	tioned herein	(both sides of th	AR		orrect to th	Benefic	ciary Ba	nk Nam	e: ICIC	I BANK
					stigey.								

market xcel	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: Cryan Ramal Mobile No.: 8340208897	PIC of the freelancer
onducting interviews research Data by M Date of I	registered with us as a freelance supplier for and collecting data. He/She has been authorized to collect Market Market Xcel, as per project specific Assignment Letter. Reference No: Issue: Valid From: Oylill to Sollill Job Fieldwork Mobile No: Oylill SSS Address: This Authority Card is issued on the freelance supplier to facilitate in his/her assignment.	A Stan or Specific and the standard of the standard or
ne specific request of	the free lance supplier to task the same sup	(Card Holder's Signature)

Assignment letter

	Assignment	52.21 20
Freelancer Name Amp www. House Address Tagangan, Pana	JULDON BHT	Freelancer Code: MXPATF2024-20 Reference No: Date: 30/11/24
o de come a de come de la come de la filipe de la come de la filipe de la come de la filipe de la come de la c	the control of the co	the construction of a factor and the construction of the construct

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)
1 207	Para	13	175
CHUI	on its culf to persuit of your payments due, for	des parties als met only	megato Cetapon

The above stated assignment will start from United and on 3111 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: 30/11/24	Signed in the presence	e of:
	1) Witness Name: _	Cryan Kamal
Name of signee: AMUP KUMAR	Contact number:	8340308897
and the state of t	Signature:	Ckas
	2) Witness Name: _	Sudhir Ke.
Signature: Anvp	Contact number:	9599755112
	Signature:	5'12