

marketxcel	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020	PIC of the freelancer
	Executive Name: <u>Rituparna Das</u> Mobile No.: <u>8240974126</u>	
This is to certify that <u>Sandeep Khairre</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: <u>2/8/24</u> Valid From: <u>2/8</u> to <u>30/10</u> Job Fieldwork Location: <u>Pune</u> Mobile No: <u>9673984647</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>Sandeep Khairre</u>	Job No: <u>20240796</u>	Freelancer Code: <u>MXPF 2023-08</u>
House Address: <u>Sr. no. 20, Ambegaon Pashae, Dhankawadi, Pune.</u>	Job Title: <u>GLB ITCM</u>	Reference No: _____
	Fieldwork Location: <u>Pune</u>	Date: <u>2/8/24</u>

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>Capi</u>	<u>Pharma- (Pune)</u>	<u>8</u>	<u>200</u>

The above stated assignment will start from \_\_\_\_\_ and end on \_\_\_\_\_. 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: 2/8/24

Name of signee: Sandeep Khairre

Signature: [Signature]

Signed in the presence of:

1) Witness Name: Rituparna Das

Contact number: 8240974126

Signature: [Signature]

2) Witness Name: \_\_\_\_\_

Contact number: \_\_\_\_\_

Signature: \_\_\_\_\_

Freelancer:- Sandeep Khairat  
Address:- Sr. no. 20, Ambegaon, Padma, Dhankawadi, Pune  
Mobile No:- 9673989647

## BILL

Customer's Name & Address

To : MARKET XCEL DATA MATRIX PVT. LTD.

Pushpa Tower, 1st Floor, Office No -4, Sr No-12/1/1, Padmavati, Pune Satara  
Road, Padmavati Chowk, Above Bikaner Sweet, Pune-411037  
PAN No.: AAECM5086D

For Commercial Use:

Bill No:

1066

Date:

Freelancer Code: MXPF2023-085

Towards my Charges/Fees against Assignment/stated below:

Job No:	Original Assignment Number and Date	Revised Assignment Number and Date	Quantity And Amount Payble
20240796			
Job Title: GLB HCM			
Fieldwork Locations: Pune			

### Fees for Assignment

Data Collection Type & Segment	Quantity	Rate	Amount
1- Briefing charges			
2- Recruitment/Contact/Listing			
3- Main interview -	8	200	1600 F
4- Main interview-			
5- Moderation/Translation/Transcription/Others (Specify).....			

### Other Fees/Charges

Supervision Charges

Executive Name: Rituparna Das

EIC Employee ID: Date: Signature: MX1241

Rituparna Das

### Totals

A) Fees for Assignemt	Job No.	Task Code	Amount:-
	20240796		1600 F
B) Supervision Charges			Amount:-

Grand Total (A+B) For Net Payment

Rupees in Words: One thousand Six hundred 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	Pharma	Pune	Capi	08	—	08	—	08

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: DZHPK2078B

Beneficiary Bank Account Name: Bank of Baroda

Beneficiary Bank Account Number: 89740100000348

Beneficiary Bank Name: Bank of Baroda

Beneficiary IFSC Code: BARBOVISADP

E&OE

(Signature & Date)

Approved by with date

Bill Received On:

Bill Checked & Cleared On: