	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020	PIC of the freelancer
● market xcel	Executive Name : _Smitha . G_ Mobile No. : _9449669097_	

This is to certify that _Mamatha R.M_ 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: _30/12/2024_ Valid From _11/10/2024_ to _11/10/2024_ Fieldwork Location: _B'lore_ Mobile No _953 8349000_ 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 _Mamatha R.M_ House Address _wilson_ _Garden_ _Bangalore_	Job No: _20240971_ Job Title: _Magenta 2_ Fieldwork Location _Bangalore_	Freelancer Code: _MXB4NF 2023-056_ Reference No: ___ Date: _30/12/2024_

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 - Bangalore	10	200

The above stated assignment will start from _11/10/2024_ and end on _11/10/2024_ . 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: _30/12/2024_

Name of signee: _Mamatha KM_

Signature: _M tha KM_

Signed in the presence of:
1) Witness Name: _Prathibha_   ia
Contact number: _7483312433_
Signature: _Prathiba.d_
2) Witness Name: _Smitha . G_
Contact number: _9449669097_
Signature: _G. Smitha_

Name of the Freelancer: **Mamatha K·M**
Address: **Wilson Garden, Bangalore**
Mobile No: **9738249500**

BILL

	For Commercial Use:
Customer's Name & Address To: MARKET XCEL DATA Matrix PVT. LTD.	Bill No: Date: **30/12/2024** Freelancer Code: **MXBAMF2023-056**

Towards my Charges/Fees against Assignment/s stated below:

Job No: **20240971**	Original Assignment Number and Date	Revised Assignment Number and Date	Quantity and Amount Payable
Job Title: **Magenta 2**			
Fieldwork Locations: Mumbai **Bangalore**			

Fees for Assignment

Data Collection Type & Segment	Quantity	Rate	Amount
1- Briefing charges			
2- Recruitment/Contact/Listing			
3- Main interview -	**10**	**200**	**2000**
4- Main interview-			
5- Moderation/Translation/Transcription/Others (Specify)........................			

Other Fees/Charges

Supervision Charges			
Executive Name: **Smitha·Cg**			
EIC Employee ID: **MX970** Date: **30/12/2024** Signature: **G·Smitha**			

Totals

A) Fees for Assignment	Job No	Task Code	Amount: - **2000**
	20240971		
B) Supervision Charges			Amount: -

Grand Total (A + B) for Net Payment

Rupees in Words: **Two Thousand Rupees only**

Summary

Assignment Number	Job No	Segment	Centre	Data Collection Type	Quantity Synched/ Submitted	Quantity Rejected by IQC and Agreed by me	Invoice Quantity Accepted	Quantity Paid in Earlier Invoices	Quantity Paid in this Invoice	Quantity Payable in Subsequent Invoices
01	**20240971**	**Pharma**	**Blore**	**Pharma**	**Synced**	**Agreed**	**Accepted**			

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: **ASSPM2360D**
Beneficiary Bank Account Name: **Mamatha k·m** Beneficiary Bank Name: **State Bank Of India**
Beneficiary Bank Account Number: **20370396556** Beneficiary IFSC Code: **SBIN0017786.**
E&OE

Mathakm (Signature & Date)	**Pranha** Approved by with date	Bill Received On: _____ Bill Checked & Cleared On: _____

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