market xcel	Mobile No. S. Clas Cas Sale Chavain	PIC of the freelancer
Date of Location:	Ehadija Honcy registered with us as a freelance supplier for s and collecting data. He/She has been authorized to collect Market Market Xcel as per project specific Assignment Letter. Reference No: Issue: 2913 24 Valid From: 3 424 to 12 4124 Job Fieldwork Mobile No: 8850541161 Address: This Authority Card is issued on f the freelance supplier to facilitate in his/her assignment.	*.
Petral		(Card Holder's Signature)

Assignment letter

Freelancer Name Khoudila Honey House Address Chirag Nagar L. 8.5 Foad N.S.S Marg Ghatkopar West	Job Title: M & M Fieldwork Location: mumberi	Freelancer Code: MX MVmf 2023-03 Reference No: Date: 23 5 2024
the state of the s	tribil your research and an artistic	Virtual Control of the

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)
offline	MGD- Mumbai	16	200
	The supplemental s		

The above stated assignment will start from 21424 and end on 12.1429. 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 as communicated at the above stated briefing. Non-Compliance of agreed schedule may result in non-acceptance and GPS be captured live assignment in part/full without any further reference/intimation to you. This is not an employment but merely an assignment to you as a 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: 23/5/2024
Name of signee: KhadiJa Honey
man palament of the second of
Signature: Honey

Signed in the presence of

agned in the presen	ice of:	
1) Witness Name:	Firdous	Subeday
Contact number:	810479	1392
Signature:	Findol	<i>y</i> .
2) Witness Name:		
Contact number:		
Signature:		

om Market acel									
Name of the Freelancer: - Khudi Address:-Chirous Nauger & Mobile No:-88 505 91961	19 × 10	ney	y c	iha	Hopar	· w	est		
		nos	BIL	130					
Customer's Name & Address To: MARKET XCEL DATA MATRI	X PVT. LTI	D.			ommercia	al Use:	- 1-3		
204-207, 2nd Floor Ashok Premises. Nicholas Wadi Circle Road, Nicholas Wadi, Near Tiwari Chaiwala, Andheri East Mumbai - 400069 PAN No.: AAECM5086D				Bill No: 20742 Date: 23 105/2024 Freelancer Code: MAMVM F2023-0381					
Towards	my Charge	es/Fees	again		-3 (11)	The state of the s	Printer St.	Control of the Control	1 Cast House
Job No: 202402+21			Original Assignment Number and Date				Revised Assignment Number and Date		Quantity And Amount
Job Title: MRM		y			an period	in the colon	* - 1 -	m Bours & by	Payble
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Fees for Assignment									
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2- Recruitment/Contact/Listing			10	0	200	ت خ	3.20		
3- Main interview -			-			38 7			
4- Main interview-			-		4 - 1	OT ATT IT			
5- Moderation/Translation/Transcri (Specify)	ption/Others	5	ALE ES	strad(G)	estimate	_ 4 _ <u>e</u> _ 19			
Other Fees/Charges									
Supervision Charges	10 ()	2210						4.1	
Executive Name: Abhishe	C CN	12:	71		2315	1202	4	Maryleh	-
EIC Employee ID: Date: Signatu	ie. (*i/	12							
Totals	Job No.	Task	Code	Amo	ount:-	3200			
A) Fees for Assignemt	202404					0,00			
	202909			Am	ount:-				
B) Supervision Charges			and T		A+B) For	Net Pa	vme	nt	
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Rupees in Words: Three	nousan	01	000		rundy	ey.			
			Sun	nma	ry .	_			
Assignment Job No. Segment Centre	Date Collection Type	Quantity Sy Submit			Rejectedby greed by me	Invoice Qu Accept		Quantity Paidinthis Invoice	Quantity Payable in Subsequent Invoices
2404 MD unit	offlive								Missa
	n (both sides of t	he page) is	true and	correct to	the best of m	y beliefs and	d I agree	with all terms and co	naitions.
MAL DAN Assount Number is NIEVO	8441				Donofi	ciary Ran	k Nam	e:Malliella	leotale Bo
Beneficiary Bank Account Name:	oct joint	ionol	3		Donofi	cian/ IEC/	Code	:KKBK000	01381
Beneficiary Bank Account Number: 71	45256	231			benen	vialy irol	Jour	. (-1 01	
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