

	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: <u>Rituparna Das</u> Mobile No.: <u>9240 974126</u>	PIC of the freelancer
	This is to certify that <u>Sandeep Khair</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>8/8/24</u> Valid From: <u>8/8</u> to <u>25/9</u> Job Fieldwork Location: <u>Pune</u> Mobile No: <u>9673984642</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 Khair</u> House Address <u>Sr. no. 20, Ambegaon pathare, Dhankawadi, Pune.</u>	Job No: <u>20240708</u> Job Title: <u>GULP-Brand</u> Fieldwork Location: <u>Health Study Pune</u>	Freelancer Code: <u>MX PR 2023-085</u> Reference No: _____ Date: <u>8/8/24</u>
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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>phanna (Pune)</u>	<u>Supervision</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: 8/8/24

Name of signee: Sandeep Khair

Signature: _____

Signed in the presence of:

1) Witness Name: Rituparna Das

Contact number: 9240 974126

Signature: Rituparna Das

2) Witness Name: _____

Contact number: _____

Signature: _____

from
Name of the Freelancer:- Sandeep Khairc
Address:- Sr. no. 20, Ambegaon pathar, Dhankawadi, pune
Mobile No:- 9673984642

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:

1071

Date:

Freelancer Code: MXP F 2023-085

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

Job No:	Original Assignment Number and Date	Revised Assignment Number and Date	Quantity And Amount Payable
20240708			
Job Title: GULP-Brand Health Study			
Fieldwork Locations: Pune			

Fees for Assignment

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

Other Fees/Charges

Supervision Charges	19	570	1
Executive Name: Rituparna Das			
EIC Employee ID: Date: Signature: MX1241			Rituparna Das

Totals

A) Fees for Assignemt	Job No.	Task Code	Amount:-
	20240708		
B) Supervision Charges			Amount:- 570 1

Grand Total (A+B) For Net Payment

Rupees in Words: Five hundred Seventy 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
	2024 0708	pharma	pune	Cap	19	-	19	-	19.

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: Sandeep Khairc

Beneficiary Bank Account Number: 89740100000348

Beneficiary Bank Name: Bank of Baroda

Beneficiary IFSC Code: BARBOVJSADP

E&OE

Bill Received On:

Bill Checked & Cleared On:

(Signature & Date)

Approved by with date