PIC of the freelancer	17, Okhla Industrial Estate Phase 3 Rd, Okhla Phase III, Okhla Industrial Estate, New Delhi, Delhi -110020 Executive Name: Supplies Suppli	market <u>x</u> cel
	Mobile No. 3 Pegistered 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: 142024 Valid From: 1420246 30 42056 Fieldwork Mobile No. 33834930 Address: This Authority Card is issued on the freelance supplier to facilitate in his/her assignment.	conducting interviews Research Data by M
(Card Holder's Signature)		

	Assignment letter	12008
1. 122/200	Job No: 30 240323 Job Title: Flux, Qloro, dlasting Fieldwork Location: W14 Bangarbare	Freelancer Code: MXBANF2023 Reference No: OS Date: 10 5 2024

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)
Dharma	phorma-Bangalore	45	150
910	V a lute artic		

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: 105	2024
Name of signee:	manathankim

Signature: Machan K.M

Signed in the presence of.
1) Witness Name: The Dra
17116222121112
Contact number:
Signature:
of the
2) Witness Name:
Contact number: 944567077
Let all a
Signature:

From Name of the Freelancer: Address:- Mobile No:- 973 834 956	nathakir en, Bangs	n	e				
173834951	/U V	BILI					
Customer's Name & Address To: MARKET XCEL DATA MATRIX PVT. LTD. No. 135/1, 2nd Floor, Lal Bagh Road, Old Mission Compound, Opposite Garuda Maruti Showroom, Bangalore - 560027 PAN No.: AAECM5086D Ph.: +91-80-40878320			For Commercial Use: Bill No: 12008 Date: 16 5 2014 008 Freelancer Code: M &BAM = 2023-056				3-656
Towards n	ny Charges/Fees						
Job No: 20240323		Original Assignment Number and Date			vised Assignment umber and Date	Quantity And Amount Payble	
	grow wp	+			The state of the state of		Payble
Fees for Assignment	10						
Data Collection Type & Segment		Quan	tity	Rate	\neg	Amount	
1- Briefing charges	. 1	2-411				Amount	
2- Recruitment/Contact/Listing		F 2					
3- Main interview -		4	5	150	>	6750	
4- Main interview-			2			0,00	
5- Moderation/Translation/Transcript (Specify)	tion/Others						
Other Fees/Charges	t in the same a					100	
Supervision Charges				IF. J. HI			n'
Executive Name:	1419	(1)		2/2	471	1,6 1	
EIC Employee ID: Date: Signature	e: MX 17	0		5/10	24	19 Daily	<u>a</u>
Totals	1				7 6		
	ob No. Task (Code	Amo	unt:-	575		
	624323						
B) Supervision Charges			-	unt:-			<u> </u>
0		nd Tot	tal (A	+B) For			
Rupees in Words:	usand S	Sev	en	Au	nder	a a fil	TOY
		Sumr	mar	y Ki	ye	s only	
Assignment Number Job No. Segment Centre	Date Collection Type Quantity Syncl Submitted			lejectedby reed by me	Invoice Quar Accepted	, addition and and and	Quantity Payable in Subsequent Invoices
101 3223 Phan Bloom	phay Synce	ea f	780	reid	Allet	ted	
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: A S PM 3 DD Beneficiary Bank Account Name: Manual KIM Beneficiary Bank Name: State Bank Ob Beneficiary Bank Account Number: 20370396556 Beneficiary IFSC Code: SBINOO 17786							
M_thakeM	M_thak.M Doe			Bill Received On: Bill Checked & Cleared On:			f On:
(Signature & Date) Approved by with date							