LETTER OF AUTHORIZATION

I hereby provide my authorization for Info-vision Research Systems, Inc., on behalf of Coforge BPS, Inc. to conduct a background check on, and independently verify and inquire with you and/or your good office information about myself in connection with my job application with Coforge BPS, Inc., including, but not limited to, my education, previous employment, residence, health, involvement in criminal, civil and administrative proceedings, licenses, certifications, status and standing in the community, lifestyle and other personal attributes, circumstances and records, and such other checks and inquiries that are necessary in order to verify information provided by me in my job application. In this regard, kindly provide Info-vision Research Systems, Inc., the foregoing information and/or character reference they may request. I hereby freely and knowingly consent to you and/your good office disclosing said information to Info-vision Research Systems, Inc. for the foregoing purpose. I hereby release from liability all persons or entities requesting or supplying such information.

Full Name: Tristan Martin C. de Leon

Signature: 1. 1

Date: February 21, 2023