**Return request Dopper**

Dopper

p/a MEO Haarlem

A. Hofmanweg 1a

2031 BH Haarlem

Fill in this form, completely and correctly, to cancel your order.

**Customer data**

|  |
| --- |
| Ordernumber: ……………...…………………………………..Date of order: ……………...…………………………………..First - and last name: ……………...…………………………………..Street and house number: ……………...…………………………………..Postal code and city: ……………...…………………………………..E-mail address: ……………...………………………………….. |

**Return products**

|  |  |  |
| --- | --- | --- |
| Amount | Product | Reason |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

(mark which one is applicable) ☐ This is the whole order / ☐ This is one part of the order

Date: Signature:

………………………………. ……………………………….