

Notice of termination regarding Contract of the customers use of Hjälpmedelstjänsten

Period of notice is three (3) months. Period of notice is calculated from the date this Notice of termination is filed at Inera AB. The final billing includes the Period of notice. For complete terms , see <u>www.inera.se</u>.

Name of organisation	Registration number
Date and place of signature	
Signature Authorized representative	
Signature Authonized representative	
Printed name Authorized representati	N/0
Printed name Authorized representative	
Talashasa sa sa sa	
Telephone number	E-mail address
Authorized representative	Authorized representative

Form of termination shall be filled in and sent to:

Inera AB Kundservice 118 82 Stockholm Sweden