**KLACHTENFORMULIER**

Art. 16 algemene voorwaarden Spong advocaten B.V.

Aan Mr. G. Spong in zijn hoedanigheid van klachtenfunctionaris (\*).

Uw naam: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contactgegevens:

Adres: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mailadres: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telefoonnummer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faxnummer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Persoon over wie u klaagt (\*\*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Datum: Plaats: Uw handtekening:

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(\*) Indien uw klacht tegen Mr. G. Spong zelf is gericht, fungeert Mr. M. Lochs als klachtenfunctionaris (zie art. 3 kantoorklachtenregeling). In dat geval moet u de Word-versie van dit formulier gebruiken en “Aan Mr. G. Spong” vervangen door “Aan Mr. M. Lochs”.

(\*\*) In het kader van onze kantoorklachtenregeling is dit ofwel een advocaat van Spong advocaten B.V. of een onder diens verantwoordelijkheid werkzame persoon. In het laatste geval verzoeken wij u zowel die persoon als de betrokken advocaat te vermelden.