

REFUND REQUEST FORM

Please fill out this form and email it back to accounting@cbmglobal.io

Order Date:	Order ID:
Date of payment:	Amount paid:
Payment method: Ingenico payment portal (Bancontact - Sofort - ING homepay - Ideal - KBC - Giropay - Belfius - VISA - Mastercard) Neteller payment (Neteller - Bitcoin)	·
CONTACT INFORMATION	
Name:	Surname:
Company:	
Street:	Number: Box:
City:	Zip code:
Email:	
Please note that we may contact you to gather further details about your refund request in order to improve our product and customer service.	
Requested method of refund payment:	
Via bank transfer to this bank account number:	
Via PayPal to this email address:	
Date Signature	