

Service Cancellation Form

Form No:.....
 Organization Name:
 Address:
 Landline:..... Mobile:.....
 Office Timing:..... Lunch Break:.....

Owner/Chairman/Secretary/Highest Authority

Name:.....Mobile No:
 Personal Email Id: Office Email Id:.....
 Land Line No: Preferable Meeting Day:.....
 Preferable Call Timing:..... Preferable Meeting Time.....

Organization Bank A/c Detail

A/c Holder Name:.....A/c Type: Saving / Current
 A/c Number:
 Bank Branch:..... IFSC:.....

Product/Service Purchased

Service Cancellation Request will accept if it have been initiated within 10 days from product starting date/purchase date

Product Name	Price (In Rs.)	Price accepted by client (In Rs.)	Advance (In Rs.)	Purchase Date (as per CRM)
School Software	Rs. 70000 / Licence Rs. 25/student/month			
College Software	Rs. 61000 / Licence			
Hospital Software	Rs. 47000 / Licence			
Website & SMS	Variable			
Others(.....)	Variable			

Reason for Product/Service Cancellation:

Any Suggestion:

Authorized Sign and Stamp

Place :..... Date & Time:.....