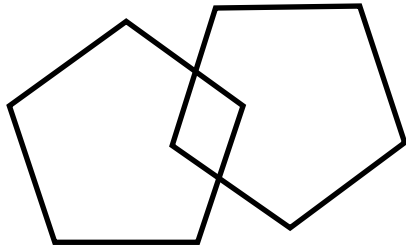


patiëntsticker

Datum: .....

Zin:



# SLUIT UW OGEN

