Annex 2

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Place and date

Recipient:

	•••••	• • • • • • • • • • • • • • • • • • • •	••••			
(enter	Your	company's	full			
name, street, zip code and city)						

WITHDRAWAL FROM RETURN AGREEMENT FORM

(this form must be completed and returned by post/e-mail only if you wish to withdraw from the contract)

I/We(*) hereby inform(*) of my/our withdrawal from the contract of sale of the following items:

In accordance with the provisions of §6 of the Seller's Terms and Conditions, I agree to return the Product at my own expense in unaltered condition, together with the Proof of Purchase or a copy thereof, within 14 days from the date of submission of this letter.

The refund, please/please(*) be made to (mark appropriate):

	To th	e bank	accol	unt n	o:	 	 	 	 	 	 	, w	hose
Ow	ner is					 	 	 	 	 			

By postal order to the address indicated in the Order.

If the method of reimbursement is not indicated, the Seller will refund using the same method of payment used by the Buyer.

Buyer's First and Last Name:	
Buyer's Adress:	

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Date and Signature of the Consumer (only if the form is sent in paper version)