

MODEL WITHDRAWAL FORM

(this form should be completed and sent back only if you wish to withdraw from the contract)

Addressee:

Kewin Krawczyk,
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Phone: 531 371 137

I / we (*) hereby inform about my / our (*) withdrawal from the Sales Contract of the following items (*) contract for the supply of the following things (*) contract for a work involving the following items (*) / for the provision of the following service (*)

The date of conclusion of the contract (*)/ recipe (*):

Name and surname of the consumer(s):

Address of the consumer(s):

.....

Signature of consumer(s) (only if the form is sent in a paper version):

Date:

(*) Delete as applicable.