

Sample Withdrawal Form

(If you want to cancel the contract, please fill out this form and send it back.)

To:

LOST EXIT – Inh. Rita Stoltze
Bergstr. 23
D-48249 Dülmen

Fax: +49 (0)2594 840 7769

Email: info@lostexit.de

Herewith I / we give notice that I / we withdraw my / our contract of the sale of the following goods / of the following services:(*)

(Name of the product, if necessary, order number and price)

Order Date(*)/Delivery Date (*)

Consumers Name

Consumers Address

.....
Signature (paper written only)

Date

(*) delete as applicable