

Withdrawal Form

Complete and return this form only if you wish to withdraw from the contract.

TO:	
Paul Parts e.U Lehenstrasse 48 A-1220 Wien Tel: +43 1 890 1 811 Fax: +43 1 890 1 811/15 e-Mail: office@PaulParts.at	
I/We (*) hereby give notice that I/We (*) withdraw from my/our (*) contract of sale of the following goods (*)/for the provision of the following service (*),	
Invoice Number	
Item Number(s) of Ivoice which is named above	
Ordered on (*)/received on (*)	
Name of consumer(s)	
first name, family name	
Address of consumer(s)	
street	
postcode, city	
country	
Signature of consumer(s)	
Date	

(*) Delete as appropriate.

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