

Standard withdrawal form

(this form shall only be filled in and returned only if you want to withdrawal your order)

I hereby give notice that I want to use my right of withdrawal for the following goods / order:

Order number: _____

Oder date: _____

Date of received: _____

The customer's full name: _____

Address: _____

Postal code and city: _____

Date: _____

Signature: _____

Print the form and fill it out. Please return by mail to the address above or scan it and send it back by email to lars@rank.dk