

WITHDRAWAL FORM

You should only complete and send this form if you wish to withdraw from the contract. To the attention of Grupo R. Queraltó S.A., with address at Avenida Pino Albar nº 24, 41016, Sevilla.

You can also send it or consult us your doubts to our email: clientes@mobiclinic.com

Mr./Mrs. with DNI,
with address at and
in exercise of the right granted to me by Law 3/2014 of 27 March, which modifies the
the revised text of the General Law for the Defense of Consumers and Users within the
Users within 30 calendar days from the date of receipt:

1. That on date..... I purchased from the website of GRUPO R. QUERALTÓ S.A. (www.mobiclinic.com) the product with order reference number:.....

2. That I have been informed of my right to withdraw from the purchase contract within 30 calendar days from receipt of the product, without giving any reasons.

3. That I attach to the present document of withdrawal, and copy of the purchase invoice of the purchased product.

4. That I exercise the right of withdrawal, returning the corresponding product.

Signed.

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