



WITHDRAWAL FORM
(fill in and return this form)

Recipient's name: ITALESSE S.r.l. Address: 34015 Muggia (TS), via dei Templari, 6 Loc. Noghère
Phone: +39 040 923 5555 Fax: +39 040 923 5251 Email: shoponline@italesse.it

With this, the undersigned: _____
resident in _____, street _____

notifies the withdrawal from the contract of sale of the following asset(s)

ordered on _____; order no. _____;
received on _____

Date _____

Signature (only if this form is sent in hard copy)