

# Withdrawal form

Complete and return this form only if you wish to withdraw from the contract to the following address:

*Andreas Kump  
Schulstraße 341  
9710 Feistritz/Drau  
Österreich*

I/We (\*) hereby give notice that I/We (\*) withdraw from my/our (\*) contract of sale of the following good (\*) / provision of the following service:

.....  
.....

- Ordered on (\*) / received on (\*): .....

- Name of consumer(s): .....  
.....

- Address of consumer(s): .....  
.....  
.....

.....  
Signature of consumer(s)

.....  
Date

(\*) Delete