

WITHDRAWAL FORM

Please complete and return this form only if you wish to withdraw from the contract

To:

TOPLICHT GmbH

Notkestr. 97

22607 Hamburg, Germany

E-Mail: toplight (at) toplight.de

Fax: +49 (0)40 88 90 1011

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 (*)

Quantity Article No.

_____ | _____

_____ | _____

_____ | _____

Ordered on _____ (*) / received on _____ (*)

Customer number _____

Name of consumer(s)

Address of consumer(s)

Date _____

Signature of consumer(s) (only if this form is notified on paper) _____

(*) Delete as appropriate