CONTRACT WITHDRAWAL FORM

(fill in this form and send it back only if you want to withdraw from the contract)

Notice of withdrawal from the contract

Addressee:	K MOTORSHOP s.r.o.
	Company ID: 250 28 448
	with registered office at Ústecká 408, 403 39 Chlumec
I/we announce	e (*) that I/we hereby withdraw (*) from the contract for the purchase of goods:
Order Date/Re	eceived Date (*):
Name and sur	name of consumer(s) (*):
Address of cor	nsumer(s) (*):
Refund Bank A	Account Number:
Consumer sigr	nature:
(only if this for	rm is sent in paper form)
Date:	
(*) Cross out the	ose that do not apply or complete the data