**Desistance statement form**

 (Should be filled and returned only in case you wish to cancel your order)

To: Zámbóné Varga Katalin Erzsébet ev.

Address: 1144 Budapest, Egyenes utca 8/B, III/46.

E-mail: mybettershelf@gmail.com

Undersigned .................................................. hereby confirm that I enforce my cancellation rights regarding the purchase contract of below products1:

Date of contract / receipt of products 2:

Customer name:

Customer address:

Customer’s signature: (only in case of printed statement)

Date:

1 Mark here the products/services related to the purchase contract.

2 Mark the appropriate one.