



Withdrawal form

RECIPIENT: As.tra S.a.s Via C. Vazzoler 26, 31015 Conegliano (TV), Italy

With this form I communicate the withdrawal from the sales contract relating to the following goods / services:

Name and Surname of the sender:

Sender's address:

Motivation:

Order number:

Ordered on:

Received on:

Sender's email address:

Date

Signature

Send the completed form in its entirety to info@limacdesign.com