



WITHDRAWAL FORM

Receiver:

OMAS SRL

Via Fornace seconda strada 1

Arsego - San Giorgio delle Pertiche

Padova 35010

Italy

With this form I communicate the withdrawal from the sales contract for the following goods/services.

Product:

Order N°:

Ordered / Received:

IBAN:

Name and Surname :

Address:

*E-mail *:*

Motivation:

Signature

Place and date

*with which the order was made