

FORM

Please choose the right one:

- EXCHANGE
- RETURN
- COMPLAINT

**SHIPPING ADDRESS**

MITARE LOGISTICS
 ul. Warsztatowa 4/11
 64-920 Pila, Poland
 e-mail: shop@mitare.com

.....
Name and Surname / Company Name.....
Street and Street Number.....
Postal Code.....
City.....
E-mail.....
Phone Number.....
Order Number.....
Order Date

	Product Name	Quantity	Gross Amount
1			
2			
3			
4			
5			

Your comments:**STATEMENT OF CANCELLATION OF THE SALES CONTRACT**

I, the undersigned, hereby give notice that I cancel my contract of sale of the item(s) mentioned above

.....
Date and Buyer's legible signature