

RETURN FORM

- ai sensi dell'art.49, comma 4 -

(complete and return this form only if you wish to return from the contract)

Spett. le

X-ray parts

Via sega 2228

35010 San Giorgio in Bosco PD

Italy

Tel. 3519615878

E-mail [info@xrayparts.it](mailto:info@xrayparts.it)

I hereby notify the withdrawal from my contract of sale of the following goods :

Description of the goods : \_\_\_\_\_ Quantity to be returned : \_\_\_\_\_

\_\_\_\_\_

Date of Order : \_\_\_\_/\_\_\_\_/\_\_\_\_ Received on : \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of Order : \_\_\_\_\_

Customer Name : \_\_\_\_\_

Customer Address : \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

Customer signature

\_\_\_\_\_

(The signature is only required if you submit the form in paper form)