Name and address of the entrepreneur:

Karol Milewski

Leszczynowa 8, 16-020 Czarna Białostocka, Poland

Contract withdrawal form

Please be informed that I withdraw from the contract of sales of the following items
Date of contract conclusion(*)/date of receipt (*):
Name and surname of the Client:
Address of the Client:
Date and signature of the Client
Date and signature of the cheft

(*) cross out the non-applicable