## Cancellation form for consumers

To Holst Porzellan GmbH Apothekerstr. 1 33790 Halle/Westfalen office@holst-porzellan.de Fax 05201 849552

I/we hereby revoke the contract concluded by me/us for the purchase of the the following goods:	
(Name of the goods, order number and pri	ce if applicable)
Goods ordered on:	Goods received on:
Date	Date
Name and address of the consumer	Date
Date	
Customer signature	
(only in case of written cancellation)	
By voluntarily explaining the reason for your products and service for all our customers	ur cancellation, you are helping us to improve our . Thank you very much.