

WITHDRAWAL FORM

Paolo Lazzaroni & Figli S.p.a.
Via Gorizia n. 41
21047 SARONNO (VA)

Paolo Lazzaroni & Figli S.p.a.:
info@chiostrodisaronno.it

I, _____, resident,

(*Note: give the name and address of someone who has concluded the contract of purchase via web*) intend to exercise the right of withdrawal:

- **partial**
(*Compilation note: tick the chosen option*)
- **total**

about the purchase order n. _____, dated and shipped from Paolo Lazzaroni & Figli S.p.a. at the following address:

The following list items for which I intend to exercise the right of withdrawal (list to be completed ONLY in case of partial withdrawal):

Code article n.	pieces
Code article n.	pieces
Code article n.	pieces
Code article n.	pieces
Code article n.	pieces
Code article n.	pieces

I confirm that I have read all the provisions of the **conditions of sale** on the following link: <https://www.chiostrodisaronno.it/en/c/3-terms-and-conditions>, as reported in the order confirmation sent to me.

(*Signature of the declarant*)