

# WITHDRAWAL FORM

Please complete and return this form only if you wish to withdraw from your order.

To the attention of:  
DRESCO SAS  
Service Clients Les Tropeziennes par M. Belarbi  
20 rue Jean-Baptiste Pigalle  
75009 PARIS  
[Contact us](#)

I/We (\*) hereby let you know of my/our (\*) withdrawal from the contract for the sale of the following goods/services (\*):

.....  
.....  
.....

Ordered on (\*) / received on (\*): .....

Name of consumer/customer: .....

Customer number (optional): .....

Address of consumer(s): .....

Date:

Signature of consumer(s)

(Only if this form is notified on paper):

(\*) Delete as right.