Withdrawal Form

(If you want to cancel the contract, please complete this form and send it back)

To: Griff Berlin Bundesallee 156 10715 Berlin	
Deutschland Phone: +49 (0) 30 8547 9952 E-Mail: info@griff.berlin	
I/We (*) hereby give notice that goods (*)/for the provision of th	t I/We (*) withdraw from my/our (*) contract of sale of the following ne following service (*):
_	
_	
_	
Ordered on	(*)
Name of consumer (s)	
	Address of consumer
(s)	
_	
Date	Signature of consumer (s) (only for communication on paper)
_	
Voluntary Informatio cancellation)	n (If you do not specify this it does not affect the right of
Customer number (optional) _	
Invoice Number (optional)	