

**Model withdrawal form** (complete this form and return it as you want to revoke the agreement)

To: LaDress B.V.  
Van Eeghenstraat 82  
1071 GK Amsterdam  
info@ladress.com  
+31 20 240 73 77

I/we share herewith that I/we regard our agreement following goods recall.

Ordered on [date] / received on [date]

Consumer name

Consumer address

Signature of consumer (only if this form is notified on paper)

Date:

Place:

\*delete what does not apply