

MODEL WITHDRAWAL FORM

(Please fill in and send this form only if you wish to withdraw from your contract.)

Seller (GOPASS, a.s. / specific Business partner)*:

Trade name*:

Registered office*:

Company registration number*:

reklamacia@gopass.sk

*(*Please fill in based on the invoice of the purchased service.)*

I hereby withdraw from the contract regarding this Service.

- Order date/acceptance date:
- Service description:
- Name and surname:
- Address:
- Signature (only if this form is submitted in writing):
- Date: