

## Cancellation form

If you wish to cancel this contract, please complete and submit this form.

M.I.S.S. GmbH  
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82418 Murnau  
Germany  
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Fax: +49 (0) 8841 4874616

I/We (\*) hereby give notice that I/We (\*) cancel my/our (\*) contract of sale of the following goods (\*) /for the supply of the following service (\*),

\_\_\_\_\_  
\_\_\_\_\_

Ordered on (\*) \_\_\_\_\_ / received on (\*) \_\_\_\_\_

\_\_\_\_\_  
Name of consumer(s)

\_\_\_\_\_  
Address of consumer(s)

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

\_\_\_\_\_  
Date

(\*) Delete as appropriate