

**FORM FOR WITHDRAWAL FROM CONTRACT**

.....

Place and data

.....  
First name and family name

.....

.....  
Address

Wydawnictwo Naukowe UAM

A. Fredry 10, 61-701 Poznań

Dział Handlowy: tel. 61 829 46 40, fax 61 829 46 47

press@amu.edu.pl

I hereby inform of my withdrawal from the sales contract for the following Goods:

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

Date of receipt of the Goods: .....

..... signature