

To:

Interkultureller Sprachendienst Medizin

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I/we (*) hereby revoke the contract concluded by me/us (*) concerning the purchase of the following goods (*) / rendering of the following service (*)

Date ordered (*) received (*)

Name of the consumer(s)

Address of the consumer(s)

Signature of the consumer(s) (only in case of revocation on paper)

Date

(*) Please cross out inapplicable options