

**TO PRODUCT RETURN OFFICE**

**WITHDRAWAL FORM SAMPLE**

Dear Customer,

In case you wish to return the product you have purchased, you can send it or deliver it to us in its original state and packaging, within 14 calendar days from the date it was delivered to you.

You may exercise your purchase withdrawal/product return right by sending to us the withdrawal form or the products within 14 calendar days.

The **completed withdrawal form can be send** in the following ways :

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- by post to the company "N. Davaris & Associates" with distinctive title "ADAsoft " at the following address: 29 Geraka Avenue, 15344 Gerakas, Attiki, Greece

**or**

- via email to the following email address: [sales@adasoft.gr](mailto:sales@adasoft.gr)

**or**

- via fax at +30 210 6048730

Or you may contact ADAsoft by phone at the following customer service line : +30 2130444521

**The products may be returned** within 14 calendar days from the delivery date at the customer's expense at ADAsoft's main offices at 29 Geraka Avenue, 15344 Gerakas, Greece. The products may also be returned physically by the customer in person at the same address mentioned above.

As soon as we receive the withdrawal form, you will receive a receipt acknowledgement from us. After we receive the products we will examine them and we will refund to you the full purchase price (less any return shipment expenses or product value depreciation), always within 14 calendar days from product return, via the IBAN bank account that you have filled in the Withdrawal Form, unless otherwise agreed.

Please keep the invoice/delivery note of the purchased products.

Best Regards,

ADAsoft Team

## WITHDRAWAL FORM

Dear ADAsoft,

I hereby declare that I withdraw from our remote contract and I wish to return the product(s) delivered to me by

invoice number , dated:

I received the products described in the above invoice on :

Sender	
First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Address:	<input type="text"/>
Zip Code:	<input type="text"/>
City / Country:	<input type="text"/>
IBAN Bank Account:	<input type="text"/>

Signature

(only if the present document is sent in hard copy )

-Date            /   /