STANDARD CANCELLATION FORM

(This form is to be filled in and returned only if you want to exercise the right of cancellation)

To:Ole Mathiesen A/S
Østergade 8
DK-1100 Copenhagen K

Fax: +45 33 11 65 70

E-mail: webshop@olemathiesen.dk

Date: _____

I hereby notify Ole Mathiesen A/S	hat I would like to exercise the right of cancellation in connection with my purchase agreement for the followi products/services:	ng
Ordered on:	Received on:	
Name of consumer:		
Address of consumer:		
Consumer's signature (only if the form is filed in hard copy):		