



Withdrawal Form

Calzaturificio Gal.men S.r.l.  
Sede Legale: Via Fonte Giugliano, 4/6 63812 Montegranaro (FM) ITALIA  
P.IVA: 01039880446

Name \_\_\_\_\_

Surname \_\_\_\_\_

Address \_\_\_\_\_

I take advantage of the right of withdrawal of the following articles:

| SKU   | SKU   |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Order N° \_\_\_\_\_

The refund can be requested using the same payment method used for the initial transaction

Data \_\_\_\_\_

Signature \_\_\_\_\_

This Withdrawal Form must be completed and sent according to the means used, to the following addresses:

CALZATURIFICIO GAL.MEN S.R.L., Via Fonte Giugliano, 4/6 - 63812 Montegranaro (FM);

e-mail: [customercare@primabase.it](mailto:customercare@primabase.it)