



KOKKON®

Revocation form

If you wish to cancel the contract, please fill out this form and send it back to us:

KOKKON Store
Rathenastr.20
30159 Hannover, Germany

In case of revocation by fax to: +49 (0) 511-4500-7035 or by email to: info@kokkon.com.

I/we(*) hereby cancel the contract concluded by me/us(*) for the purchase of the following product(s) (*)

Ordered on (*) Received on (*): _____

Order number: _____

Name and first name of the consumer: _____

Consumer's address (street, house number, post code, town, country)

Street, house number: _____ , _____

Postcode, city: _____ , _____

_____ Country:

_____ Signature of the consumer(s) (only if communicated on paper)

Date: _____ (*) Delete as applicable.