

RESOLUTION FORM

This form must be completed and sent to Aknout Cosmetics, Lda. if you wish to terminate the contract.

The right to terminate the contract will expire 14 days following the date of receipt of the product.

You can send this form to AKNOUT COSMETICS, Lda., by post, to the following address: Edifício Arcis - Rua Ivone Silva, n.º 6, 4.º, 1050-124 Lisboa, Portugal, or by e-mail to geral@aknout.com:

I herein inform my decision to terminate the purchase and sale agreement relating to:

- order number: _____

- date of the Purchase: ____ / ____ / ____

- date of receipt of the product: ____ / ____ / ____

- order description: _____

Customer name: _____

Customer Address: _____

Customer Signature

(Exclusively for the forms sent by post)

Date: ____ / ____ / ____