

## Revocation Form

If you want to withdraw from the sales contract concluded with us, please fill in this form and send it to the following address:

regiospectra Verlag  
Straßmannstr. 143  
12051 Berlin

E-Mail: kontakt@regiospectra.de

Fax: +49 (0)30 484987479

I/we\* hereby withdraw from the sales contract concluded for the following items:

Author:

Title:

ISBN:

Order No.:

Oder Date:

Delivery Date:

Please fill in your name and address:

Date:

Signature:  
(only paper based)

\* Please delete where applicable.