RESOLUTION AND RESILIATION FORM

(detachable from schedule)

TO BE COMPLETED BY THE MERCHANT
To:
(name of merchant)
(address of merchant or representative)
(massess of sectional of september 1)
Telephone number of merchant or representative:
()
Fax number of merchant or representative:
()
Technological address of merchant or representative:
TO DE COMPLETED DATE CONSTRUCTO
TO BE COMPLETED BY THE CONSUMER
DATE: (date on which form is sent)
Under section 187.21 or 187.26 of the Consumer Protection Act, I hereby cancel contract No (contract number, if any) entered into on
Telephone number of consumer: ().
Fax number of consumer: ()
Electronic address of consumer:
(address of consumer)
(signature of consumer)