

FORM FOR UNILATERAL TERMINATION OF AGREEMENT

Company contact information:

Name: Diversus res d.o.o.

Registered office: Frankopanska 6, 10000 Zagreb

Phone number: 01-7777-890

E-mail: heraldi@heraldi.hr

Customer contact information

Name:

Surname:

Address:

Phone number

E-mail:

I, _____ hereby declare that I unilaterally terminate
the Purchase Agreement for the following goods _____,
which were ordered on _____, and received on _____.

The order number is _____

Date: _____