

## REVOCATION FORM ADVANCED/QUALIFIED CERTIFICATE FOR ELECTRONIC SIGNATURE

To: InfoCert S.p.A. Head of *Digital Certificate Service* 

Address: Piazza Luigi da Porto 3 35131 Padua, Italy

Fax: +39 06 23328861 E-mail: <u>firma.digitale@legalmail.it</u>

Date: .....

Dear Company,

I,\_\_\_\_\_, herewith inform you that I wish to revoke the

following

(name and surname)

advanced/qualified electronic signature certificate:

USERNAME	
PASSPORT ID / ID CARD serial number used at the moment of subscription	
CERTIFICATE IUT	

Please inform us about the reason of this request:

A copy of the ID Document is attached.

(Signature)



INFOCERT S.p.A. COMPANY SUBJECT TO THE MANAGEMENT AND COORDINATION OF TINEXTA S.P.A. REGISTERED OFFICE | PIAZZA SALLUSTIO, 9 00187 ROME (ITALY) | T +39 06 836691 | F +39 06 833669634 | W INFOCERT.IT – INFOCERT.DIGITAL | E INFO@INFOCERT.IT P.IVA/CF 07945211006 | REA NR. 1064345 | SHARE CAPITAL SUBSCRIBED AND PAID-UP EUROS 21.099.232,00