

*Please print out these pages. These are your instructions, forms and information about DNA testing and the service we provide.*

## HOME PATERNITY TESTS

DNA SOLUTIONS was the first company to offer home collection kits for paternity testing back in 1997. This allowed people for the very first time to take their own samples, and mail them in for processing, allowing for rapid and cheaper testing.

## LEGAL PATERNITY TESTS

Unlike the Home paternity tests, legal paternity tests require us to take your samples, witness your identification and use a passport sized photo on your paperwork to ensure identity of who we are testing.

The result from a legal paternity test will be recognized and accepted by law courts and government departments.

## EXPLANATION OF THE TESTING

In general, the DNA of individuals is similar, however there are small regions that demonstrate variability. Parentage testing is based on comparing these variable regions from each of the people involved in the test.

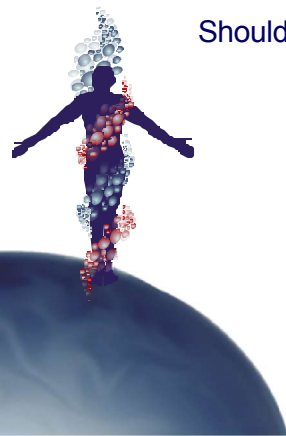
The DNA extracted from the Mother's sample is compared with that from the child. Any DNA the child has that the Mother does not have MUST come from the biological Father. We compare this with the sample from the nominated Father. If this does not contain ALL of the DNA, he is excluded as being the biological father.

If the DNA does match, we then calculate the likelihood of a person chosen at random from the population, having the same genetic makeup at the sites we have examined. A close blood relative of the putative father (e.g. brother) may have a similar chance of paternity if not excluded. We there recommend that in the situation where putative fathers are close blood relatives, both are tested when possible.

The testing process takes about 8 - 12 working days to complete once we have received all samples. In cases where only a single parent is tested, a pre-natal sample is used, or the putative Fathers are close relatives, it may result in a longer time-frame to report the results, as additional work is often required.

A copy of the report will be issued to all *adult participants* or their representatives. The paying *participant* will receive the original report and all other parties will receive a copy. The report will not be released until the test has been paid for in full. Please note we can send out accounts for government departments requesting DNA tests.

Should you have any further questions in relation to this test, please contact DNA SOLUTIONS.





[www.dnanow.com](http://www.dnanow.com) TEL: 888-900-9040

## DNA PATERNITY TEST COSTS

The legal paternity test is \$299 for father, mother and child (or just father and child).

For each additional child, or another possible father you need to add \$175.

Our home paternity tests (our non-legal tests) are between \$189 and \$289, which are excellent value considering that we test 18 regions of DNA in each person (\$189), or we can test an amazing 23 regions of DNA in each person (\$289), being the only laboratory in the world to test more than 16 informative regions of DNA in each person.

## DNA SOLUTIONS - The company

Rest assured with DNA SOLUTIONS accreditations, qualifications and experience. DNA SOLUTIONS has been performing paternity tests since 1996 with qualified scientists and doctors. To date we have carried out over 100,000 DNA tests, and boast a state of art DNA facility with cutting edge DNA analysis techniques and equipment.

- ISO 17025 certified DNA testing laboratory.
- Paternity testing since 1996, having performed over 100,000 tests.
- Qualified and experienced scientists
- State of the art DNA testing facility
- online chat support 22/hours a day in English, Spanish, German and French.

## OTHER RELATIONSHIP TESTS

DNA SOLUTIONS also has a variety of other relationship tests, such as brother to brother, sister to sister, grandparent to grandchild, twin zygosity testing, etc.

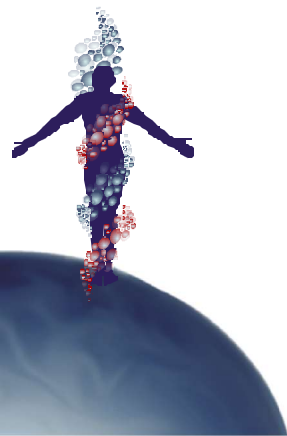
Please contact us to discuss any other biological relationship tests.

## USING THE FORMS (next pages)

The next 3 pages contain the forms for the Legal Paternity Test. If the father is not being tested with the mother, then you will need two copies of the next 3 pages (3 pages for each person). If you are all having your samples taken together, then you only need one lot of forms.

Each person being tested will need to have two passport sized photos.

**Call us on 888-900-9040 for the location of the nearest collection center.**



PATERNITY TESTING PAYMENT FORM

**PLEASE CHECK IN THE APPROPRIATE BOXES BELOW:**

**Payment Amount**

- I am having a test with 1 alleged father, 1 child and 1 mother's sample: \$299
- I am having a test with 1 alleged father and 1 child only: \$299
- I am including \_\_\_\_ additional Children and/or \_\_\_\_ other alleged Fathers \$175.00 per additional person

**Results**

Please issue my results in normal working time (7 - 10 working days)

Please Express my test in lab (3 days from time samples arrive in lab), a fee of \$495 extra applies

**Payment Allocation**

Name: \_\_\_\_\_

I will be paying the full total amount of: \$ \_\_\_\_\_

I will be paying the partial amount of: \$ \_\_\_\_\_

the remaining amount will be paid by:

Name: \_\_\_\_\_

**Payment options:**

Visa       MasterCard       Money Order

Paypal (dnapay@dnasolutions.org)

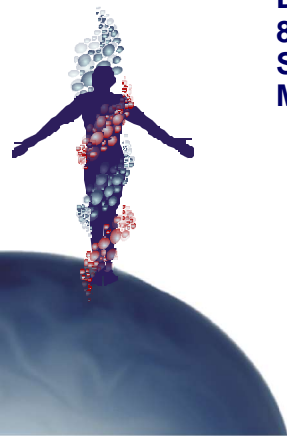
*Please make Money Orders payable to **DNA SOLUTIONS**.*

Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signed: \_\_\_\_\_

**DNA SOLUTIONS LLC.**  
80 SW 8th Street  
Suite 2000  
MIAMI FL 33130





www.dnanow.com TEL: 888-900-9040

**CLIENT AUTHORIZATION FORM / CHAIN OF CUSTODY**

**To Collector:** Names must be provided for **ALL** parties to be tested, even if they are not present at the time of sample collection. For each party that **IS** present for collection, all requested information is required.

**Requesting Agency:** DNA SOLUTIONS - TEL 1-88-900-9040 \_\_\_\_\_

**Collection Site:** \_\_\_\_\_ State: \_\_\_\_\_  
 \_\_\_\_\_ CITY STATE ZIP

<b>MOTHER</b>	<b>Last Name</b> (Please Print)		<b>First Name</b> (Please Print)			
	Race (Please circle one): Caucasian Black Hispanic Other:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		<b>OFFICIAL USE ONLY</b>			
	Have you had a blood transfusion within the past 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever had a bone marrow or stem cell transplant? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>CHILD</b>	<b>Last Name</b> (Please Print)		<b>First Name</b> (Please Print)			
	Sex (Please circle one) Male Female:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		<b>OFFICIAL USE ONLY</b>			
	Have you had a blood transfusion within the past 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever had a bone marrow or stem cell transplant? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>ALLEGED FATHER</b>	<b>Last Name</b> (Please Print)		<b>First Name</b> (Please Print)			
	Race (Please circle one): Caucasian Black Hispanic Other:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		<b>OFFICIAL USE ONLY</b>			
	Have you had a blood transfusion within the past 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever had a bone marrow or stem cell transplant? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>ADDITIONAL PARTY</b>	<b>Last Name</b> (Please Print)		<b>First Name</b> (Please Print)			
	Role of Add'l Party (Please circle one): 2nd Alleged Father 2nd Child If Child, Sex: Male Female					
	Race (Please circle one): Caucasian Black Hispanic Other:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		<b>OFFICIAL USE ONLY</b>			
	Have you had a blood transfusion within the past 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Have you ever had a bone marrow or stem cell transplant? <input type="checkbox"/> Yes <input type="checkbox"/> No					

**Statement of Consent and Release**  
 As a party to this disputed paternity case and/or representative of the child(ren) in said case, I hereby consent to the procurement of biological samples, photographs and fingerprints. I understand that if I am accompanying the above-named child(ren) and am misrepresenting my legal right to have biological samples collected from said child(ren), DNA SOLUTIONS, (or DNA NOW USA) or ORCHID GENESCREEN shall not be held liable in any future legal proceedings regarding this disputed paternity case. I understand that the biological samples will be used for genetic testing and may be stored for future testing, if required. The results of this testing may be used in a court of law to assist in determination of parentage of this child(ren). I have initialed the label(s) on the specimen container(s) are correctly identified as containing my and/or the child(ren)'s specimen(s).

Mother's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 Alleged Father's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 2nd Alleged Father's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 Guardian's Signature \_\_\_\_\_ Date: \_\_\_\_\_



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**SAMPLE COLLECTOR'S STATEMENT:**  
 I have drawn, collected, packaged and sealed these sample(s), and I have no legal interest in the final outcome of the genetic testing.

on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
Day Month Year  
 at \_\_\_\_\_ AM / PM.

I affirm, under the penalties for perjury, that no tampering with the specimens occurred while the specimens were in my control.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

\*Must be completed by collector\*

**To Specimen Collector:**

As needed, obtain positive identification from the Client(s) and have them sign and attest to the following:  
 "I have visually and positively identified the other parties in this case."

**Mother's Signature:**  
 \_\_\_\_\_

**Alleged Father's Signature:**  
 \_\_\_\_\_

Attach photo here

Attach photo here

Attach photo here

Attach photo here

Attach Copy of ID Here (please use tape)  
 (if required)

**Addresses, where results are to be mailed:**

**Mother:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Alleged Father:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TO BE COMPLETED BY LABORATORY STAFF ONLY**

Specimen Inventory		
	S	B
M		
C		
AF		
Oth		

Outer Package Sealed:  Yes  No  
 Inner Package Sealed:  Yes  No

I hereby certify, understanding the penalties for perjury, that I have received the above mentioned specimens at \_\_\_\_\_ and there is no evidence that the package has been opened or that the specimens have been tampered with.

\$\$ Received: \_\_\_\_\_ Received By: \_\_\_\_\_  
 MO / Check / Visa / Mastercard / Amex / Cash Date: \_\_\_\_\_

Case #: \_\_\_\_\_ CIRCLE ONE Test Set #1: \_\_\_\_\_ Test Set #2: \_\_\_\_\_