

Thank you for choosing our laboratory for your DNA analysis.



Vaterschaftsanalyse

Please fill in your data from step 1 to 4 and sign at all the orange crosses.  
All DNA tests must have a witnessed sampling. See step 4/4

## Step 1 / 4 : Choose your analysis and sign for your order

Service/ Analysis	Price	total €
<b>Paternity Test DUO</b> , alleged father & child, 24 DNA markers	149 €	
Maternity Test Duo, mother and child, 24 DNA markers	149 €	
<b>Additional participant</b> for DNA Tests „DUO“	70 €	
<b>Paternity Test Premium</b> , alleged father & child or alleged father, child & mother. 31 DNA markers	299 €	
<b>Express-Service</b> (only for paternity testing) Results send 1 working day after receipt of samples + payment	299 €	
<b>Relationship Analysis</b> , up to 3 participants, 24-45 DNA markers	489 €	
<b>Twin Zygoty Testing</b> . 2 participants.	170 €	
<b>Sibling Test</b> , up to 3 participants, 24-45 DNA markers. Determines half and full siblings	489 €	
<b>Additional participants for above tests</b> (add. alleged father, child or further relations)	119 €	
Test for presence of <b>Bodyfluids</b>	125 €	
<b>Analysis of trace samples</b> (stamps, glasses frame, earplugs, comb, etc)	125 €	
<b>DNA report</b> , send by email in advance (PDF)	10 €	
<b>Witnessed collection of samples</b> in our business premises	79 €	
Organisation of witnessed <b>taking of samples abroad</b>	249 €	
Additional calculation of paternity/maternity	20 €	
Re-sending of original DNA Report after loss	25 €	

I hereby commission Eurofins Medigenomix Forensik GmbH to carry out the analyzes and additional services marked above. I have read the terms and conditions and data protection declaration and accept them by placing this order. I agree to the terms of the contract. A repeat test is routinely carried out with the second sample in the event of paternity exclusion.

Place, date & signature



## Step 2 / 4: Payment Method (please remember to pay in advance):

Please provide the order ID in the reference text of your payment. Only then we can match the payment with your order and samples.

### Paypal Payment

to our email address: [VaterschaftsTests@eurofins.com](mailto:VaterschaftsTests@eurofins.com)

### Bank Transfer

Kontodaten:

(from non-EU countries please add additional the bank fees)

Account Holder: Eurofins Medigenomix Forensik GmbH

UniCredit Acct No: 7000 0026 50

Bank sorting code: 207 300 17

IBAN: DE52 2073 0017 7000 0026 50

SWIFT (BIC): HYVEDEMME17

### Credit Card Payment





We will send your personal payment link to your email address

Your mail address: \_\_\_\_\_

Order ID: \_\_\_\_\_

### Step 3 / 4 : Personal data, signatures & consents

Please sign at the orange cross. Missing signatures may delay the start of your analysis

<b>Possible Father</b>		Yes, I consent to this DNA analysis DNA acc.to the enclosed information 	
First Name			
Last Name		<b>Sending of DNA report:</b> Yes, please send me a DNA report <input type="checkbox"/> by postal mail	
Street, number		by email to: _____	
Postcode, town			
<b>Mother</b>		Yes, I consent to this DNA analysis DNA acc.to the enclosed information: 	
First Name			
Last Name		<b>Sending of DNA report:</b> Yes, please send me a DNA report <input type="checkbox"/> by postal mail	
Street, number		by email to: _____	
Postcode, town			
<b>Child</b>		<b>Child is under age? All persons having custody sign</b>	
First Name		Yes, I consent to this DNA analysis DNA acc.to the enclosed information 	
Last Name		<b>Sending of DNA report:</b> Yes, please send me a DNA report <input type="checkbox"/> by postal mail	
Street, number		by email to: _____	
Postcode, town			
<b>additional participant</b>		Yes, I consent to this DNA analysis DNA acc.to the enclosed information 	
First Name			
Last Name		<b>Sending of DNA report:</b> Yes, please send me a DNA report <input type="checkbox"/> by postal mail	
Street, number		by email to: _____	
Postcode, town			

Keep this place clear for internal information			
	Possible Father	Mother	Child or additional participant
Barcode			Child or additional participant

For laboratory comments only

If you have comments to add please use an extra sheet