

DT Order Form for Paternity Test

1. Client Information

Last Name, First Name
Street Address
City, ZIP Code, Country
Phone number
Fax number
E-Mail

2. Order Details (please check)

Costs

Paternity Test „DelphiTest Economy“ : Analysis of 16 DNA regions	
<input type="checkbox"/> Analysis Father/Child	€ 185
<input type="checkbox"/> Analysis Father/Mother/Child	€ 215
<input type="checkbox"/> Additional Persons to be tested _____ (please indicate how many)	€ 79 per person
Paternity Test „DelphiTest Basic“ : Analysis of at least 16 DNA regions; Guaranteed probability as shown in parenthesis	
<input type="checkbox"/> Analysis Father/Child (>99,9%)	€ 349
<input type="checkbox"/> Analysis Father/Mother/Child (>99,99%)	€ 369
<input type="checkbox"/> Additional Persons to be tested _____ (please indicate how many)	€ 79 per person
Paternity Test „DelphiTest Premium“ : Analysis of at least 27 DNA regions; Guaranteed probability >99.99999%	
<input type="checkbox"/> Analysis Father/Child	€ 599
<input type="checkbox"/> Analysis Father/Mother/Child	€ 639
<input type="checkbox"/> Additional Persons to be tested _____ (please indicate how many)	€ 149 per person

Our prices include all fees and taxes.

3. Sample Details

<input type="checkbox"/> Oral fluid (buccal swabs)	no additional charge
<input type="checkbox"/> Blood or non-standard samples (e.g. toothbrush, cigarette butts, chewing gum, hair incl. hair root, drinking glass, coffee spoons etc.)	Additional charge of € 99 per person tested

4. Turnaround

<input type="checkbox"/> Regular Service	no additional charge
<input type="checkbox"/> Express Service - processing of your order within:	
<input type="checkbox"/> one business day	Additional charge of € 499 additional charge for weekends or holidays of € 149
<input type="checkbox"/> 3 business days	Additional charge of € 149
<input type="checkbox"/> 5 business days	Additional charge of € 99

We will begin your analysis after we receive all samples and the testing fee. If you have an express order - we guarantee your test results within the timeframe you have indicated and paid for. Delays are possible when using non-standard samples, especially if the quality of the samples is not good. If we cannot analyze your sample because of poor quality, you can send a replacement sample once without incurring additional fees.

Total Cost for Your Order:

€

5. Persons to be tested

Person*	Name	Date of Birth (voluntary)	sex		Sample details	
			male	female	oral fluid	non-standard
Father			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Please indicate relationship for additional persons listed (e.g. child2, alleged father2).

Additional Information*

Ethnicity of the father: Caucasian African Asian (please check)

* Please indicate special family relationships (e.g. the children are twins, alleged father has a twin brother, father2 and father1 are related)

6. Receiving the Results

Please check how you wish to receive the results. If you check nothing, we will mail the results to the address in section 1.

Mail to address of client in section 1

Do not mail

Mail to a different address as listed here:

Contact me via Phone

Contact me via Telefax

Contact me via E-Mail

We would like to point out that DelphiTest might not be able to determine if the client or a contact person listed in section 6 are in fact authorized to receive the test data. We therefore cannot be held liable. It is the responsibility of the client to ensure that the results are not passed on to third parties.

7. Treatment of Data

We will destroy all samples after the analysis is completed. I want DelphiTest to destroy the data

after I have received the test results.

at a later point of time, when I request the destruction of the data.

Your signature is binding and acknowledges that you have read and understood our terms and conditions.

Date

Signature

Bank Account
for our German customers:
Deutsche Bank Regensburg
Bank Code 750 700 24
Account Number 32 34 994

Bank Account
For our international customers:
Deutsche Bank Regensburg
IBAN: DE67750700240323499400
BIC/SWIFT: DEUTDEDB741

CEO
Frank Pfannenschmid, PhD
Registered at Amtsgericht Regensburg
HRB 9254
Tax ID: UID DE233478280