

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.

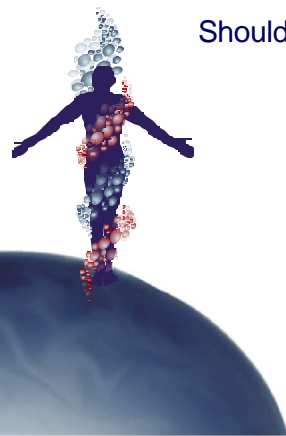
The DNA extracted from the Mother's sample is compared with that from the child. Any DNA the child has that the Mother does not have MUST come from the biological Father. We compare this with the sample from the nominated Father. If this does not contain ALL of the DNA, he is excluded as being the biological 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 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 \$489, which are excellent value considering that we test 16 regions of DNA in each person (\$189), or we can test an amazing 23 regions of DNA in each person (\$489), 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 for over 12 years with qualified scientists and doctors. To date we have carried out over 70,000 DNA tests, and boast a state of art DNA facility with cutting edge DNA analysis techniques and equipment.

- ISO 17025 certified DNA testing laboratory.
- 12 years of paternity testing, having performed over 70,000 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.

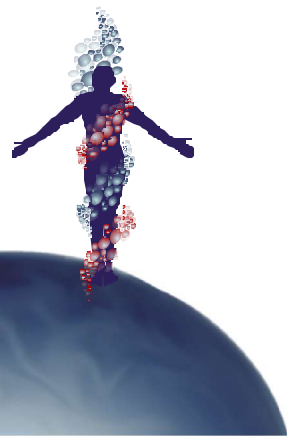
Please contact us to discuss any other biological relationship tests.

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.





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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:

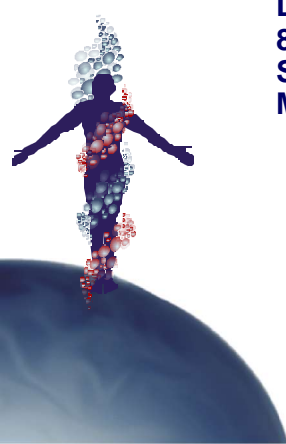
- Visa MasterCard Money Order Paypal (dnapay@dnasolutions.org)
- Please make Money Orders payable to **DNA SOLUTIONS**.*

Card Number: _____ / _____ / _____ / _____

Expiry Date: _____ / _____

Name on Card: _____ Signed: _____

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





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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

MOTHER	Last Name (Please Print)		First Name (Please Print)			
	Race (Please circle one): Caucasian Black Hispanic Other:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		OFFICIAL USE ONLY			
	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						
CHILD	Last Name (Please Print)		First Name (Please Print)			
	Sex (Please circle one) Male Female:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		OFFICIAL USE ONLY			
	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						
ALLEGED FATHER	Last Name (Please Print)		First Name (Please Print)			
	Race (Please circle one): Caucasian Black Hispanic Other:					
	Social Security No.:		Other ID No.:			
	Date of Birth:		OFFICIAL USE ONLY			
	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						
ADDITIONAL PARTY	Last Name (Please Print)		First Name (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:		OFFICIAL USE ONLY			
	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: _____