

Paternity Depot

NOT PAID

Toll-Free 1-877-842-4827 Email: info@paternitydepot.com

Paternity Analysis UP

Potential Father's Name: _____

Child 1: _____ **Child 2:** _____

I have read the Terms on this sheet and agree in accordance to the conditions with having the provided biological samples undergo analysis.

Signature : _____ Date: _____

(In case of child under 18, parent or guardian must sign)

Receiving Results

Once we receive your DNA samples we will email you a Case ID and Pin number. You will be unable to access your results without your Case ID number. Follow the instructions in the email to check the status of your test, and to view and print your results when available. (PLEASE PRINT CLEAR)

Name: _____ **Phone Number:** _____

Email: _____

Name: _____ **Phone Number:** _____

Email: _____

Biological Sample Testing Terms and Conditions

Paternity Depot maintains the confidentiality of our customers and never discloses personal information or test results without prior client consent.1. Provisions of Services by Paternity Depot1.1 The analysis provided by Paternity Depot is prepared solely for the use of the client ordering the test. Paternity Depot makes no representation, expressed or implied that the result of the analysis is useful or purposeful for any other purposes other than information.1.2 Paternity Depot reserves the right to perform or have performed the testing and analysis using methods and processes Paternity Depot deems appropriate.2. Disclaimers and Liabilities2.1 Paternity Depot does not warrant; (A) that the services provided by Paternity Depot will meet the expectations of the client; or (B) that Paternity Depot's services will be free from defects or errors.2.2 I acknowledge and agree that Paternity Depot's liability to me arising out of or in any way related to the provision of testing services contemplated herein shall not exceed the cost of the test, and I agree to defend, indemnify and hold harmless Paternity Depot, and its officers, directors, employees and agents, from and against all further claims or damages. In addition, I agree to contact Paternity Depot immediately, but in any event, within 30 days from the date of the report, if I have any questions or concerns about the testing process or the outcome of the test.2.3 This test is being done without a documented chain of custody and is therefore not legal or definitive2.4 Any disputes arising from the tests performed, or this document, shall be governed by the laws of the Province of Ontario.

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Prices:

- \$47.00 for one father and one child paternity test
- \$35.00 per each additional person
- \$50.00 Discrete testing (Anything other than a mouth swab)

Payment Method: Visa MasterCard Amex Money Order

If paying by money order please make payable to: Paternity Depot

Credit Card Payment Information

Name on Credit Card : _____

Credit Card Number : _____

Exp. Date (MM/YY) : ___ / ___ SVC: (Visa/MC = 3 digits on back/*Amex = 4 on front) : ___ * []

Cardholder address : _____

City : _____ Country : _____

Postal Code: _____ Telephone : () _____ - _____

Cardholder Signature:

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Thank you for purchasing the Paternity Depot Home Sample Collection Kit for DNA analysis. This kit will enable you to easily prepare samples to submit to our laboratory for testing. Please take the time to read through all the instructions to ensure you understand how to collect your DNA sample and submit it to us correctly.

Instructions

Step 1

Complete the DNA analysis order form.

Step 2

Donors should not eat, drink (other than water) or brush their teeth for at least one hour prior to sample collection. You will need 4 swabs/Q-Tips for each person being tested. Brush the inside of one cheek vigorously for 30 seconds in an up and down motion as you rotate the swab/ Q-Tip to collect buccal cells.

Step 3

Place the swab/Q-Tips inside a white envelope for the person being tested. Each envelope should have the name of the person testing, as well marked, father or child. Repeat the process with a second, third and fourth swab for the same person using the other cheek, and place the swab/Q-tip into the same envelope. Do not seal the envelope yet. Repeat this step for each person being sampled

Step 4

Allow the swabs to air dry in their unsealed specimen envelopes for at least 20 minutes before sealing them. Please note it is common for the envelope to become wet from the swabs.

Step 5

Ensure you have correctly filled out the clients information on all envelopes as well as the order form, including signatures of consent. Insert the order form, method of payment and the sealed specimen envelopes into a larger mailing envelope and send it to us at:

**5999 South Park Ave Suite 130
Hamburg, NY
14075**

OR

**1232 Kingston Road
Toronto, Ontario
M1N 1P3**

If you have any questions regarding how to use this Home Sample Collection Kit, call us at 1-877-842-4827 or visit us at www.paternitydepot.com.