

SYNLAB MVZ Humangenetik Mannheim GmbH, Harrlachweg 1, 68163 Mannheim

Order for paternity assessment (DNA analysis) involving the following persons

All persons involved must submit a signed declaration of consent to the parentage assessment!

Mother	Surname, first name:
Address:	DOB:

<input type="checkbox"/> Daughter <input type="checkbox"/> Son	Surname, first name:
Address:	DOB:

Potential father	Surname, first name:
Address:	DOB:

Client	Surname, first name:
Address:	
Phone No.:	

The **payment** of EUR _____ (including statutory VAT) will be made by bank transfer cash payment.

Invoice No.: _____ Comments: _____

Special payment conditions: _____

Bank transfer: **SYNLAB MVZ Humangenetik Mannheim GmbH**
 UniCredit Bank – HypoVereinsbank Stuttgart
 IBAN DE80 6002 0290 0021 5245 81 BIC (Swift Code) HYVEDEMM473
 Please include the invoice number with the bank transfer!

I hereby confirm the above information and place an order for performance of a parentage assessment by way of DNA analysis. I received the general terms and conditions of SYNLAB MVZ Humangenetik Mannheim GmbH and accept the contractual conditions set out therein.

Place: _____, date _____ Client signature: _____

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