



**COPENHAGEN MEDICAL**



# COVID-19 ATTEST

First Name :  
**Allan Wiinholt**

CPR-number:  
**0811670677**

Surname:  
**Foght**

Phone Number:  
**4553638835**

COVID-19 test reply marked with a circle:

**NOT DETECTED (NEGATIVE)**  
(IKKE PÅVIST)

Test Type:

**SARS-CoV-2 (COVID-19)**  
**SD Biosensor STANDARD Q COVID-19 Ag Test (Nasal)**

Testing Location:

**COPENHAGEN GROUP A/S**

Date and Time of Sample Collection:

**2021-05-09 10:09:39**

Company responsible for the nasal swab test:

**Copenhagen Medical A/S**

Sankt Annæ Plads 11  
1250 Copenhagen K  
CVR: 29519226

The person being tested is informed about and accepts the test procedure, possible outcome, the final result and that Copenhagen Medical shares the information above including CPR-number with the Danish health authorities.

The test is performed under medical delegation by Copenhagen Medical A/S and complies with applicable rules cf. the publication 'The legal framework for offering tests in relation to COVID-19 from the Danish Agency for Patient Safety, the National Board of Health and the Danish Medicines Agency' of 7 October 2020. Questions regarding the test must be addressed to:

Copenhagen Medical A/S  
Sankt Annæ Plads 11,1.  
1250 København K

+45 61 40 44 49  
support@cphmed.com  
www.cphmed.com

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