



ACRC Gametes Donation
ACRC Global Fertility Holding Group

CD1406

Eye Color		Hair Color	Height
Hazel		Red	5'9
Ethnicity		Blood Type	Education
Caucasian		O	College
Donor Location		Date of Birth	
CA, USA		08-11-1993	





*247th Marine Corps Birthday
2nd Battalion, 4th Marine Regiment*







Physical Information

Eye Color

Hazel

Natural Hair Color

Red

Natural Hair Type

Wavy

Corrective Dental

No

Vision

Excellent

Complexion/Skin Tone

Fair

What is your occupation?

Senior Executive Administrator

Do you have any musical talents? If any, please list.

Average

Do you have any artistic abilities? If any, please list.

Average

Do you play sports or exercise?

Yes,

Basketball, volleyball, track, lifting, CrossFit

How often do you exercise?

6 Days per week.

Please describe your athletic abilities.

Very athletic.

Played many sports in highschool to include volleyball, basketball, track, and softball.

I work out every day, do CrossFit and lifting. I also love to run.

Please describe your personality.

Strong, independent, passionate, outgoing, calm, and funny.

Please describe your hobbies.

I enjoy spending time with my family and staying active. I love watching my son's football and rugby games, reading in quiet moments, spending time outdoors, and keeping things organized at home. I also enjoy planning fun activities and making the most of our time together.

Education

College & Military

Business Administration Minor Human Resources

Park University

GPA - 3.6

Reproductive Information

Have you ever been pregnant?

Yes

Number of Children, if any.

2

Current method of birth control.

Pills

How often do you get your menstrual period?

Monthly

Have you ever had an abortion, miscarriage, or ectopic pregnancy?

No

Estimated last date of PAP smear, normal or abnormal?

2025-01-15– Normal

Personal Health and Medical Information

Overall health condition

Excellent

Are you adopted?

No

If so, do you have your biological parents' information?

Yes

Do you have or have you ever had a serious health problem?

No

Are you currently treating any diseases? If so, please list.

No

Have you ever had any surgery (medical, dental or plastic cosmetic)?

2015-breast augmentation

Have you taken any medications within the past 12 months?

No

Have you ever had any surgery (medical, dental or plastic/cosmetic)?

No

Have you ever been diagnosed with cancer?

No

Do you have any birth defects?

No

Have you ever had syphilis or gonorrhea?

No

Have you ever had hepatitis B or C?

No

Have you ever had a blood transfusion?

No

Have you ever been rejected for a blood transfusion?

No

Have you ever had serious mental health issues?

No

Do you have any allergies?

No

Do you drink coffee? How often (daily or weekly)?

Yes, 1-2 per month.

Do you drink alcohol? How often (daily or weekly)?

Yes, 1-2 per month.

Do you smoke, vape, or use marijuana? How often (daily or weekly)?

No

Have you had a tattoo within the past 6 months?

No

Have you had a piercing within the past 6 months?

No

How is your hearing without a hearing aid?

Good

Have you ever had any complications with anesthesia?

No

Have you had any shots or vaccines given in the last 12 months?

No

Have you ever taken anti-malarial drugs or had malaria?

No

Family History

Have you or your immediate family suffered from infertility?

No

Does your family have twins or triplets?

No

Have any of your family members ever had a serious mental illness?

No

Do you or any of your family members have genetic disorders? No

Family Information

Please tell us some basic details about your biological mother.

Age and Health Status

63 - Healthy

Height

5'6

Weight

130 lbs

Hair Color

Brown

Eye Color

Hazel

Please tell us some basic details about your biological father

Age and Health Status

71- Healthy

Height

6'5

Weight

210lbs

Hair Color

Brown

Eye Color

Green

Please tell us some basic details about your biological grandparents

	Maternal Grandmother	Maternal Grandfather	Paternal Grandmother	Paternal Grandfather
Age and Health Status	92	9	88	91
Height	5'7	5'9	5'6	6'0
Weight	Na	180bs	120lbs	180lbs
Hair Color	Blonde	Blonde	Auburn	Red
Eye Color	Green	Green	Hazel	Green

Egg Donation History

Why do you want to become an egg donor?

I want to become an egg donor because I believe everyone deserves the chance to experience the joy of parenthood. As a mother, I know how deeply rewarding it is to love and raise a child, and I feel honored to help make that possible for someone else. If I can play a small part in helping another family grow, then it's something I'm proud to do.

If you could send a message to the Intended Parents. What would you say?

Thank you for considering me to be a part of something so special. I can only imagine how meaningful this journey is for you, and it's an honor to support you in such a personal and life-changing way. I hope this gift brings you one step closer to the family you've been dreaming of. Wishing you all the love, strength, and happiness as you move forward on this path—you deserve it.

What kind of contract do you want to sign with your prospective parents?

Anonymous

Have you donated eggs in the past?

No

Please list the date

N/a

Name of the clinic

N/a

Number of eggs retrieved.

N/a

Number of embryos that passed PGS testing.

N/a

Pregnancy outcomes (if known and applicable).

N/a