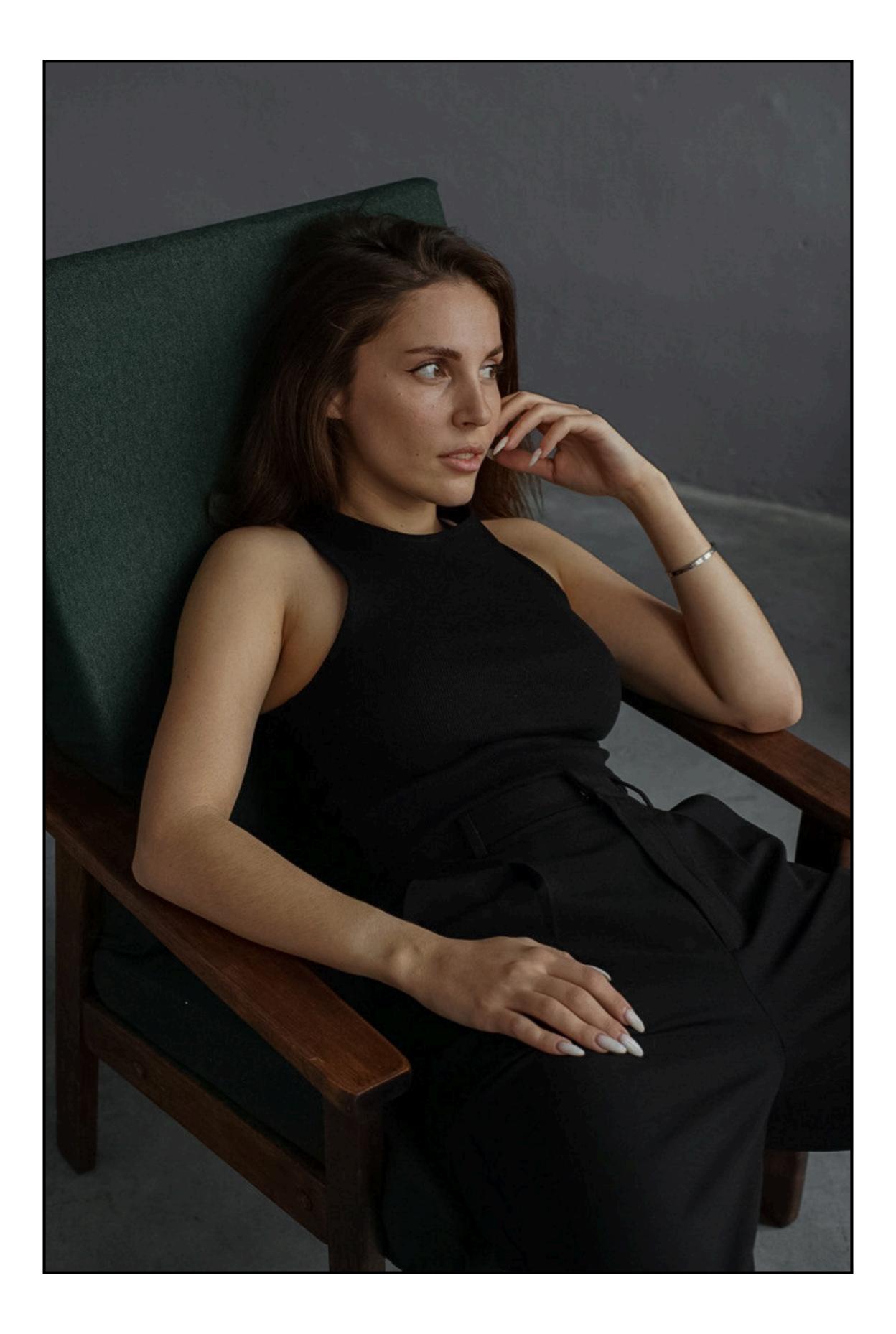
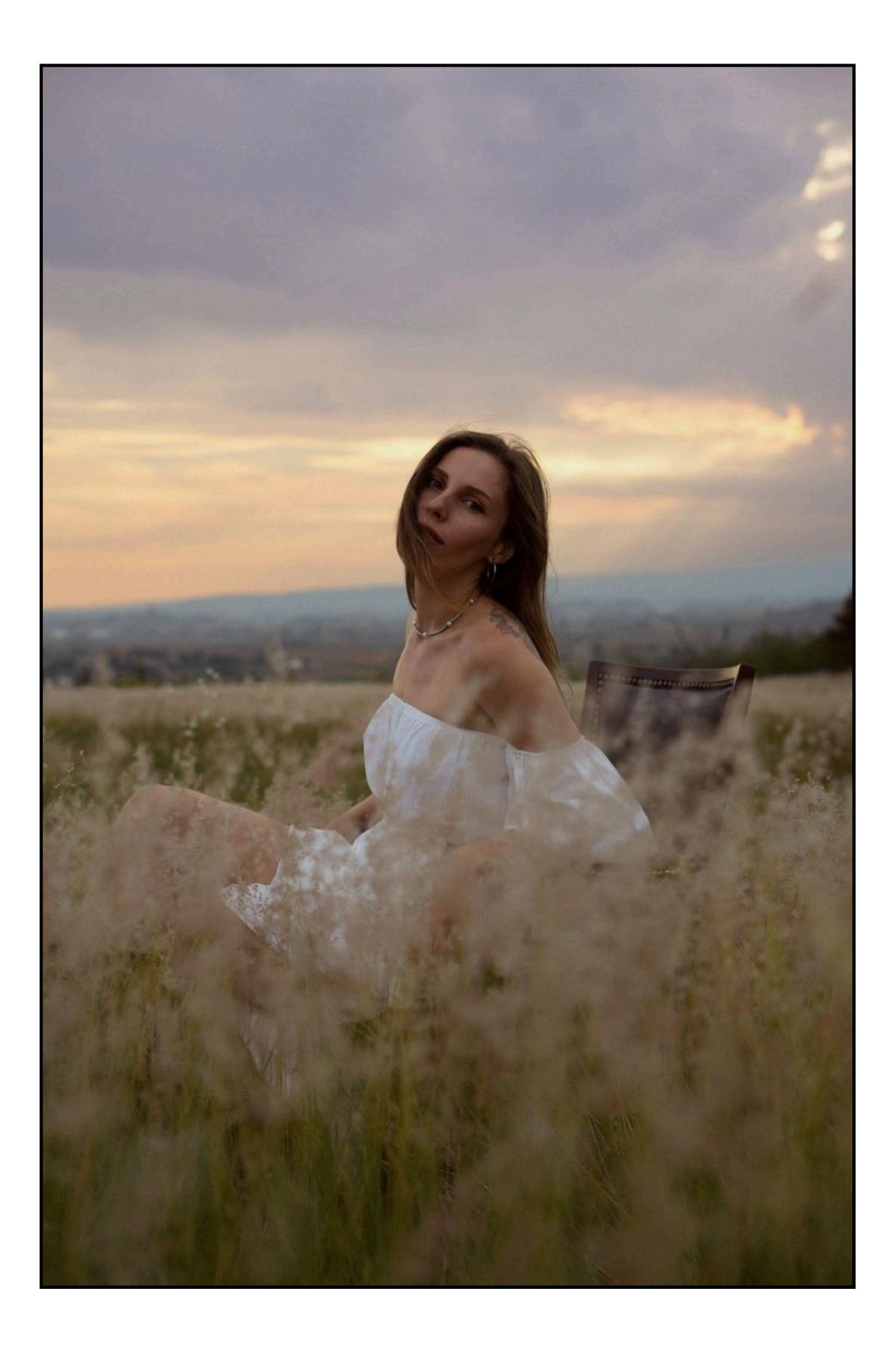


Donor Code : CD1414

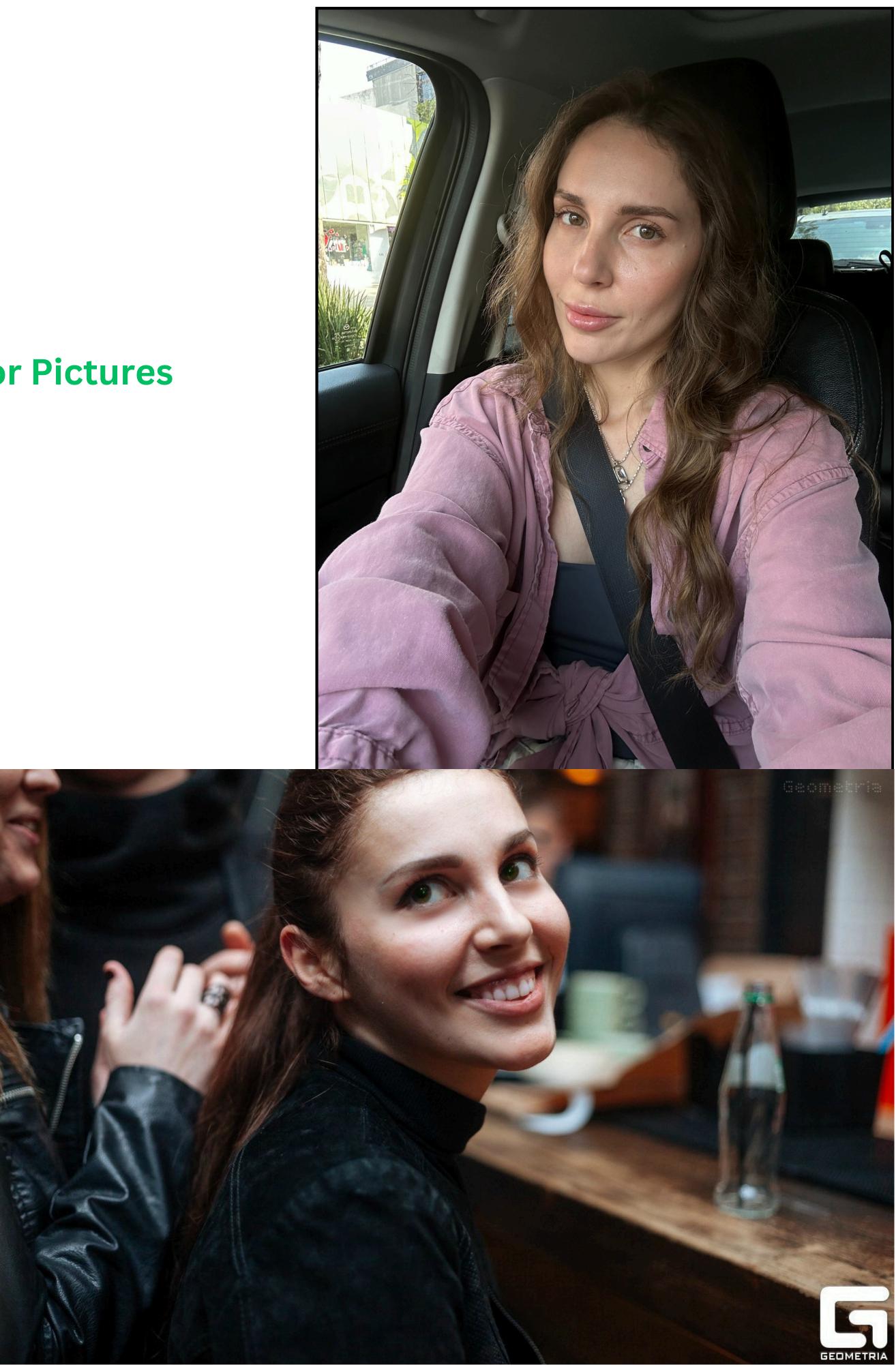


Eye Color	Hair Color	Height
Hazel	Brown	174 CM/ 59 KG
Ethnicity	Blood Type	Education
Caucasian- Russian	B	Technical School
Donor Location	Willing to Travel Out of State?	Date of Birth
Mexico	Prefer Japan	1994



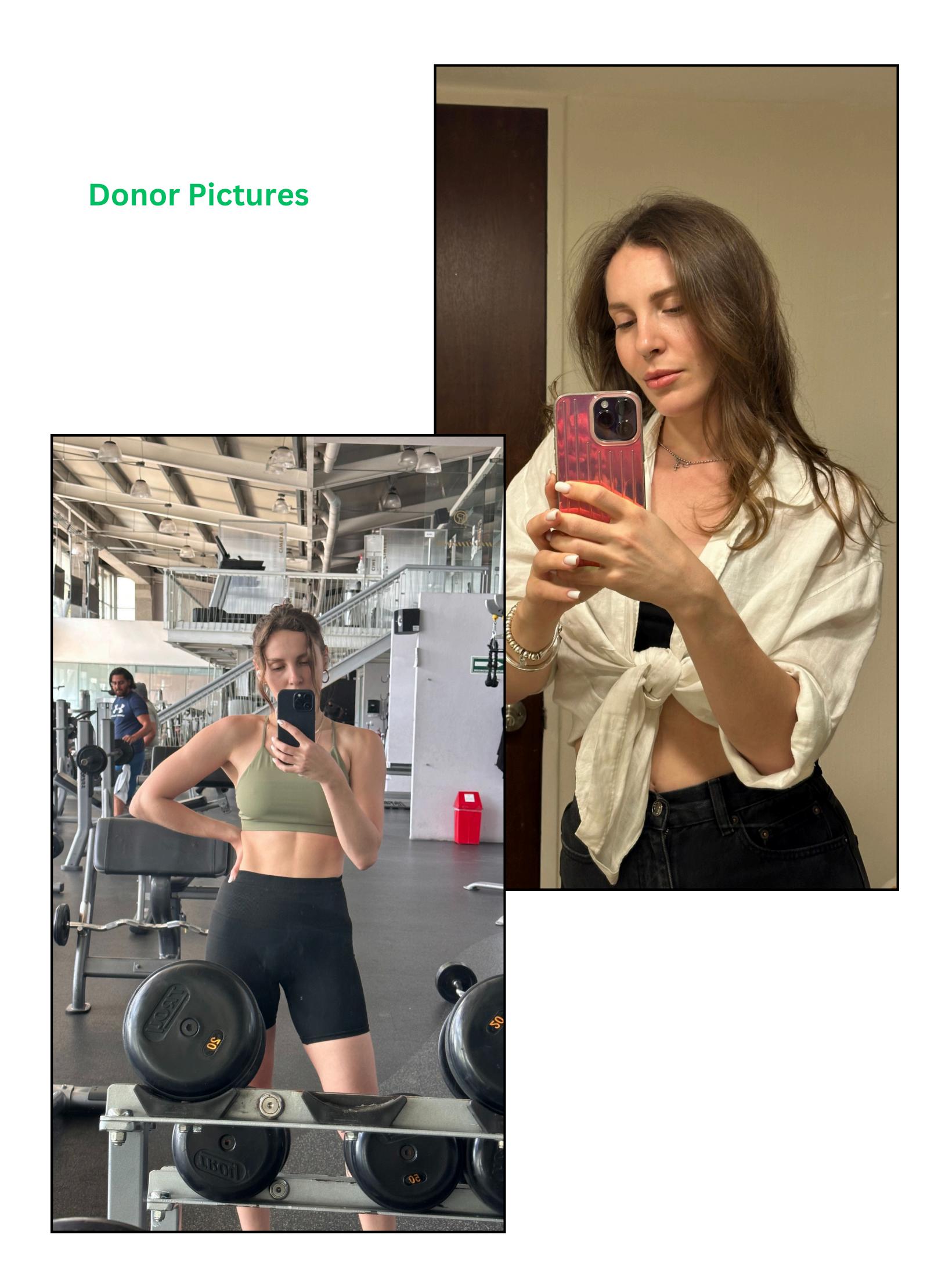
















♥ Favorite star

18+

About the person

Career Date of birth Place of birth

August • Leo Saint Petersburg , Russia

Actress

	Genres	Drama, melodrama, comedy	
Ct Add to folder	Total movies	1 ,2013—2013	



Physical Information

What is your occupation?

Enterpriser, Project Manager

Have you ever done plastic surgery before? Please Describe.

Yes

Education

The highest level of education completed?

Technical School Degree

Name of the university you have attended or graduated? what is your GPA

/

What is your major?

Director

What languages do you speak other than your mother tongue?

English, Spanish, Russian

Character/Personality

What are your hobbies?

In my free time, I love sculpting with clay — it's a meditative and creative process for me. I also enjoy spending time in nature, doing outdoor activities and sports. I like reading, watching meaningful films, and I absolutely love cooking. Exploring new recipes and creating meals for others brings me a lot of joy.

Describe your athletic abilities:

I'm a well-rounded athlete with a strong background in strength and cardio training. I have good stamina, flexibility, and coordination. I work out 5–6 days a week, combining weightlifting, running, and stretching.

Why do you want to become an egg donor?

I understand how difficult infertility can be, and I want to support others who are going through that journey. I'm healthy, responsible, and happy to share something that could truly change someone's life.

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

I have a good hearing

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

Yes, I was acting

Are you married?

If you had the opportunity to send a message to the parents, what would it be?

I want you to know that this decision comes from a place of love and respect. Even though we may never meet, I truly hope that my small part in your journey brings you happiness, strength, and the family you've been dreaming of. You deserve this joy, and I'm honored to help you get closer to it.

Do you exercise? If so, how frequently per week?

5 days a week, Calistenia, Gym, Dance

Describe your personality.

I'm a calm, emotionally stable, and empathetic person. I'm responsible, healthy, and lead a balanced lifestyle. I value honesty, kindness, and take commitments seriously.

Reproductive History

Have you ever been pregnant before and how was the outcome

0

Do you have regular monthly menstrual period? If no, please explain

YES, cycle 25 days

Have you ever been abortion before and how was the outcome NO

What form of birth control are you using? NO

Medical Information

Have you ever had or do you have any medical problems?

NO

Have you ever had or do you have any psychological problems?

NO

Have you ever received a blood transfusion?

NO

Have you ever had or do you have any serious illnesses or injuries?

NO

Do you have any chronic medical problems or conditions? NO

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

NO

Do you have any allergies? If yes, specify.

NO

Have you ever had surgery (including cosmetic surgery)?

NO

Do you drink coffee? If so, how often (per day, per week)? Daily

Do you consume alcoholic beverages?						
NO						
Do you smoke?						
NO						

Have you received vaccinations within the past 12 months?

NO

Has your sexual partner had AIDS, syphilis, gonorrhea, hepatitis B, or hepatitis C? If yes, what infections?

No

How is your hearing (without a hearing aid)? normal

Have you ever had a sexually transmitted disease?

NO

Do you have any close relatives with infertility?

NO

Have you ever done surgeries under any physical conditions?

NO

Have you taken any drugs in the past year?

NO

Have you ever been diagnosed with cancer?

NO

Does anyone in your family have hair loss (baldness)? NO

Have you gotten a tattoo / piercings recently? If yes, when?

NO

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

NO

Have your parents ever experienced infertility?

NO

Do you have family members who are twins or triplets?

NO

Donation History

Have you ever donated before?

NO

Family History

Relative	Age	Height/ Weight	Race	Hair/ Eyes Color	Education Level	Health
Father	49	6' 1/ 187.4	White	Brown/ Brown	Bachelor degree	deceased
Mother	50	5 '5/ 143	White	Dark brown/ Blue	Bachelor degree	healthy
Paternal grandmother	71	5' 6 / 154	Russian	Brown/ Blue		healthy
Paternal grandfather'	72	6' /	Russian	Light brown/ Blue		healthy
Maternal grandmother	69	5'1	Russian	Light brown/ Green		deceased
Paternal Grandfather	72	6' 2	Ukranian	Brown/ Blue		healthy