

EGG DONOR INFORMATION



DONOR ID #4407

SHORT BIOGRAPHY:

She is an music artist and producer, videographer, and founder of a young kimono brand. She explores herself and the world around her through creativity, focusing on music, video, and aesthetics. With a natural absolute pitch, She easily masters any musical instrument: she plays the violin, guitar, piano, electronic synthesizers, and drum machines, sings, and collects vinyl records.

DONOR PERSONAL INFORMATION

Location: Indonesia

Height: 5' 7"

Year of Birth: 2000

Weight: 119

Ethnicity: Caucasian

Eye Color: Hazel

Maternal Heritage: Maternal ancestry includes Russian, Tatar, and Khakas, which are minority ethnic groups in Siberia

Natural Hair Color: Brown

Parental Heritage: Paternal ancestry includes Russian, Jewish, and Polish

PERSONAL INFORMATION

WHAT IS THE HIGHEST EDUCATION LEVEL YOU HAVE ATTAINED?

Bachelor's degree

DO YOU HAVE A MENSTRUAL CYCLE EVERY MONTH?

Yes

PLEASE INDICATE WHAT TYPE OF BIRTH CONTROL YOU ARE CURRENTLY USING:

Condom

PLEASE DESCRIBE YOUR GOALS/AMBITIONS THAT YOU HAVE

I strive to live as an inspiring and expressive individual, fully expressing myself through creativity, music, and aesthetics. I aim to build meaningful, long-term connections, travel, and explore the world in all its forms of beauty and culture.

I dream of creating my own artistic home — a space where music, design, and human connections merge into a single living work of art. I am developing my clothing brand and multidisciplinary projects, moving through life with dedication to authenticity, freedom, and creative purpose.

DESCRIBE WHAT YOU WERE LIKE AS A CHILD.

I was a highly developed and curious child. My life path seemed to be shaped even before I was born. My mother, a music teacher and children's choreographer, dedicated her life to nurturing a love of art in children. She is active, youthful, and always ready for new challenges. She always dreamed of having a daughter and raised me to be a worthy individual with independent thinking.

Her approach to upbringing instilled in me discipline, a strong work ethic, refined taste, and a natural drive for creativity and self-expression. I genuinely enjoyed all my activities - almost all my free time was spent at classical music school, vocal lessons, dance classes, and athletics training. This routine cultivated my diligence, focus, and abilities in creative pursuits. I graduated from music school in violin, participated in competitions, and toured.

DESCRIBE YOUR FAVORITE MEMORY.

Throughout my life, I have experienced major turning points roughly every ten years - moments of profound change that always bring a wave of smaller and larger joyful experiences. Each of these shifts has been closely tied to a change of environment and an expansion of my world.

At 11, moving from a small, closed Siberian town to Moscow was a bold leap that opened up new horizons and possibilities. At 21, I moved to Bali on my own and instantly felt a deep connection to the place, as if it were the home of my soul.

One of the most unforgettable moments was the first time I stood on stage as an adult, singing my own songs. I felt total connection - goosebumps running through me for the entire performance. The feeling of connecting with people, inspiring them, and knowing I could positively influence someone's life brought me immense joy and fulfillment.

For me, these moments show how change, exploration, and embracing new environments naturally bring joy, inspiration, and personal growth.

DESCRIBE YOUR PERSONALITY AND CHARACTER

I am a vibrant, creative, and deeply intuitive person, driven by curiosity and a love for exploring both the world and myself. I feel deeply, sense the emotions of those around me, and thrive on connection and meaningful interactions. Disciplined yet free-spirited, I blend focus with playfulness, allowing my creativity to flow naturally. I am passionate about expressing myself through art, music, and design, and I find joy and purpose in inspiring others, uplifting their spirits, and sharing moments of beauty and authenticity. Life for me is about growth, freedom, and the endless exploration of possibilities

WHAT ARE YOUR FAVORITE FOODS?

I enjoy a healthy, balanced diet with a focus on fresh and natural ingredients. I love fish, seafood, vegetables, grains, seeds, and fruits. I appreciate meals that are flavorful, wholesome, and nourishing, supporting both body and mind

WHAT DO YOU LIKE TO DO IN YOUR FREE TIME?

In my free time, I love to immerse myself in creative pursuits: composing music, playing instruments, singing and exploring new artistic ideas. I enjoy reading and expanding my knowledge. I adore creating beauty around me: my home is a fantastic space, and I live with 62 deer in the backyard. I love cultivating a sense of harmony, comfort, and attention to detail in everything I do. Traveling, discovering new cultures, and connecting with inspiring people also bring me joy

WHAT WOULD YOU CONSIDER YOUR GREATEST STRENGTHS AND WEAKNESSES?

Greatest strengths:

I am highly creative, expressive, and intuitive. I have a natural musical talent and strong kinesthetic sense, which allows me to excel in artistic and performance pursuits. I am disciplined, focused, and dedicated, while also flexible and open to new experiences. I value authenticity, meaningful connections, and personal growth. My curiosity and love for learning help me adapt and thrive in different environments.

Greatest weaknesses:

I can be highly self-demanding and perfectionistic, sometimes pushing myself too hard in pursuit of excellence. I can be critical and deeply immersed in my projects and in serving the people around me, occasionally forgetting the need for rest. I have a wide emotional range and sometimes do not fully control my emotions, but I do not suppress them - I allow myself to feel and process them

IF YOU COULD VISIT ANYWHERE IN THE WORLD, WHERE WOULD IT BE AND WHY?

In the coming years, I am excited to explore South America including Brazil, Argentina, Peru - immersing myself in its vibrant cultures, landscapes, and music. I also dream of discovering the beauty and wildlife of Southern Africa. Europe calls to me as well, particularly Portugal, Italy, Switzerland, and other countries where I can experience art, history, and design firsthand.

I am also drawn to Mexico, fascinated by its rich cultural heritage, colorful traditions, and incredible landscapes. I feel it will be a place that resonates deeply with my creative spirit and inspires new ideas in art, music, and lifestyle. Each journey is an opportunity to grow, expand my horizons, and connect deeply with the world and its people.

DESCRIBE A TYPICAL DAY IN YOUR LIFE.

I usually start my mornings with mindful practices - movement, yoga, and physical exercise, followed by a sauna with a plunge pool to set the tone for the day. Then I dedicate time to my artistic practice: composing or rehearsing music, which is my current main focus.

I enjoy creating beauty at home and in my surroundings throughout the day, taking care of my animals, my space, myself, and my nutrition.

If I feel like socializing, I go to a pleasant place to connect with inspiring people, share creative energy, and cultivate meaningful relationships

WHY HAVE YOU DECIDED TO BECOME AN EGG DONOR?

There are two sides to this choice.

I see immense wonder in donation, the opportunity to help someone welcome a long-awaited child who will grow up loved by a family that has dreamed of them with all their heart. I believe in the power of genetics, as my family has always carried energy, inner strength, talent, dedication, beauty, and depth. These qualities have been passed down through generations, shaping not only appearance but also character, sensitivity, creativity, and the drive to move forward.

If I can share a part of this with someone who is ready to embrace a new life with love, it brings me great joy and honor.

At the same time, this path is deeply meaningful for me personally. Donation is not only about helping others, but also a way to better understand myself, connect more deeply with my body, and recognize my purpose. It is an act of trust in the world and in myself, a way to express love and respect for life in its purest and most sacred form.

I am a creative person with high standards for myself and for life. I love enjoying every moment and bringing pleasure into everything I do. Donation gives me a wonderful opportunity to receive meaningful support, which meets my needs for growth, self-realization, projects, music, and a sense of feminine security and joy.

It is also a chance to fulfill dreams, not only those of the parents I am helping, but also my own. As a creative person at the start of my journey, it is an incredible opportunity to combine something meaningful for others with personal growth, supporting both the world and myself.

WHAT WERE/ARE YOUR FAVORITE CLASSES IN SCHOOL?

My favorite classes were literature, art, and music

PLEASE LEAVE A MESSAGE TO THE INTENDED PARENTS.

Dear Parents,

It is an honor and a joy for me to be part of this journey with you. I am deeply moved by your love and longing for a child, and I feel grateful for the opportunity to contribute to this miracle. I hope to pass on not only my genetic traits but also a part of the values, energy, and creativity that have been nurtured in my family for generations.

I wish for your child to grow up surrounded by love, happiness, and inspiration. May this little life bring immense joy and fulfillment to your family.

With warmth and respect,
Your donor

ARE YOU COMMITTED TO BEING A DONOR?

Yes, I am fully committed to being a donor. I approach this process with responsibility, awareness, and deep respect for everyone involved

DO YOU SMOKE CIGARETTES?

No

FAMILY CHARACTERISTICS

Family Member	Eye Color	Hair Color	Skin Complexion	Height	Weight	Body Type	Education Level	Occupation
Father	Light Blue	Light Brown	Fair Skin	6'1	165 Lbs	Athletic	Higher Education	Businessman
Mother	Light Brown	Dark Brown	Fair Skin	5'3	142 Lbs	Normal	2 Higher Education, 1 Music Academic	Music Teacher, Choreographer

REPRODUCTIVE HISTORY

AGE AT FIRST PERIOD

12

ARE YOUR CYCLES

Regular

INTERVAL BETWEEN PERIODS

28

HAVE YOU HAD A DIAGNOSIS OF ANY GYNECOLOGICAL PROBLEMS (IE; ENDOMETRIOSIS, PCOS, ABNORMAL PAP SMEARS, ETC.)?

No

HAVE YOU OR A PARTNER EVER BEEN DIAGNOSED WITH A SEXUALLY TRANSMITTED INFECTION (IE; CHLAMYDIA, GONORRHEA, SYPHILIS, HERPES, TRICHOMONAS, ETC.)?

No

DID YOUR MOTHER TAKE DES WHILE SHE WAS PREGNANT WITH YOU?

No

HAVE YOU EVER BEEN TOLD YOU ARE INFERTILE?

No

IS THERE A HISTORY OF INFERTILITY IN YOUR FAMILY?

No

HAVE YOU BEEN SEXUALLY ACTIVE DURING THE PAST SIX MONTHS?

Yes

ARE YOU CURRENTLY SEXUALLY ACTIVE?

Yes

HOW MANY SEXUAL PARTNERS HAVE YOU HAD IN THE PAST SIX MONTHS?

1

ARE YOU CURRENTLY IN A MONOGAMOUS RELATIONSHIP?

Yes

ARE YOU CURRENTLY OR HAVE YOU TAKEN BIRTH CONTROL?

No

DO YOU USE OTHER FORMS OF BIRTH CONTROL

No

HAVE YOU HAD MORE THAN 10 SEXUAL PARTNERS?

Yes

HAVE YOU EVER HAD A SEXUAL PARTNER WHO WAS GAY OR BISEXUAL?

No

HAVE YOU EVER HAD SEXUAL RELATIONS WITH ANYONE SUSPECTED OR KNOWN TO BE HIV POSITIVE?

No

HAVE YOU EVER HAD RELATIONS WITH A MAN WHO HAS ENGAGED IN ANAL INTERCOURSE OR ORAL SEX WITH ANOTHER MAN?

No

HAVE YOU BEEN EXPOSED TO RADIATION OR TOXIC CHEMICALS IN YOUR WORK OR PERSONAL LIFE (I.E., LEAD, MERCURY, GOLD)?

No

MEDICAL HISTORY

DO YOU HAVE ANY MEDICAL ILLNESSES (I.E., ASTHMA, DIABETES, SEIZURE DISORDERS, TUBERCULOSIS, ETC)?

No, I don't have any medical illnesses. I am in good health

HAVE YOU EVER HAD SURGERY? PLEASE DESCRIBE:

I have had minor surgical procedures in the past with no complications, no cosmetic or plastic surgery done in me yet. I am in good health

LIST CURRENT ALLERGIES (FOOD, POLLEN, BEE STINGS, MEDICATIONS, ETC.)

I have no known allergies to food, pollen, bee stings, medications, or other substances

DESCRIBE ANY CHILDHOOD ALLERGIES YOU'VE OUTGROWN:

I did not have any childhood allergies

LIST ALL DRUGS, INCLUDING PHYSICIAN PRESCRIBED AND NON-PRESCRIPTION (PLEASE INCLUDE VITAMINS AND HERBS) THAT YOU ARE CURRENTLY TAKING:

I am currently taking the following supplements for wellness and hormonal balance: ashwagandha for hormonal support, maca root for energy, sacha inchi oil for omega-3, and flaxseed for digestive health. I do not take any prescription medications

LIST ANY OTHER MEDICATIONS YOU'VE TAKEN IN THE LAST FIVE YEARS:

I have not taken any prescription medications in the past five years. I maintain my health naturally through diet, herbs, roots, and a healthy lifestyle. I rarely get sick and have a strong immune system

HAVE YOU EVER HAD A BLOOD TRANSFUSION?

No

HAVE YOU EVER BEEN REFUSED AS A BLOOD DONOR?

No

HAVE YOU BEEN EXPOSED TO RADIATION OR TOXIC CHEMICALS IN YOUR WORK OR PERSONAL LIFE (IE; LEAD, MERCURY, GOLD)?

No

HAVE YOU EVER HAD UNEXPLAINED WEIGHT LOSS?

No

HAVE YOU EVER HAD KAPOSI SARCOMA?

No

HAVE YOU EVER HAD FEVER OF UNKNOWN ORIGIN?

No

HAVE YOU EVER HAD PNEUMOCYSTIC PNEUMONIA?

No

HAVE YOU EVER HAD SEXUAL RELATIONS WITH ANYONE WITH THE ABOVE SYMPTOMS/DISEASES?

No

DO YOU SMOKE CIGARETTES?

No

DO YOU DRINK ALCOHOL?

No

HAVE YOU EVER USED RECREATIONAL DRUGS? (LSD, MARIJUANA, HEROIN OR COCAINE, ETC.)

No

HAVE YOU EVER BEEN TREATED FOR DEPRESSION?

No

HAVE YOU EVER ATTEMPTED SUICIDE?

No

FAMILY MEDICAL HISTORY

Family Member	Age	Age At Death	Medical Problems Or Cause Of Death
Mother	54	Alive	My Mother Is Healthy With No Medical Problems. She Has Excellent Reproductive Health And Has Not Gone Through Menopause. She Gave Birth To Her Second Child Naturally At Age 43 Without Fertility Treatments
Father	66	Alive	
Brother 1	10	Alive	My Father Is Healthy And Maintains His Well-Being Through Regular Yoga Practice
Maternal Grandmother	61	61	My Brother Shares Only One Parent With Me - Our Mother. He Is Healthy Overall
			My Maternal Grandmother Passed Away At Age 61 Due To Heart Failure, Which Was Likely Stress-Related. She Did Not Have Any Chronic Or Hereditary Diseases.
Maternal Grandfather		81	My Maternal Grandfather Passed Away At Age 81 From Natural Causes. He Worked For Over 30 Years At A Nuclear Facility Under Demanding Conditions, Where Many Of His Colleagues Passed Away Around Age 50. He Was A Very Healthy And Resilient Man
Paternal Grandmother	76	Alive	My Paternal Grandmother Is Alive And Healthy
Paternal Grandfather	?	?	My Father Is Not In Contact With His Biological Father. His Fate And Medical History Are Unknown

BONES, MUSCLES, JOINTS, LIMBS

No

GASTROINTESTINAL SYSTEM

No

NERVOUS SYSTEM, BRAIN, SPINAL CORD

No

BLOOD OR CIRCULATORY SYSTEM

No

RESPIRATORY SYSTEM

No

GENITAL/URINARY TRACT

No

METABOLIC (HORMONES, ENZYMES, ETC)

No

DETAILED FAMILY MEDICAL HISTORY

YOU

- Acne

DESCRIBE YOUR SELECTED MEDICAL PROBLEM

After moving to Bali and adjusting to the new environment, I experienced mild acne. I treated it with topical creams and currently maintain healthy skin, protecting it from sun and dust. I did not have any skin issues in Russia, so this was likely a reaction to the change in environment.

DONOR RISK ASSESSMENT QUESTIONNAIRE

1. HAVE YOU INJECTED DRUGS FOR A NON-MEDICAL REASON IN THE LAST FIVE YEARS, INCLUDING INTRAVENOUS, INTRAMUSCULAR AND SUBCUTANEOUS INJECTION?

No

2. HAVE YOU RECEIVED HUMAN-DERIVED CLOTTING FACTOR CONCENTRATES, INCLUDING FACTOR VIII AND/OR FACTOR IX CONCENTRATE FOR HEMOPHILIA OR A RELATED CLOTTING DISORDER?

No

3. IN THE PAST FIVE YEARS, HAVE YOU BEEN GIVEN MONEY OR DRUGS IN EXCHANGE FOR HAVING SEX?

No

4. IN THE PAST 12 MONTHS, HAVE YOU BEEN IN JAIL FOR MORE THAN 72 CONSECUTIVE HOURS?

No

5. IN THE PAST 12 MONTHS, HAVE YOU HAD SEX WITH ANYONE WHO WOULD ANSWER YES TO THE PREVIOUS

QUESTIONS?

No

6. IN THE PREVIOUS 12 MONTHS, HAVE YOU HAD SEX WITH A PERSON WITH KNOWN OR SUSPECTED HIV, HEPATITIS B OR HEPATITIS C?

No

7. IN THE PAST 12 MONTHS, HAVE YOU BEEN EXPOSED TO KNOWN OR SUSPECTED HIV, HEPATITIS B AND/OR HEPATITIS C INFECTED BLOOD THROUGH PERCUTANEOUS INOCULATION (E.G., NEEDLE STICK) OR THROUGH CONTACT WITH AN OPEN WOUND, NON-INTACT SKIN OR MUCUS MEMBRANE?

No

8. IN THE PAST 12 MONTHS HAVE YOU HAD AN ACCIDENTAL NEEDLE STICK, SHARP INSTRUMENT INJURY, CONTACT WITH HUMAN BLOOD, SERUM OR PLASMA IN THE EYE, MUCOUS MEMBRANES (LIPS OR INTERIOR OF NOSE) OR SORES?

No

9. IN THE PAST 12 MONTHS , HAVE YOU LIVED WITH (RESIDED IN THE SAME DWELLING) ANOTHER PERSON WHO HAS HEPATITIS B OR CLINICALLY ACTIVE (SYMPTOMATIC) HEPATITIS C INFECTION?

No

10. IN THE PAST 12 MONTHS, HAVE YOU HAD EAR, SKIN OR BODY PIERCING, SCARIFICATION OR TATTOOING?

No

11. HAVE YOU HAD A CLINICAL DIAGNOSIS OF HEPATITIS?

No

12. HAVE YOU, YOUR SEXUAL PARTNER(S) AND/OR ANY MEMBER OF YOUR HOUSEHOLD EVER HAD A TRANSPLANT OR MEDICAL PROCEDURE THAT INVOLVED BEING EXPOSED TO LIVE CELLS, TISSUE OR ORGANS FROM AN ANIMAL?

No

13. HAVE YOU BEEN SUSPECTED TO HAVE OR DIAGNOSED WITH WEST NILE VIRUS (INCLUDING DIAGNOSIS BASED ON SYMPTOMS AND/OR LABORATORY RESULTS, OR CONFIRMED WNV VIREMIA) IN THE PAST 120 DAYS?

No

14. WITHIN THE PAST 8 WEEKS, HAVE YOU HAD A SMALLPOX VACCINATION?

No

15. WITHIN THE PAST 8 WEEKS, HAVE YOU HAD CLOSE CONTACT WITH A SMALLPOX VACCINATION SITE OF SOMEONE ELSE WHO RECEIVED THE VACCINATION (EXAMPLES INCLUDE TOUCHING THE SITE, THE BANDAGES COVERING THE SITE OR HANDLING BEDDING OR CLOTHING THAT HAS BEEN IN CONTACT WITH AN UNBANDAGED VACCINATION SITE)?

No

16. HAVE YOU EVER BEEN TREATED FOR OR DIAGNOSED WITH CHLAMYDIA, GONORRHEA, HERPES SIMPLEX TYPE 2 AND/OR SYPHILIS?

No

17. HAVE YOU OR ANY OF YOUR BLOOD RELATIVES BEEN DIAGNOSED WITH CREUTZFELDT-JAKOB DISEASE (CJD)?

No

18. HAVE YOU BEEN DIAGNOSED WITH DEMENTIA OR ANY DEGENERATIVE OR DEMYELINATING DISEASE OF THE CENTRAL NERVOUS SYSTEM OR OTHER NEUROLOGICAL DISEASE OF UNKNOWN ETIOLOGY?

No

20. HAVE YOU EVER RECEIVED A NON-SYNTHETIC DURA MATER (BRAIN COVERING) GRAFT

No

21. HAVE YOU RECEIVED A BITE FROM AN ANIMAL SUSPECTED FOR RABIES WITHIN THE LAST 6 MONTHS?

No

22. HAVE YOU BEEN DIAGNOSED OR SUSPECTED TO HAVE T. CRUZI INFECTION OR CHAGAS DISEASE?

No

23. FROM 1980 THROUGH 1996 WERE YOU A MEMBER IF THE U.S. MILITARY, A CIVILIAN MILITARY EMPLOYEE OR A DEPENDENT OF A MILITARY MEMBER OR CIVILIAN MILITARY EMPLOYEE?

No

24. SINCE 1980, HAVE YOU EVER LIVED IN OR TRAVELED TO EUROPE (INCLUDES: ALBANIA, AUSTRIA, BELGIUM, BOSNIA-HERZEGOVINA, BULGARIA, CROATIA, CZECH REPUBLIC, DENMARK, FINLAND, FRANCE, GERMANY, GREECE, HUNGARY, IRELAND, ITALY, LIECHTENSTEIN, LUXEMBOURG, MACEDONIA, NETHERLANDS, NORWAY, POLAND, PORTUGAL, ROMANIA, SLOVAK REPUBLIC, SLOVENIA, SPAIN, SWEDEN, SWITZERLAND, AND YUGOSLAVIA)?

Yes

24A. FROM THE BEGINNING OF 1980 THROUGH THE END OF 1996 DID YOU SPEND TIME THAT ADDS UP TO 3 MONTHS OR MORE IN THE U.K. (INCLUDES ENGLAND, IRELAND, SCOTLAND, WALES, THE ISLE OF MAN, THE CHANNEL ISLANDS, GIBRALTAR, AND THE FALKLAND ISLANDS)?

No

24B. SINCE 1980, HAVE YOU RECEIVED A BLOOD TRANSFUSION OF BLOOD OR BLOOD COMPONENTS IN THE U.K. OR FRANCE?

No

24C. SINCE 1980 HAVE YOU SPENT TIME THAT ADDS UP TO 5 YEARS OR MORE IN EUROPE (INCLUDING TIME SPENT IN THE U.K. BETWEEN 1980 AND 1996)?

No

FDA REQUIRED SCREENING

HAVE YOU EVER HAD A SEXUALLY TRANSMITTED DISEASE OR INFECTION (STD/STI)?

No

IN THE PAST 5 YEARS HAVE YOU HAD SEXUAL RELATIONS WITH A MALE HOMOSEXUAL, BISEXUAL, OR IV DRUG USER?

No

HAVE YOU HAD A PARTNER WHO HAD SEXUAL RELATIONS WITH A MALE HOMOSEXUAL, BISEXUAL, OR IV DRUG USER?

No

HAS YOUR CURRENT PARTNER EVER BEEN IN PRISON?

No

IN THE PAST 12 MONTHS HAVE YOU BEEN IN JAIL FOR MORE THAN 3 DAYS IN A ROW?

No

IN THE PAST 12 MONTHS HAVE YOU HAD SEXUAL RELATIONS WITH ANYONE WHO HAS BEEN IN JAIL FOR MORE THAN 3 DAYS IN A ROW?

No

IN THE PAST 12 MONTHS HAVE YOU HAD SEX WITH A PERSON KNOWN OR SUSPECTED TO HAVE HIV, HEPATITIS B OR HEPATITIS C?

No

IN THE PAST 12 MONTHS HAVE YOU BEEN IN CONTACT WITH A PERSON KNOWN OR SUSPECTED TO HAVE ACTIVE VIRAL HEPATITIS?

No

IN THE PAST 12 MONTHS HAVE YOU HAD SEXUAL RELATIONS WITH ANYONE WHO WOULD ANSWER YES TO ANY OF THE ABOVE QUESTIONS?

No

HAVE YOU EVER GIVEN OR RECEIVED MONEY OR DRUGS IN EXCHANGE FOR ANY SEXUAL ACT?

No

WERE YOU BORN IN OR DID YOU LIVE IN OR TRAVEL TO AFRICA BETWEEN 1977 AND TODAY?

No

HAVE YOU HAD SEXUAL CONTACT WITH ANYONE BORN IN OR LIVED IN AFRICA BETWEEN 1977 AND TODAY?

No

AFTER AGE 11, HAVE YOU HAD VIRAL HEPATITIS, HEPATITIS B, OR HEPATITIS C?

No

HAVE YOU EVER BEEN TOLD THAT YOU COULD NOT DONATE BLOOD?

No

HAVE YOU EVER RECEIVED A BLOOD TRANSFUSION?

No

HAS YOUR PARTNER EVER RECEIVED A BLOOD TRANSFUSION?

No

DO YOU HAVE A BLOOD CLOTTING DISORDER AND RECEIVE HUMAN DERIVED CLOTTING FACTOR CONCENTRATION?

No

HAVE YOU EVER RECEIVED GROWTH HORMONES MADE FROM HUMAN PITUITARY GLANDS (HGH)?

No

INJECTED ANY TYPE OF DRUG FOR NON-MEDICAL REASONS

No

USED MARIJUANA (INCLUDING MEDICAL MARIJUANA)

Yes

USED COCAINE IN ANY FORM

No

USED LSD (ANGEL DUST)

No

USED METHAMPHETAMINE

No

USED ANY ILLICIT DRUG NOT LISTED

No

HAVE YOU EVER USED PRESCRIPTION MEDICATIONS FOR REASONS OTHER THAN THEIR INTENDED USE?

No

ARE YOU CURRENTLY USING ANY ILLICIT DRUGS OR PRESCRIPTION DRUGS FOR NON-MEDICAL REASONS?

No

DURING WORK ARE YOU EXPOSED TO TOXIC OR RADIOACTIVE SUBSTANCES?

No

HAVE YOU EVER HAD A NEEDLE STICK INJURY?

No

HAVE YOU EVER BEEN TESTED FOR HIV/AIDS?

Yes

IF YES - WHEN:

October 2025

RESULTS:

negative

HAVE YOU RECENTLY RECEIVED ANY VACCINATIONS?

No

IN THE PAST 7 DAYS HAVE YOU HAD ANY OF THE FOLLOWING SYMPTOMS?

No

HAVE YOU OR YOUR PARTNER EVER BEEN DIAGNOSED WITH WEST NILE VIRUS (WNV)?

No

HAVE YOU EVER RECEIVED A DURA-MATER (BRAIN COVERING TISSUE) GRAFT?

No

HAVE YOU OR YOUR PARTNER EVER BEEN DIAGNOSED WITH CJD?

No

BETWEEN 1980 AND 1996 WERE YOU A MEMBER OF THE US MILITARY OR CIVILIAN EMPLOYEE?

No

BETWEEN 1980 AND 1996 WERE YOU A DEPENDENT OF A MEMBER OF THE US MILITARY?

No

HAVE YOU TRAVELED TO A COUNTRY AFFECTED BY OR TREATED FOR SARS IN THE PAST 14 DAYS?

No

HAVE YOU BEEN WITH AN INDIVIDUAL AFFECTED BY SARS IN THE PAST 14 DAYS?

No

IN THE PAST 12 MONTHS HAVE YOU RECEIVED ANY OF THE FOLLOWING

- None

TRAVEL

BETWEEN 1980 AND TODAY, HAVE YOU TRAVELED TO ANY OF THE FOLLOWING EUROPEAN COUNTRIES? CHECK ALL THAT APPLY.

- NONE

HAVE YOU SPENT A TOTAL OF 6 MONTHS OR MORE ASSOCIATED WITH A MILITARY BASE IN ANY OF THE FOLLOWING COUNTRIES? CHECK ALL THAT APPLY.

- NONE

MEXICAN RIVIERA

- NONE

THE CARIBBEAN

- NONE

CENTRAL AMERICA

- NONE

PACIFIC ISLANDS

- NONE

SOUTH AMERICA

- NONE

ASIA

- Indonesia
- Malaysia
- Thailand

AFRICA

- NONE

MEDICAL HISTORY

OTHER HEART DISEASE

None

OTHER BREATHING PROBLEM

None

OTHER KINDNEY PROBLEM

None

OTHER BLADDER PROBLEM

None

OTHER GI DISEASE

None

OTHER MUSCULOSKELETAL DISEASE

None

OTHER HORMONAL DISEASE

None

OTHER REPRODUCTIVE DISEASE

None

OTHER BLOOD DISEASE

None

OTHER EYES, EARS, AND SKIN DISEASE

None

OTHER NEUROLOGICAL DISEASE

None

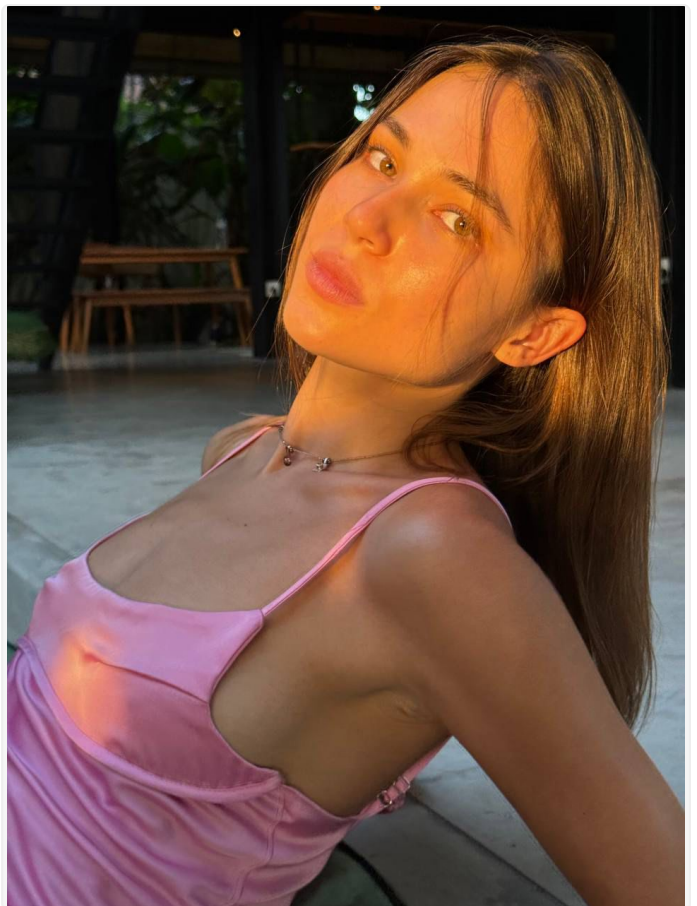
OTHER PSYCHOLOGICAL DISORDER

None

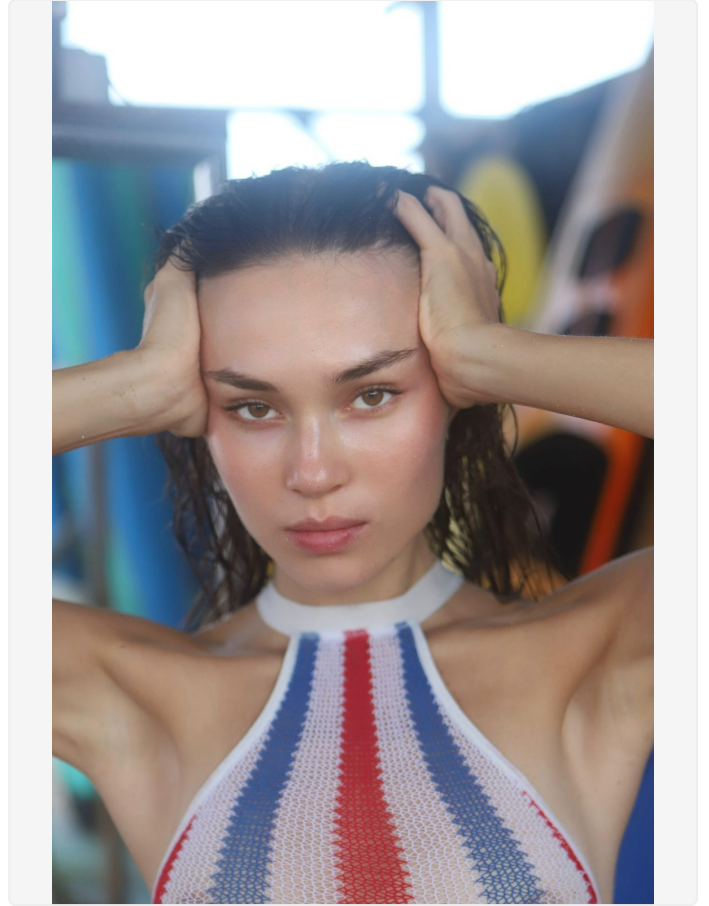
ANY OTHER DISEASE OR DISORDER

None

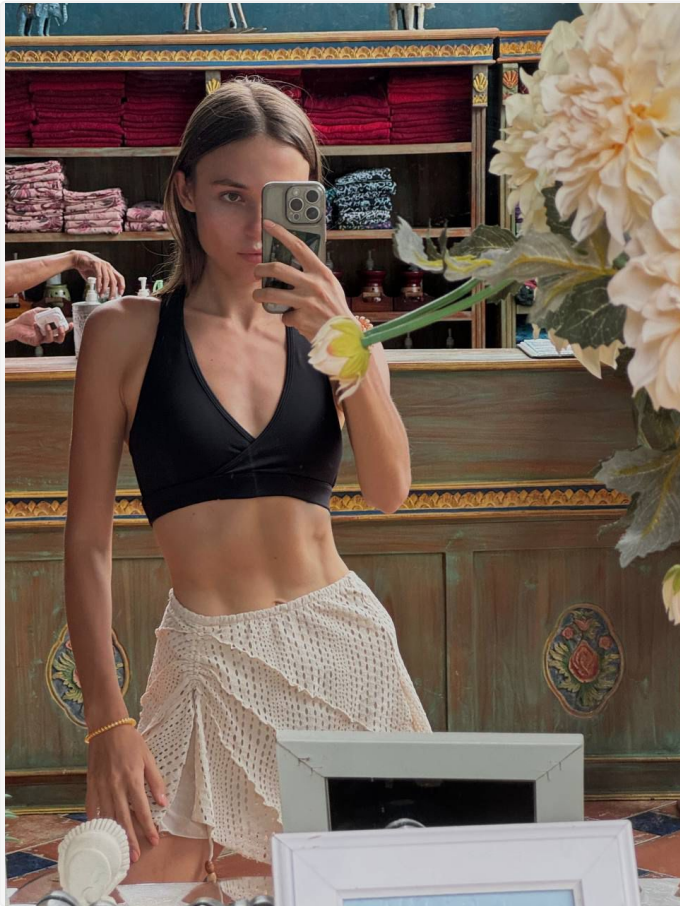
DONOR ADDITIONAL PHOTOS



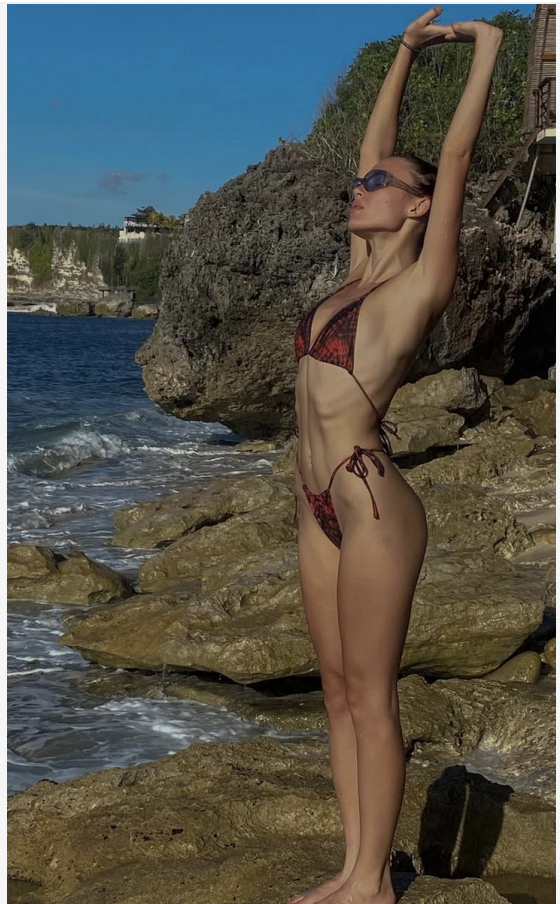
DONOR ADDITIONAL PHOTOS



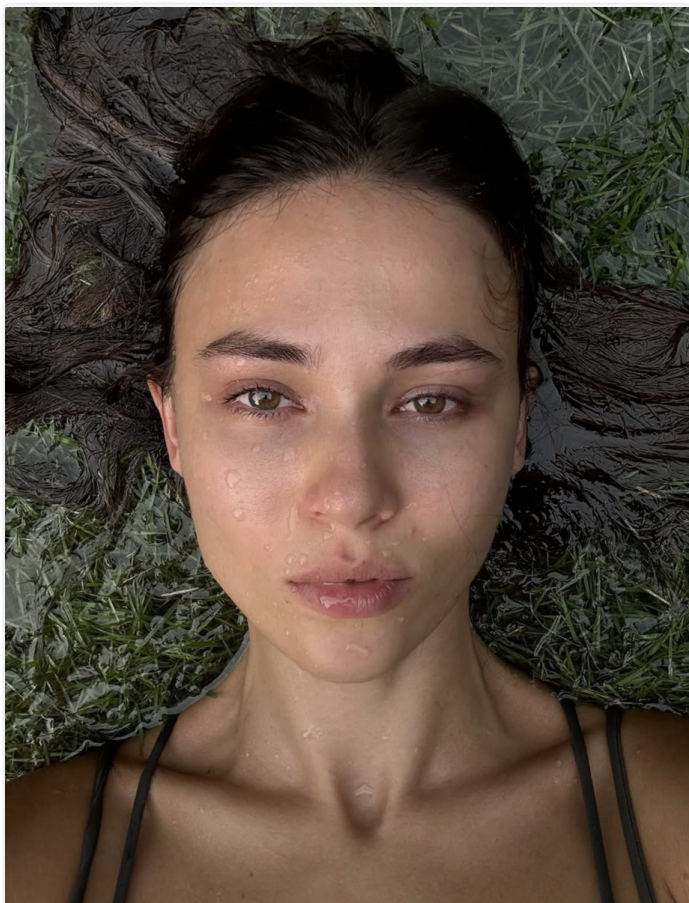
DONOR ADDITIONAL PHOTOS



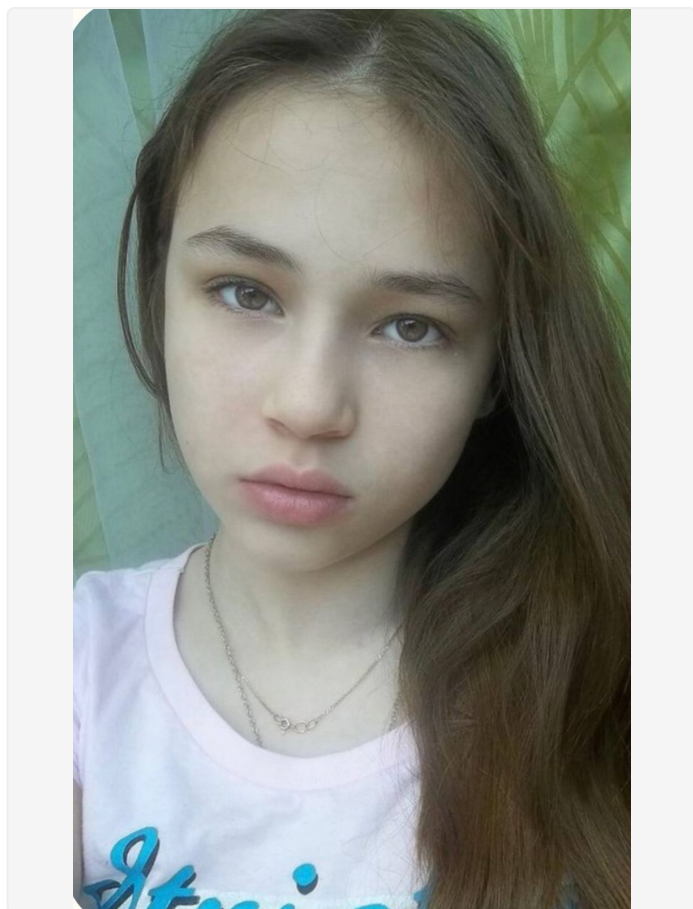
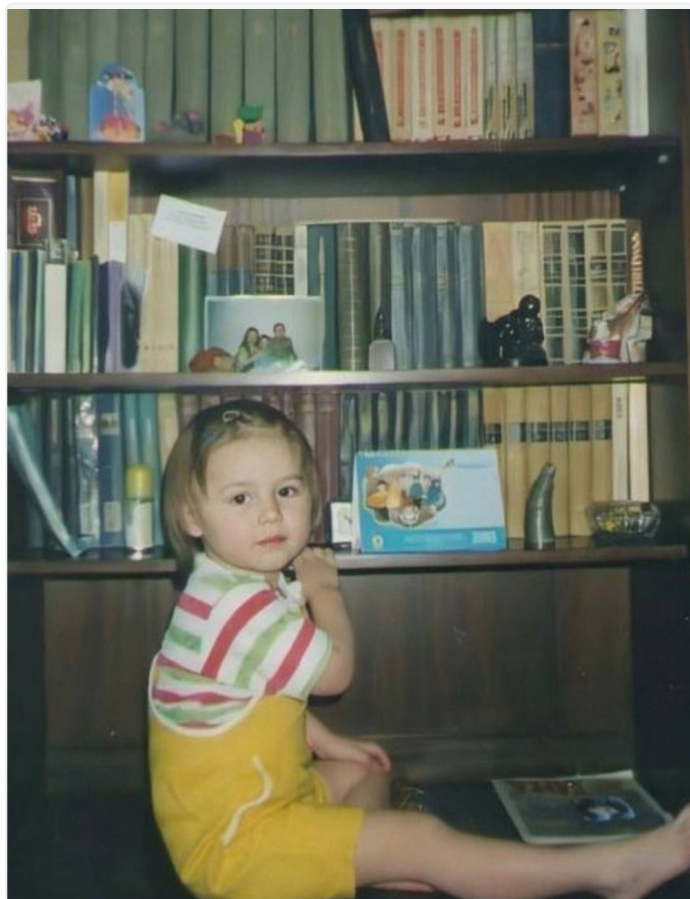
DONOR ADDITIONAL PHOTOS



DONOR ADDITIONAL PHOTOS



CHILDHOOD ADDITIONAL PHOTOS



CHILDHOOD ADDITIONAL PHOTOS



FAMILY ADDITIONAL PHOTOS



FAMILY ADDITIONAL PHOTOS



GRAND-GRANDPARENTS TOGETHER
(GRANDFATHER'S SIDE)



GRAND-GRAND FATHER ALEX



GRAND-GRAND MOTHER ALIA



GRANDMOTHER TAMARA (LEFT)



GRAND-GRANDPARENTS TOGETHER
(GRANDMOTHER'S SIDE)



FAMILY ADDITIONAL PHOTOS



GRANDMOTHER TAMARA (LEFT)



GRANDPARENTS TOGETHER



MOTHER IN CHILDHOOD



UNKCLE IN CHILDHOOD



GRAND-PARENTS WITH CHILDREN (ELDEST - AUNT, MIDDLE - UNCLE, YOUNGEST - MOTHER)

