

DONOR PROFILE

Facts and Figures

Year of Birth: 1986 Height: 6'3" Weight: 208 Eye Color:

Black Brown Grey
 Blue Green Hazel

Natural Hair Color: Natural Hair Texture: Natural Hair Volume:

Black Light Brown Blond Curly Thick Average
 Dark Brown Red Brown Dark Blond Wavy Thin Balding
 Brown Red Strawberry Blond Straight

Body Frame Size:* Small Medium Large Very Large

*The broadness of an individual's shoulders is a fairly accurate indication of frame size.

Relative to your ethnic origin, how would you describe your complexion?

Very Fair Fair Medium Dark Very Dark

Specific religious affiliation: Christian

Mother's religion: Christian Father's religion: Christian

Education

(indicate highest level completed)

High School 1 2 3 4 GPA: 2.4

College/University 1 2 3 4 GPA: _____

Major(s): Minor(s):

College/University degrees attained: B.A. B.S. Other degrees:

Graduate Studies 1 2 3 4+ GPA: _____ Major/Focus:

Graduate degrees attained M.A. M.S. Ph.D. M.D. J.D. D.D.S.

Other:

Other degrees/certifications: Underground Storage Tank License, Backflow Assembly Tester License, Maintenance Personnel Certificate

HOBBIES, FAVORITES, AND HIDDEN TALENTS

What kind of mechanical skills or abilities do you possess? (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> I can barely replace a light bulb | <input type="checkbox"/> Model building |
| <input type="checkbox"/> Auto repair | <input type="checkbox"/> Building computers |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Plumbing | <input checked="" type="checkbox"/> I can fix ANYTHING |
| <input checked="" type="checkbox"/> Other: <u>I am licensed in Medical Air Repairs</u> | |

How are your mathematical skills?

- Basic (Can balance a checkbook)
- Good (e.g., Algebra, Trigonometry, Pre-Calculus)
- Excellent (e.g., Calculus)
- Einstein (e.g., Linear Algebra, Advanced Statistics)

Awards or Honors: None

Are you athletic?

- I can walk and chew gum at the same time
- Yes (e.g., high school / club sports)
- Very (e.g., high school captain, all-star, state honors)
- Extremely (e.g., college / professional athlete)

Awards or Honors: None

What is your favorite sport to play? Basketball

Which sport(s) did you play regularly in high school and/or after? (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Baseball / Softball | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Racquetball |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Volleyball |
| <input checked="" type="checkbox"/> Football | <input type="checkbox"/> Skiing |
| <input type="checkbox"/> Soccer | <input checked="" type="checkbox"/> Snow Boarding |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Surfing |
| <input type="checkbox"/> Running | <input type="checkbox"/> Skate Boarding |
| <input type="checkbox"/> Weight Training | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Hockey | <input type="checkbox"/> Ping Pong |
| <input type="checkbox"/> Triathlons | <input type="checkbox"/> None |
| <input type="checkbox"/> Other: | |

HOBBIES, FAVORITES, AND HIDDEN TALENTS

What languages do you speak fluently? (check all that apply)

- | | |
|---|-------------------------------------|
| <input checked="" type="checkbox"/> English | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Korean |
| <input type="checkbox"/> Farsi | <input type="checkbox"/> Mandarin |
| <input type="checkbox"/> French | <input type="checkbox"/> Portuguese |
| <input type="checkbox"/> German | <input type="checkbox"/> Polish |
| <input type="checkbox"/> Greek | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Hebrew | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Hindi | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Italian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Other: | |

What are your hobbies and talents?

Building cars, trucks, and motorcycles. Working out. Home remodels

How do you express your creativity (music, painting, drawing, writing, graphic design, dancing, singing, etc.)?

I like drawing and sketching before I build something

What are your favorite foods? Breakfast foods

What is your favorite animal? Tiger

Where would you like to travel and why?

Italy for the food and culture

What makes you laugh?

Stand up comedy and friends or family joking around with each other.

What is the one thing about you that everybody should know?

I am easy going

EDUCATIONAL AND OCCUPATIONAL BACKGROUND

<input checked="" type="checkbox"/> SAT Total: _____ out of _____	<input type="checkbox"/> GRE Score: _____ out of _____
Reading: _____ out of _____	<input type="checkbox"/> LSAT Score: _____ out of _____
Math: _____ out of _____	<input type="checkbox"/> MCAT Score: _____ out of _____
Writing: _____ out of _____	<input type="checkbox"/> GMAT Score: _____ out of _____
<input type="checkbox"/> ACT Total: _____ out of _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> I did not take examinations	Score: _____ out of _____
<input checked="" type="checkbox"/> I do not recall test scores	

Which subject did you *most* enjoy in school? Welding

Which subject did you *least* enjoy in school? Math

Academic and professional clubs/teams/societies:
None

Academic and professional honors:
None

Are you a full-time student? Yes No Part-time

If you are not a full-time student, what is your current occupation?

Maintenance Engineer at Hospital

Current/Past jobs: (do not name your employers)
Fabrication and building portable shelters for military

Have you served in the military?
 Yes
 No

PHYSICAL QUALITIES

Vision:

- Normal
- Corrective Lenses
 - Nearsighted
 - Farsighted
 - Other:
- Corrective Surgery
 - Nearsighted
 - Farsighted
 - Other:

Condition of your teeth:

- Excellent
- Good
- Fair
- Poor

Exercise habits:

- I do not exercise
- I exercise 1-3 times per week
- I exercise 3+ times per week

Orthodontic treatment: (e.g., braces)

- No
- Yes:

Types of exercise: Lifting weights

Left-handed

Right-handed

Ambidextrous

Distinguishing features: (check all that apply)

- Dimples
- Full lips
- Cleft chin
- None
- High cheekbones
- Large eyes
- Other:

PERSONAL HEALTH HISTORY SUMMARY

CONSULTATION DATE	DONOR'S YEAR OF BIRTH
03/17/2023	1986

DONOR'S SELF-REPORTED ANCESTRIES	
MATERNAL	PATERNAL
English; Irish	German

SIGNIFICANT SURGICAL HISTORY/HOSPITALIZATIONS
<p>Has the donor ever had surgery? No</p> <p>Procedures/indications and age(s), if applicable: N/A</p>
<p>If applicable, was general anesthesia used? N/A</p> <p>Anesthesia-related complications, if applicable: N/A</p>
ALLERGIES
<p>Does the donor have any allergies? No</p> <p>If yes, please describe: N/A</p>
<p>Does the donor have any food intolerances? Yes</p> <p>If yes, please describe (e.g. lactose, gluten): Lactose intolerance onset approximately age 25, no clinical diagnosis; results in gastrointestinal distress; treats with avoidance of all dairy.</p>

GENETIC FAMILY HISTORY SUMMARY

A three-generation family medical history was elicited from the donor by a Reproductive Genetics Specialist and is summarized below. This information is collected to help evaluate the risk for inherited disorders in the donor's offspring and the donor's eligibility for participation in this donor program. It is provided to assist in donor selection but is not a guarantee of the health of any future child.

NUMBER OF FAMILY MEMBERS								
SISTERS	BROTHERS	NIECES/ NEPHEWS	MATERNAL AUNTS	MATERNAL UNCLES	MATERNAL FIRST- COUSINS	PATERNAL AUNTS	PATERNAL UNCLES	PATERNAL FIRST- COUSINS
0	1	0	1 (half)	2	2	0	1	0

CURRENT AGE OR AGE AT DEATH (d.)						
DONOR	MOTHER	FATHER	MATERNAL GRANDMOTHER	MATERNAL GRANDFATHER	PATERNAL GRANDMOTHER	PATERNAL GRANDFATHER
36	55	56	76	81	77	78

FAMILY MEMBER	DIAGNOSIS	HEALTH DETAILS (age at diagnosis, treatment, etc.)
DONOR	Bilateral hearing loss	Onset at age 18 based on hearing test, not clinically diagnosed, worse in left ear than in right ear; no treatment; contributing factors may include occupational noise exposure without hearing protection; hearing has reportedly been stable for the last five years based on results of hearing tests; no family history of hearing issues.
MOTHER	Alcohol abuse	Onset approximately in her 20s, stopped drinking in her 30s; no treatment; contributing factors are unknown.
	Unknown type of urinary issue	Diagnosed at approximately age 50, caused difficulty with urination; treated with surgical placement of unknown type of implant, resolved; contributing factors are unknown.
FATHER	None	
MATERNAL GRANDMOTHER	None	
MATERNAL GRANDFATHER	Unknown type of skin cancer	Diagnosed at approximately age 70 on shoulder; treated with removal; contributing factors may have included sun exposure.
	Unknown type of intestinal issue	Diagnosed at approximately age 79 with unknown type of holes in his large intestine resulting in gas escaping; treated with surgical removal of large intestine; contributing factors are unknown.

Medical Profile

PATERNAL GRANDMOTHER	Teeth removed	Removed in her 70s due to poor dental hygiene; treats with dentures.
PATERNAL GRANDFATHER	Heart attacks	Has had two heart attacks over the last 20s years, specific ages are unknown; treats with diet, unknown if other treatment; contributing factors are unknown.
MATERNAL HALF-AUNT	No information	There is no health information about this half-aunt and no information is expected to be available in the future.

RISK ASSESSMENT

There is a 3-4% risk for birth defects in all children regardless of their method of conception, usually for conditions that cannot be tested for or predicted based on one's family medical history. There is no evidence of an increased risk, above the general population risks, for any health problems in this donor's offspring based on the information reported, other than the risks specified below:

Substance Abuse

Studies have indicated an increased risk for substance abuse and/or dependence among close relatives of substance abusers. For example, there is a 4.2-fold increased risk for alcohol dependence in first-degree relatives of individuals with substance abuse and a 6.0-fold increase for drug use disorders (with or without alcohol). The risk for more distant relatives, such as the donor's offspring, is likely less, but an exact risk cannot be determined. (Merikangas, K. R., Stolar, M., Stevens, D. E., Goulet, J., Preisig, M. A., Fenton, B., ... & Rounsaville, B. J. (1998). Familial transmission of substance use disorders. Archives of general psychiatry, 55(11), 973-979).

Prospective recipients are encouraged to discuss their own family histories and their donors' family histories and genetic test results with their personal healthcare providers to help determine if the donor is suitable for their reproductive needs.

Medical Profile

As part of the donor screening process, a donor applicant completes a family history screening form and indicates any known family members with a range of health conditions including those listed below. After this initial intake, the donor meets with a Reproductive Genetics Specialist who elicits, documents, and assesses the family medical history in further detail.

The donor's family medical history collected during that evaluation is summarized for you on the previous pages. We recommend that you discuss a donor's family medical history with your personal healthcare providers and/or a genetic counselor prior to using gametes from a donor so that you can be fully informed about the medical conditions reported, any health risks related to that donor's medical history, as well as the general population risks for health problems.

Example of Health Conditions Evaluated During a Donor Applicant's Family Medical History Screening

HEALTH CONDITION	HEALTH CONDITION
Alcoholism/Drug abuse	Heart attack prior to age 50
Alzheimer disease/dementia	Heart defect
Aneurysm	Huntington's disease
Anxiety/panic attacks	Kidney defect/disorder/cancer
Attention deficit/hyperactivity disorder	Learning disability/delay
Autism or Asperger syndrome	Melanoma
Bipolar disorder	Mental retardation
Birth defects	Miscarriage/Stillbirth/Infertility
Bleeding disorder/hemophilia	Obsessive compulsive disorder
Blindness prior to age 50	Ovarian cancer
Brain tumor/abnormality	Pancreatic cancer
Breast cancer	Parkinson disease prior to age 60
Cancers	Pituitary disorder
Cerebral palsy	Prostate cancer prior to age 50
Cleft lip or palate	Schizophrenia
Colon cancer	Speech delay/lisp/stutter
Club foot	Spina bifida
Deaths under 50, including childhood deaths	Stroke prior to age 50
Depression	Ulcerative Colitis
Epilepsy or seizure disorder	Uterine cancer (other than cervical cancer)
Extra or fused fingers or toes	Tourette syndrome
Genetic disorder	Vision problem
Hearing problem/deafness prior to age 50	Vitiligo/pigment disorder

FAMILY HISTORY

Mother of Donor

Height: 5'6"

Weight: Thin Normal Overweight Obese

Eye Color: Black Brown Grey Blue Green Hazel

Natural Hair Color: Black Light Brown Blond Dark Brown Red Brown Dark Blond Brown Red Strawberry Blond Curly Wavy Straight

Natural Hair Texture: Curly Wavy Straight

Natural Hair Volume: Thick Average Thin Balding

Body Frame Size: Small Medium Large Very Large

Vision: No need for corrective lenses Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?

Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)

Dimples Full lips Cleft chin None

High cheekbones Large eyes Other: Freckles

Occupation: Bus driver

Education (highest degree, subject): High school diploma

Notable talents and interests: Knitting and raising animals

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pessimistic
Assertive	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Accommodating
Outgoing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Reserved
Trusting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeptical
Self-reliant	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Group-oriented
Driven	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Enjoys playing games as a family. Golfing and just having a good time.

FAMILY HISTORY

Father of Donor

Height: <u>6'6"</u>	Weight: <input checked="" type="radio"/> Thin <input type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input type="radio"/> Brown <input type="radio"/> Grey <input checked="" type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input type="radio"/> Light Brown <input type="radio"/> Blond <input checked="" type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input type="radio"/> Red <input type="radio"/> Strawberry Blond <input checked="" type="radio"/> Straight	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input checked="" type="radio"/> Thick <input type="radio"/> Average <input type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: <input type="radio"/> Small <input type="radio"/> Medium <input checked="" type="radio"/> Large <input type="radio"/> Very Large	Vision: <input checked="" type="radio"/> No need for corrective lenses <input type="radio"/> Corrective lenses or corrective surgery
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Relative to ethnic origin, how would you describe this person's complexion?

Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)

<input type="checkbox"/> Dimples	<input type="checkbox"/> Full lips	<input type="checkbox"/> Cleft chin	<input type="checkbox"/> None
<input type="checkbox"/> High cheekbones	<input type="checkbox"/> Large eyes	<input checked="" type="checkbox"/> Other: <u>Large nose</u>	

Occupation: Construction

Education (highest degree, subject): High school diploma

Notable talents and interests: Can build or fix anything

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pessimistic
Assertive	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Accommodating
Outgoing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Reserved
Trusting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeptical
Self-reliant	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Group-oriented
Driven	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Smart and somewhat of a perfectionist

FAMILY HISTORY

Brother of Donor

Height: <u>6'2"</u>	Weight: <input checked="" type="radio"/> Thin <input type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input type="radio"/> Brown <input type="radio"/> Grey <input checked="" type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input checked="" type="radio"/> Light Brown <input type="radio"/> Blond <input type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input type="radio"/> Red <input type="radio"/> Strawberry Blond	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input type="radio"/> Thick <input type="radio"/> Average <input checked="" type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: Small Medium Vision: No need for corrective lenses
 Large Very Large Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?

Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)

Dimples Full lips Cleft chin None
 High cheekbones Large eyes Other: Large nose

Occupation: MechanicEducation (highest degree, subject): College graduate

Notable talents and interests: Building cars

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Pessimistic
Assertive	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Accommodating
Outgoing	<input type="radio"/>	_____	<input type="radio"/>	_____	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Reserved
Trusting	<input type="radio"/>	_____	<input type="radio"/>	_____	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Skeptical
Self-reliant	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Group-oriented
Driven	<input checked="" type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Smart and a perfectionist

FAMILY HISTORY

Maternal Grandmother of Donor

Height: <u>5'6"</u>	Weight: <input type="radio"/> Thin <input checked="" type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input type="radio"/> Brown <input type="radio"/> Grey <input checked="" type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input type="radio"/> Light Brown <input type="radio"/> Blond <input type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input checked="" type="radio"/> Red <input type="radio"/> Strawberry Blond	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input type="radio"/> Thick <input type="radio"/> Average <input checked="" type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: Small Medium Large Very Large
Vision: No need for corrective lenses Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?
 Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)
 Dimples Full lips Cleft chin None
 High cheekbones Large eyes Other:

Occupation: Retired, Unknown previous occupation

Education (highest degree, subject): High school diploma

Notable talents and interests: Sewing

How would you describe this person's personality?

Optimistic	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pessimistic
Assertive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Accommodating
Outgoing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Reserved
Trusting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeptical
Self-reliant	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Group-oriented
Driven	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Loves old time cowboys and Indians

FAMILY HISTORY

Maternal Grandfather of Donor

Height: <u>5'6"</u>	Weight: <input checked="" type="radio"/> Thin <input type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input checked="" type="radio"/> Brown <input type="radio"/> Grey <input type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input type="radio"/> Light Brown <input type="radio"/> Blond <input checked="" type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input type="radio"/> Red <input type="radio"/> Strawberry Blond	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input type="radio"/> Thick <input type="radio"/> Average <input checked="" type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: Small Medium Large Very Large Vision: No need for corrective lenses
 Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?

Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)

<input type="checkbox"/> Dimples	<input type="checkbox"/> Full lips	<input type="checkbox"/> Cleft chin	<input checked="" type="checkbox"/> None
<input type="checkbox"/> High cheekbones	<input type="checkbox"/> Large eyes	<input type="checkbox"/> Other:	

Occupation: Retired Carpenter

Education (highest degree, subject): High school diploma

Notable talents and interests: Carpenter

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Pessimistic
Assertive	<input type="radio"/> —————	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Accommodating
Outgoing	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Reserved
Trusting	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Skeptical
Self-reliant	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Group-oriented
Driven	<input type="radio"/> —————	<input checked="" type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> —————	<input type="radio"/> Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Loves old time cowboys and Indians story's.

FAMILY HISTORY

Paternal Grandmother of Donor

Height: <u>6'2"</u>	Weight: <input checked="" type="radio"/> Thin <input type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input checked="" type="radio"/> Brown <input type="radio"/> Grey <input type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input checked="" type="radio"/> Light Brown <input type="radio"/> Blond <input type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input type="radio"/> Red <input type="radio"/> Strawberry Blond <input checked="" type="radio"/> Straight	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input type="radio"/> Thick <input type="radio"/> Average <input checked="" type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: Small Medium Large Very Large Vision: No need for corrective lenses
 Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?

Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)

<input type="checkbox"/> Dimples	<input type="checkbox"/> Full lips	<input type="checkbox"/> Cleft chin	<input type="checkbox"/> None
<input checked="" type="checkbox"/> High cheekbones	<input type="checkbox"/> Large eyes	<input type="checkbox"/> Other:	

Occupation: County office

Education (highest degree, subject): High school diploma

Notable talents and interests: Quilting and cooking

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pessimistic
Assertive	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Accommodating
Outgoing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Reserved
Trusting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeptical
Self-reliant	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Group-oriented
Driven	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Easy going and soft spoken

FAMILY HISTORY

Paternal Grandfather of Donor

Height: <u>6'8"</u>	Weight: <input checked="" type="radio"/> Thin <input type="radio"/> Normal <input type="radio"/> Overweight <input type="radio"/> Obese	Eye Color: <input type="radio"/> Black <input type="radio"/> Brown <input type="radio"/> Grey <input checked="" type="radio"/> Blue <input type="radio"/> Green <input type="radio"/> Hazel
Natural Hair Color: <input type="radio"/> Black <input type="radio"/> Light Brown <input type="radio"/> Blond <input checked="" type="radio"/> Dark Brown <input type="radio"/> Red Brown <input type="radio"/> Dark Blond <input type="radio"/> Brown <input type="radio"/> Red <input type="radio"/> Strawberry Blond	Natural Hair Texture: <input type="radio"/> Curly <input type="radio"/> Wavy <input checked="" type="radio"/> Straight	Natural Hair Volume: <input checked="" type="radio"/> Thick <input type="radio"/> Average <input type="radio"/> Thin <input type="radio"/> Balding

Body Frame Size: Small Medium Large Very Large Vision: No need for corrective lenses
 Corrective lenses or corrective surgery

Relative to ethnic origin, how would you describe this person's complexion?
 Very Fair Fair Medium Dark Very Dark

Distinguishing features: (check all that apply)
 Dimples Full lips Cleft chin None
 High cheekbones Large eyes Other: Large nose

Occupation: Retired Mechanic

Education (highest degree, subject): High school diploma

Notable talents and interests: Can build and fix anything

How would you describe this person's personality?

Optimistic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pessimistic
Assertive	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Accommodating
Outgoing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Reserved
Trusting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeptical
Self-reliant	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Group-oriented
Driven	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relaxed

When you think of this person, what words, ideas, and/or memories come to mind?

Always smiling