



ACRC Global
Angels Creation Reproductive Center



(Donor 208)

Introduction

Year of Birth:
1996

Height (m):
1,71

Weight (kg):
52

Hair Color:
Blond

Eye Color:
Green

Ethnic Origin:
Brazilian/German

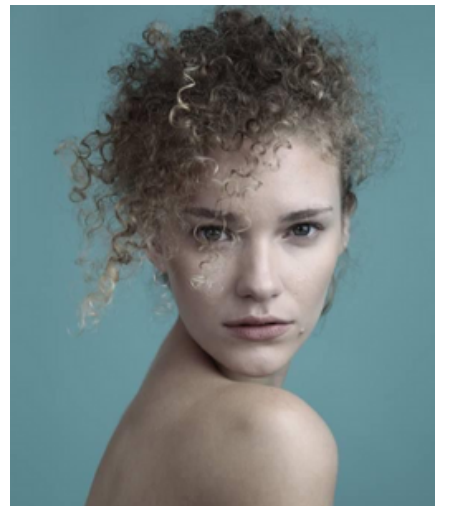
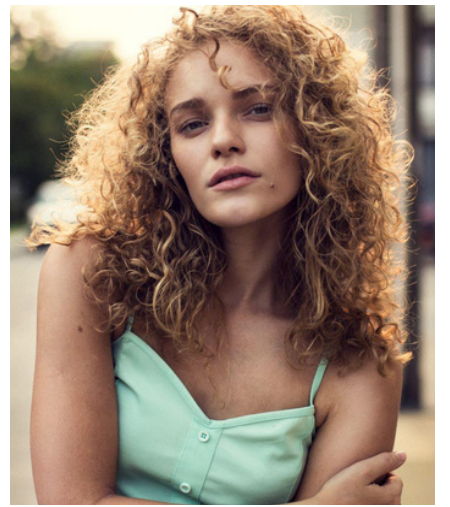
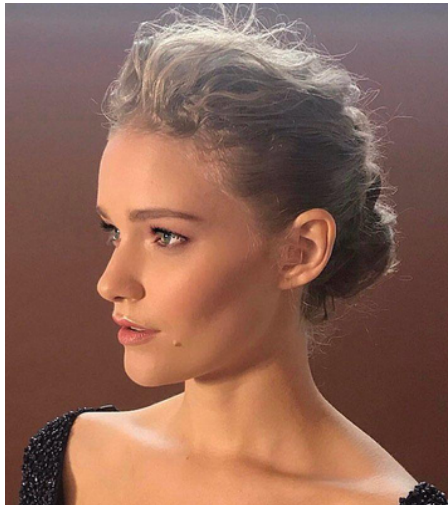
Maternal Heritage:
German

Paternal Heritage:
German

Blood Type:
A+

Photos





Egg Donor Personal Bio

Why have you decided to become an egg donor?

Because I have a friend who can't have children and I saw her struggle to be a mother. I always wanted to help her but it was not possible then and now I have the opportunity to help other families through this egg donation process.

What is your current occupation? Student and model.

What are your professional aspirations? Create my own company.

Describe a typical day in your life. In the morning I like to have a nice coffee and exercise if possible. During the rest of the day I like to dedicate myself to my duties such as studying and working. At night I disconnect, reading a book or doing something for my well being.

If you could visit anywhere in the world, where would it be and why? I am very curious about certain historical religious places.

What would you consider your greatest strengths and weaknesses? Strong point: persevering, honest, fair, empathetic and sweet. Weakness: restless.

Do you have any special skills or hobbies? For example, do you excel in athletics, art, cooking, musical abilities, etc.

My biggest hobby is drawing, more specifically industrial drawings. In addition, I practiced swimming for years, spinning

Describe what you were like as a child. Very creative, loved to write in diaries. I had a collection of notebooks with collage of artistic paintings, such as renaissance, surrealism... I grew up being a very expressive and playful girl.

Who would you consider to be your role model and why? Barack Obama. Because he is an exemplary leader. He defends his causes with education and intellectualism.

Describe your favorite memory. My favorite memory is how my imagination flew when I was reading a good book.

Describe your personality and character. I consider myself a nice, helpful, loyal, sensible and enthusiastic woman. I feel like I have a strong character, but it's connected to kindness. I believe that a person can get what he wants as long as he has respect for others and expresses it in a polite way.

What are your favorite foods? Vegetarians or Vegans.

What is your favorite color? Moss green.

What is your favorite place? Dam of the River Amstel.

What have been your best achievements as an adult? Having entered the University that I have always admired.

What are your future goals? Finish my studies. Start my own company, succeed. Create my own family.

What steps have you taken towards them? Studying the market a lot, advancing in my projects to reach my goal.

What is your philosophy on life? Free spirit. You're just passing through so make the most of it!

What kind of support do you expect from your spouse/partner, family, friends and co-workers during the egg donation process? I expect them to respect and support all my decisions.

What do you like to do in your free time? Read a good book, go out with my friends, enjoy my family and nature too.

What are your biggest passions in life? Animals and unusual adventures.
What were/are your favorite classes in school? Portuguese and biology.
What were/are your least favorite classes in school? Physical education.

Please leave a message to the intended parents. I would like to comment that, offering a part of me for a human being to be born, I would like to say to future parents that I was lucky to have been born and raised by a beautiful family with wonderful values and brotherly love, and the union of these principles is the most important thing for me in building a family. I hope you can build this new family with lots of affection and love!

Education Level

What is the highest education level you have attained? Finishing Design University

Medical Health History

Do you have any current or past medical problems? No

Have you had any cosmetic procedures, including lip injections, Botox, fillers, etc.? No

How many surgeries have you had in your lifetime, including cosmetic or reconstructive surgeries? None

What is your blood type? Not sure

Do you have excess body or facial hair growth? No

Do you have a history of bleeding tendencies or bruising easily? No

Do you have a history of acne? During the teenage phase but nothing over the top

Have you ever worn corrective lenses? No

Have you ever had braces? No

Have you ever had neck or back problems? No

Have you ever been diagnosed or suffered from asthma? No

Have you ever suffered from migraine headaches? No

Mental Health History

Do you have any mental health problems? No

Have you ever induced vomiting or taken laxatives to lose weight or to keep from gaining weight? No

Do you feel you were ever a victim of sexual, physical, or psychological abuse? No

Have you ever intentionally hurt yourself and/or caused yourself physical harm? No

Reproductive Health History

What is your sexual orientation? Heterosexual

Have you ever participated in sexual intercourse? Yes

Are you currently sexually active? Yes

Have you had an HIV (AIDS) Test? Yes, years ago, all normal.

Have you ever been diagnosed with an STD, including genital warts or sores, herpes, gonorrhea, syphilis, or chlamydia? No

Have you ever been diagnosed with PID (Pelvic Inflammatory Disease)? No

Have you ever been diagnosed with uterine fibrosis? No

Have you ever had issues conceiving? No

Egg Donation History

How many times have you donated eggs? None

Children Delivered

How many children have you delivered? None

Please indicate what type of birth control you are currently using: None

Do you have a menstrual cycle every month? No, I am using a contraceptive injection called Sayana

How many days do your menstrual cycles last? 5

Have you ever had a pap smear? Yes

How many stillbirths have you had? None

Abortion History

Have you ever had an abortion because of abnormal fetal development? No

How many abortions have you had? None

Paternal Grandfather

Alive / Deceased: Deceased

If deceased, age at time of death: 83

List serious medical illnesses or hospitalizations. If deceased, list cause of death. Pneumonia

Eye color: Blue

Hair color: Blond

Height: 1,75

Weight: 89 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

Paternal Grandmother

Alive / Deceased: Deceased

If deceased, age at time of death: 76

List serious medical illnesses or hospitalizations. If deceased, list cause of death. Heart attack

Eye color: Blue

Hair color: Blond

Height: 1,68

Weight: 74 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

Maternal Grandfather

Maternal Grandfathers year of birth: 1931

Alive / Deceased: Deceased

If deceased, age at time of death: 96

List serious medical illnesses or hospitalizations. If deceased, list cause of death. Old age, past away sleeping

Eye color: Green

Hair color: Blond

Height: 1,83

Weight: 74 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

Maternal Grandmother

Maternal Grandmothers year of birth: 1930

Alive / Deceased: Deceased

List serious medical illnesses or hospitalizations. If deceased, list cause of death. Stroke

Eye color: Green

Hair color: Blond

Height: 1,67

Weight: 70 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

Father

Date of birth: 1963-01-06

Alive / Deceased: Alive

Eye color: Blue

Hair color: Blond

Height: 1,73

Weight: 95 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

List serious medical illnesses or hospitalizations. If deceased, list cause of death. None

Mother

Date of birth: 1966-07-24

Alive / Deceased: Alive

Eye color: Green

Hair color: Blond

Height: 1,70

Weight: 70 kg

Occupation: Farmer

Highest education level achieved: High School Graduate

List serious medical illnesses or hospitalizations. If deceased, list cause of death. None

Genetic History

Fibromyalgia? No

Systemic Lupus Erythematosus? No

Cystic fibrosis? No

Fragile X Syndrome? No

Anemia or Thalassemia? No

Hydrocephaly? No

Spina Bifida? No

Tay Sachs? No

Neurofibromatosis? No

More than 2 miscarriages? No

Physical birth defects (such as heart defect, cleft lip, club feet, extra fingers, or toes, etc.)? No

Bleeding disorders (such as hemophilia or von Willebrand disease)? No

Blood clotting disorders such as thrombosis (blood clots in the veins)? No

Stroke? No

Iron overload, hereditary hemochromatosis, or cirrhosis of the liver? No

Heart disease, including high blood pressure, arrhythmia, heart attack, heart failure, high cholesterol, atherosclerosis, or coronary artery disease? No

Anyone with reflux or chronic heartburn, hiatal hernia, gallstones, ulcers, colitis, irritable bowel syndrome, crohns disease, or other gastrointestinal problems? No

Kidney disease such as polycystic kidneys, missing or abnormal kidneys, kidney failure, or kidney stones? No

Diabetes, thyroid, or any other hormone disorder? No

Blindness in one or both eyes, glaucoma, cataracts, color blindness, or any other vision or eye problem? No

Hearing loss in one or both ears or any outer ear abnormality? No

Bones that break easily, osteoporosis, or scoliosis? No

Joint or muscle problems (such as weakness, muscular dystrophy, or MS)? No

Huntington disease, Alzheimer disease, Parkinson disease, cerebral palsy, or other nerve problems? No

Seizures or epilepsy? No

Breathing problems, such as emphysema or asthma? No

Allergies including drug, food, or environmental? No

Serious skin conditions such as multiple birthmarks, lumps, bumps, scaly skin, eczema or psoriasis? No

Any type of cancer, including leukemia, lymphoma, and other blood cancers? No

Dwarfism or unusually short stature? No

Anyone who is seriously overweight? No

Eating disorders such as anorexia or bulimia? No

Depression including situational depression? No

Suicide or suicide attempts? No

Manic depression, bipolar disorder, schizophrenia or Anxiety? No

Hospitalized or diagnosed with any other mental health condition or crisis? No

Does anyone in your family have any Mental or emotional disorders? No

Heavy alcohol use? No

Alcoholism? No

Recreational or prescription drug abuse? No

Attention Deficit Disorder / Attention Deficit Hyperactivity Disorder? No

Autism, Autism Spectrum / Aspergers Syndrome? No

Learning disability (including dyslexia)? No

Developmental delays or low IQ? No

Down syndrome or any other chromosome disorder? No