



ED#1254

Eye Color	Hair Color	Height
Black	Black	160cm
Ethnicity	Blood Type	Education
Japanese	В	University
Donor Location	Year of Birth	
Japan	1998	

Donor Photos



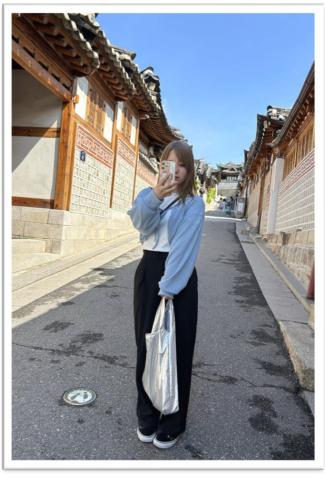


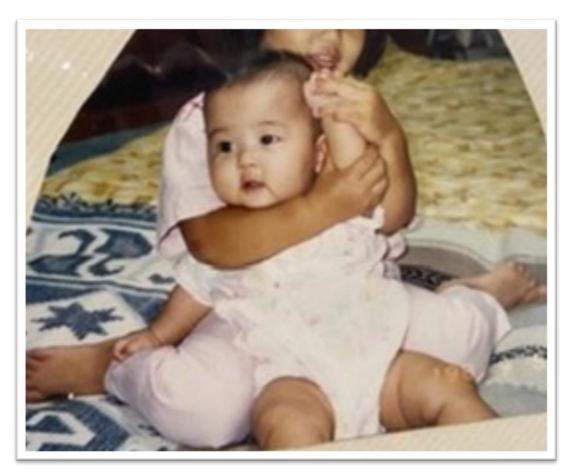


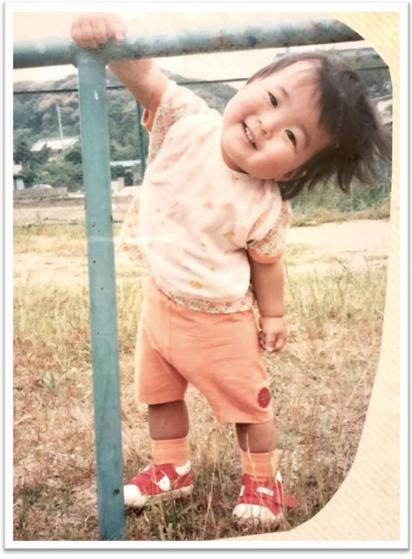












Physical Information Eye Color Black **Natural Hair Color Black Natural Hair Type** Straight **Corrective Dental** No Vision Good **Complexion/Skin Tone** Fair What is your occupation? Nurse Do you have any musical talents? If any, please list. N/a Do you have any artistic abilities? If any, please list. **Painting** Do you play sports or exercise? Badminton, table tennis, swimming, and dancing. How often do you exercise? 2-3 times per week.

Please describe your athletic abilities.

Average. I may not have much stamina, but I cultivated explosive power through playing badminton and table tennis. I have continued playing badminton and walking even as an adult.

Please describe your personality.

Optimistic, immersed in things you like and are interested in. Relationships with people are rather narrow and deep. He tries to maintain good hierarchical relationships at work, and although he sometimes has a hard time saying what he wants to say, I think he is a humble and gentle person who makes sure everything ends peacefully.

Please describe your hobbies.

Watching movies (I watch Western, Japanese, and Korean movies), KPOP, Korean dramas, and studying Korean. I am now able to have simple conversations with native speakers in Korean.

Education Information

Highest level of education completed.

University

Do you have any college background?

Yes

College Details

Institution	Location	Degree	Majors
	Japan	University	Nursing

Reproductive Information

Have you ever been pregnant?

No

Number of Children, if any.

n

Current method of birth control.

None

How often do you get your menstrual period?

Every 28 Days

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

No

Personal Health and Medical Information Overall health condition Good Date of your last pap smear. (If none put N/A) What were the results of your last pap smear? Normal Are you adopted? No If so, do you have your biological parents' information? N/a 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)? **Facial Lipo** If yes, please list the surgery procedure and year. 2019 Have you taken any medications within the past 12 months? Have you ever been diagnosed with cancer? No Do you have any birth defects? No Have you ever had any STI/STDs? Nο Have you ever had syphilis or gonorrhea? No Have you ever had hepatitis B or C?

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

Have you or your immediate family suffered from infertility?		
lo		
Ooes your family have twins or triplets?		
lo		
lave any of your family members ever had a serious illness?		
lo		
lave any of your family members ever had a serious mental illness?		
lo		
o you or any of your family members have genetic disorders ?		
lo		

Genetic Information - Family

Family History

Please tell us some basic details about your biological mother.

Age and Health Sta 53-Good	tus
Height 156cm	
Weight 45	
Hair Color Black	
Eye Color Black	
Education & Occupa	ation

Please tell us some basic details about your biological father

Age and Health Status 55-Good
Height
181cm
Weight 68
Hair Color Black
Eye Color Black
Education & Occupation University- Sales Manager

Please tell us some basic details about your biological grandparents

	Maternal	Maternal	Paternal	Paternal
	Grandmother	Grandfather	Grandmother	Grandfather
Age and Health Status	82	87	76	77
Height	163	183	158	176
Weight	43	75	48	78
Hair Color	Black	Black	Black	Black
Eye Color	Black	Black	Black	Black

Egg Donation History

Why do you want to become an egg donor?

To help others because I do not wish to have children.

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

I hope that through my actions, I can contribute to the happiness of families who have struggled through some difficult times.

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