



DONOR PROFILE – DONOR CODE 57VBE_____

DEMOGRAPHIC AND PHYSICAL DATA

Date of birth (MM/YYYY): 03-1977		Place of Birth (city/state): HAYWARD, CA	
Hair Color: BROWN		Hair Type: THICK	Eye Color: HAZEL
Race: CAUCASIAN		Religion: CHRISTIAN	Body Frame: ATHLETIC
Ethnic Origin (maternal): SWEDISH		Ethnic Origin (paternal): PORTUGUESE, GERMAN	
Height: 5'11"	Weight (lbs): 170	Complexion: FAIR-MEDIUM	Blood Type: 0-

PERSONAL AND EDUCATIONAL DATA

Marital Status (S/M/D): SINGLE		No. of Children: 0	No. of Siblings: 1
Occupation: WAITER/ BARTENDER		Degree/Major: B.S. GRAPHIC DESIGN/ A.A. MULTIMEDIA	
Career Goals: CREATIVE DIRECTOR OF A DESIGN FIRM/ AD AGENCY			
Hobbies/Interests: SURF, SNOWBOARD, GYM, FOOTBALL, DRAWING, PHOTOGRAPHY, COMPUTERS AND COOKING			
Describes himself as: CREATIVE, ARTISTIC, ATHLETIC, RESERVED AND VERY DOWN TO EARTH			

PERSONAL FAMILY BACKGROUND

	Age	Height	Weight	Complexion	Hair Color	Eye Color	Education/ Occupation	Age Deceased	Cause of Death
Mother	65	5'9"	200	LIGHT	BROWN	BLUE	COLLEGE/ HOUSEWIFE		
Father	63	5'10"	180	MEDIUM	DARK BROWN	GREEN	ELECTRICAL ENGINEER		
SIB#1	30	5'10"	170	MEDIUM	BROWN	GREEN	B.S.SCIENCE /GRADSCHOOL		
SIB#2									
SIB#3									
SIB#4									
SIB#5									
MGM		5'8"	150	FAIR	BROWN	BLUE	NURSE	43	N/A
MGF	85	6'	200	FAIR	BROWN	BLUE	FARMER		OLD AGE
PGM		5'8"	145	MED	BROWN	GREEN	H.S. / OWNED RESTRUANT	MID 70'S	STROKE
PGF		5'10"	174	MED	BROWN	BLUE	COLLEGE/ POSTAL SERVICE	LATE	EMPHYSEMA

SIB=Sibling F=Female M=Male
MGM=Maternal Grandmother MGF=Maternal Grandfather PGM=Paternal Grandmother PGM=Paternal Grandfather



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DONOR / FAMILY MEDICAL HISTORY		
Medical History	Donor	Relatives
Circulatory (Blood/Heart)	NONE	PGM
Gastrointestinal	NONE	NONE
Genital/Reproductive	NONE	NONE
Integumentary (Skin)	NONE	NONE
Mental Health	NONE	NONE
Metabolic/Endocrine	NONE	√
Musculo/Skeletal (Muscle/Bones/Joints)	NONE	NONE
Neurological	NONE	NONE
Respiratory (Lungs)	NONE	PGF
Sight/Sound/Smell	NONE	NONE
Urinary	NONE	NONE
Allergies	NONE	NONE
Birth Defects	NONE	NONE
Genetic Diseases	NONE	NONE
DX=Diagnosed		
GENETIC TESTING – TO BE ENTERED BY FERTILITY CENTER OF CALIFORNIA STAFF ONLY		
Sickle Cell Anemia: N/A		Tay-Sachs Disease: NON-CARRIER
Cystic Fibrosis: TESTED FOR 32 MUTATIONS, NEGATIVE FOR ALL		
Chromosome Analysis: NORMAL MALE 46, XY		
Thalassemia: CBC/DIFF WITHIN NORMAL LIMITS, MCV NORMAL		
ADDITIONAL INFORMATION (PLEASE CIRCLE CHOICES)		
Special Skills, Talents, Abilities: DRAWING, PAINTING, ATHLETIC		
Languages:		
Favorite Movies: ACTION, COMEDY		
Favorite Music: ROCK , RAP		
Favorite Sport: SNOWBOARDING		