Date: 22-Sep-16

### **DONOR PROFILE** GENERAL INFORMATION

Year of Birth: 1995 Place of Birth: USA											
Racial Group/Color C		Black/Black	Asian/Yellov	w 🗌 Other/Red							
Ethnic Origin/Ancestr	y: Mother:	Irish Father:	Italian								
Religion Born Into: Donor: Cath	olic Mother: Catl	holic Father: Ca	tholic								
If Jewish:	🗌 Ashkenazi	🗌 Se	ephardic	Oriental							
Height: 6'5" Weig	ght: 185 lbs	Eye Color: Blue	Hair Color: Light B	rown (Blond as a kid)							
balding [ thin [	Hair Type: ] curly ] wavy ⊠ straight	Corrective Lens	ses: Corrective Ey ☐ Yes ⊠No	/e Surgery Blood Type:							
Bone Structure:	Small	🛛 Medium	Large	Very Large							
Are you predominate	ly:	🗌 right-hande	d 🗌 left-handed	ambidextrous							
Other distinguishing f	eatures (dimples,	cleft chin, Roma	n nose, etc.):								
Skin Characteristics: Freckles:	None	⊠ Few	🗌 Many								
<ul> <li>Very fair (little to n</li> <li>Fair (skin will tan</li> <li>Medium (light cold</li> <li>Olive (pigmentation</li> <li>Dark (unexposed</li> </ul>	lightly on sun exp or but will tan mod on of unexposed s	oosure) derate to dark)	☐ Light ☐ ☐ Dark Tan ☐	Moderate 🗌 Dark Brown 🗌 Black							
	E	DUCATIONAL I (check highest I	BACKGROUND evel attained)								
High School	<b>□</b> 1 <b>□</b> 2	□3	⊠4 GPA:4.0								
College/University Major Area o	☐1 ☐2 f Study:	□3	⊠4 GPA:3.4	⊠ B.A. □ B.S.							
Post Graduat	te 🗌 1 🔤 2	3	<b>4 5</b> +	GPA:							
Major: Finan	ice										
Degrees Attained:	]M.A. []M.S.	□Ph.D. □M.	D. 🗍 J.D. 🗍 D.D	0.S. Other:							

1

#### PERSONAL CHARACTERISTICS

(Please describe in some detail)

What is your native language? English

What other languages do you speak? None

Math Skills/Ability: Strong

Mechanical Skills: Strong

Athletic Skills: Strong

What is your favorite sport? Soccer/Track & Feild

What are your Hobbies/Interests/Talents: Scuba Diving/Backpacking/Photography/Running

**Describe your artistic ability:** Fairly artistic

What are your favorite foods? Indian

What is your favorite color? Blue

**Do you like animals? If so, which is your favorite?** Yes. I love dogs.

**To where would you like to travel and why?** Nepal, to experience the Himalayas.

How would you describe your personality? Outgoing

What is your ultimate ambition or goal in life and how do you see yourself in twenty years? Start a family in the greater Seattle area.

#### ADDITIONAL ACADEMIC INFORMATION

SAT Scores: Verbal 680 Math 710 Total 1390

LSAT MCAT GRE

GMAT Other

#### **EMPLOYMENT/OCCUPATIONAL HISTORY**

What is your current or most recent occupation?

List all the jobs you have had in the past five years and any exposure to chemicals and gases. Please consider carefully.

Jobs/Duties	Year emp	oloyment	Exposure to which chemicals,
(Do not name employer)	Began	Ended	gases, etc.
1. Construction	2011	2013	none
2. Vallet	2014	2016	none
3. Waiter	2016	Present	none
4.	Click	Click	
5.	Click	Click	
6.	Click	Click	

### FERTILITY HISTORY

Do you have any children? No		
If yes, how many male children?	female children?	
For each child, please give age, and list any health	n problems:	
Age Special Health Problems		
Have you ever been responsible for any pregnanc	ies other than those listed above?	🛛 No 🗌 Yes
If yes, what year did it occur?		
Have you ever been refused as a blood donor?		🕅 No 🗌 Yes
If yes, explain:		
n yes, explain.		
Has anyone in your family had difficulty in achie	ving pregnancy?	No Yes
If yes, explain:		
Are there any twins or triplets in your family?		🛛 No 🗌 Yes
If yes describe:		

#### FAMILY MEDICAL HISTORY

**Note:** The following questions require knowledge about your family's medical history. You may wish to have your mother or father assist you in obtaining the necessary information.

Has any member of your family, including yourself, had a problem or defect <u>at birth</u> in any of the following body systems?

- 1. Circulatory system
- 2. Gastrointestinal system
- 3. Genital/urinary system
- 4. Metabolic (hormones, enzymes, etc.)
- 5. Nervous system (brain, spinal cord, etc.)
- 6. Respiratory system
- 7. Skeletal system (bones, joints, muscles)
- 8. Organ (heart, lung, kidney, etc.)
- 9. Other:

If yes to any of the above, please list below the specific defect in each case.

Type of birth defect	Affected family member	Age at diagnosis	Relevant circumstances

Do you have any brothers or sisters who died in infancy or childhood?

No Yes

🖂 No

🖂 No

🖾 No 🛛

🖾 No 🛛

 $\boxtimes No$ 

XNo

 $\boxtimes$  No  $\square$  Yes

No

No

**Yes** 

Yes

Yes

Yes

**Yes** 

Yes

Yes

Yes

If yes, what was the cause?

Are there any diseases or abnormalities that appear to run in your family? If yes, indicate the disease(s) and the family member(s) affected.

Has anyone in your family, including yourself, experienced recurring and/or chronic symptoms that have not been evaluated by a physician? (Please include those symptoms that you may not consider serious.)

 $\boxtimes$  No  $\square$  Yes

If yes, please describe:

🛛 No 🗌 Yes	
ptoms that have no	t

													Mat	ernal	Pate	ernal
Relatives	Mother	Father	Sib	lings	G	randp	arent	s	Au	nts	Unc	les	Cοι	usins	Cοι	isins
			F	Μ	MGM	MGF	PGM	PGF	Mat	Pat	Mat	Pat	F	Μ	F	Μ
Indicate number of relatives $\rightarrow$	1	1	1	1	1	1	1	1	0	3	1	1	0	0	4	2

Medical Problem	You	Mother	Father	Sibl	lings	G	randp	arent	s	Aunt	s U	ncles			l Pate Cou		NO
				F	М	MGM	MGF	PGM	PGF	Mat P	atM	atPa	t F	Μ	F	Μ	one
1. Cardiovascular																	
A. congenital heart defect																	$\boxtimes$
B. atherosclerosis																	$\boxtimes$
C. arteriosclerosis																	$\boxtimes$
D. heart attack																	$\boxtimes$
E. high blood pressure																	$\boxtimes$
F. stroke																	$\boxtimes$
G. other																	$\boxtimes$
	-		-	-	-	-	-	-	-	<u> </u>	-	-	-	•	-	-	
2. Blood																	
A. anemia																	$\boxtimes$
B. sickle cell anemia																	$\boxtimes$
C. hemophilia or other bleeding problem																	$\boxtimes$
D. leukemia																	$\boxtimes$
E. immune deficiency																	$\boxtimes$
F. other																	$\boxtimes$
3. Respiratory (lungs)	•	•	•	-		-	•	•	•	• •	-	•	-	•	•		
A. hay fever																	$\boxtimes$
B. asthma																	$\boxtimes$
C. emphysema																	$\boxtimes$
D. tuberculosis																	$\boxtimes$
E. lung cancer																	$\boxtimes$
F. pneumonia																	$\boxtimes$
G. other																	$\boxtimes$
4. Skin																	
A. acne	$\boxtimes$				$\boxtimes$												$\boxtimes$
B. eczema																	$\boxtimes$
C. melanoma																	$\boxtimes$
D. skin cancer															$\square$		
E. pigmentation disorders																	$\boxtimes$
F. other																	$\square$

Comments: My cousin had skin cancer but has been clear. My brother and I had acne through our teenage years.

Medical Problem	You	Mother	Father	Sibl F		G MGM		arent						Cou	ernal sins M			No one
5. Gastro-intestinal					IVI	IVIGIVI	NGF	PGIVI	РСГ	Iviat	Pat	iviat	Pal		IVI		IVI	
A. ulcer of stomach or	_								_		<u> </u>					_	_	
duodenum																		$\boxtimes$
B. gall stones																		$\boxtimes$
C. hepatitis A (infectious)																		$\boxtimes$
D. hepatitis B (serum)																		$\boxtimes$
E. other liver disease																		$\boxtimes$
F. colon cancer																		$\boxtimes$
G. ulcerative colitis																		$\boxtimes$
H. Crohn's disease																		$\boxtimes$
I. cystic fibrosis																		$\boxtimes$
J. intestinal cancer																		$\boxtimes$
K. other																		$\boxtimes$
6. Urinary		_	_	_	_						-					_	_	
A. kidney disease																		$\boxtimes$
B. disease of the urinary	_	_							_	_					_		_	_
tract (urethra,bladder,																		$\boxtimes$
ureter)																		
C. other																		$\square$
7. Genital/Reproductive s	vste	m																
A. undescended testicle	$\left[ \square \right]$																	$\square$
B. hypospadias																		$\boxtimes$
C. prostate cancer																		$\boxtimes$
D. uterine fibroids																		$\boxtimes$
E. ovarian cysts																		$\boxtimes$
F. cancer of cervix or																		$\boxtimes$
uterus																		
G. breast cancer																		$\square$
H. ovarian cancer																		$\boxtimes$
I. Other																		$\boxtimes$

Comments: N/A

						_								Mate				No
Medical Problem	You	Mother	Father		ings	G	randp							Cou		Cou F		one
8. Metabolic/Endocrine	L		<u> </u>	F	IVI	MGM	MGF	PGM	PGF	iviat	Pat	iviat	Pat		Μ		Μ	<u> </u>
A. diabetes mellitus																		
B. hypoglycemia	⊢			╞					╞┤	H	⊣	$\vdash$	H	믐		╞	┢	
C. thyroid cancer	H			H					H	H	H		H	H			H	
D. thyroid disease	⊢⊢			片					╞┤	$\mathbb{H}$	片		片	믐	H	╞	片	
E. goiter	$\mathbb{H}$			片					片	H	H	H	H	片		╞	H	
F. adrenal dysfunction or																		
disorder				IП													IП	$\boxtimes$
G. other																		$\boxtimes$
9. Neurological	-			-	-				-				-		-		-	
A. migraines																		$\square$
B. mental retardation																		$\square$
C. senility before age 50																		$\square$
D. Alzheimer's disease									$\boxtimes$									
E. multiple sclerosis																		$\boxtimes$
F. epilepsy or seizure disorder																		$\bowtie$
H. hydrocephalus																		$\boxtimes$
I. disorders of spinal cord																		$\boxtimes$
J. Huntington's disease																		$\boxtimes$
K. Gaucher disease																		$\boxtimes$
L. Wilson's disease																		$\square$
M. delay in growth and/or																		$\boxtimes$
development																		$\square$
N. learning disorder																		$\boxtimes$
O. other																		$\square$
10. Mental Health	1		1	1	-			1		-	T	T	-	T	T	-	T	-
A. schizophrenia																		$\square$
B. manic depressive illness																		$\boxtimes$
C. other mental health disorders requiring hospitalization																		
D. severe depression with periods of inability to function																		$\boxtimes$
E. other																		$\boxtimes$

Comments: My grandfather had Alzheimer's disease.

Medical Problem	You	Mother	Father					arent					cles	Mate Cou	sins	Cou	sins	
	<u> </u>		<u> </u>	F	Μ	MGM	MGF	PGM	PGF	Mat	Pat	Mat	Pat	F	М	F	М	
11. Muscles/Bones/Joints	r —				-													
A. muscular dystrophy											$\Box$							$\boxtimes$
B. other chronic muscle disease																		$\boxtimes$
C. lupus																		$\boxtimes$
D. deformity of spine																		$\boxtimes$
E. osteoporosis																		$\boxtimes$
F. dwarfism																		$\boxtimes$
G. hereditary low back disease																		$\boxtimes$
H. arthritis																		$\boxtimes$
I. gout																		$\boxtimes$
J. other																		$\boxtimes$
12. Sight/sound/smell	•	•	•	•	<u>.</u>	•	-	•	•	-				_	_		•	
A. deafness before age 60																		$\boxtimes$
B. significant hearing loss																		$\boxtimes$
C. deformity of the ear																		$\boxtimes$
D. cataracts before age 50																		$\boxtimes$
E. blindness																		$\boxtimes$
F. color blindness																		$\boxtimes$
G. glaucoma																		$\boxtimes$
H. deviated septum																		$\boxtimes$
I. any other sight/sound/ smell disorder																		$\boxtimes$
13. Other			-	-					-									
A. alcoholism																		$\boxtimes$
B. drug abuse, misuse, or addiction																		$\boxtimes$
C. any other cancer not mentioned above																		$\boxtimes$
D. any other condition not mentioned above																		$\boxtimes$

Comments: N/A

#### PERSONAL HEALTH HISTORY

Do you currently have any allergies?	No Yes	
If yes, they are to:	Food Drugs	Plants Other
Please list specific substances and reaction (s) pr	oduced:	
Substance	Reaction	1
Describe any childhood allergies you had:		
How is your vision (without corrective lenses)?	Excellent SG	ood Fair Poor
Do you wear corrective lenses?	No Yes	Your vision is:
Are you: Nearsighted Farsighted	Other (specify)	
Have you undergone corrective eye surgery?	No Yes	
Do you have any hearing impairments? If yes, please describe:	⊠No □Yes	
Condition of your teeth (check one):	Good Fair	Poor
Your diet is: Any dietary restrictions?	⊠Good □Fair	Poor
Dietary supplements (vitamins, etc.)?		
How often do you exercise? Type of exercise:	egularly Occasionally	Rarely
Have you ever had surgery?		No Yes
If yes, please list all surgeries: 1)		Year:
2)		Year:
3)		Year:
4)		Year:
Have you had any hospitalization not already me If yes, please explain:	ntioned?	No Yes

### PERSONAL HEALTH HISTORY

(Continued)

Have you had major x-ray expo	lave you had major x-ray exposure or other radiation exposure?										
		If yes,	please explain:								
Have you or your sexual partne	rs ever had:	Myse	elf	Partr	ner	When					
NSU (non-specific urethritis)		No	Yes	No	Yes						
Chlamydia		No	Yes	No	Yes						
Genital Warts (HPV)		No	Yes	No	Yes						
Genital Herpes		No	Yes	No	Yes						
Other (s) Type (s):		No	Yes	No	Yes						
Have you ever been treated for	any sexually-tran	smitted	disease(s)?		No	Yes					
If yes, for which diseas	e(s):										
When? Details	?										
When was the last time	that you were tre	ated?									
Have you ever had any major il etc.? If yes, please explain:	lnesses such as ar	noebic	dysentery, hepa	atitis, pn ⊠No							
Do you have any chronic medic	cal problems or co	ondition	ıs?	No	Yes						
If yes, please explain:											
Have you ever been exposed to	herbicides or toxi	ic chem	nicals?	No	Yes						
If yes, please explain:											
Have you ever served in the mi	litary?			No	Yes						
If yes, please explain:											

#### PERSONAL HEALTH HISTORY

(Continued)

Please list any medications you are currently taking: None

Please list any prescription, non-prescription or recreational drugs that you have used or are currently using.

Describe any drug use as indicated below.

Name of Drug	Date Started	Date Ended	Frequency of use	How used?

How many alcoholic drinks do you consume during an average week?

Have you ever had a drinking problem?	No	Yes
If yes, describe:		
Have you ever been treated for alcohol or drug abuse?	No	Yes
If yes, describe:		
Do you smoke cigarettes?	No	Yes
If yes, how many packs/day?		

How long have you been smoking regularly?

### FAMILY HISTORY SECTION

The following pages contain detailed information regarding the donor's family members. There is one page of information for each family member, including his parents, siblings, grandparents, aunts and uncles. If the donor has more than one sister, you will find more than one page with the title, "Sister of Donor". If the donor has no sisters, this page will be blank. The same applies to brothers, aunts and uncles.

For a summary of the number of family members, please refer to the top portion of page 6 in this profile.

### FAMILY HISTORY Mother of Donor

Year of Birth 1960			Place of Birth: USA			
Racial Group: Caucasian	1	Black	Asian	ı [	Other	
If Jewish:	Ashkena	azi	Sephardic		riental	
Height: 5' 7" Weight	: 130lbs Ey	e Color: Green	Hair Color: Light	Brown (Blond as	s a kid)	
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Visio	n: Excellent Good Fair Poor	Bone Structure: Small Medium Large Very Larg		
Other distinguishing fe	atures (dimple	es, cleft chin, Ro	man nose, etc.):			
Skin Characteristics Freckles:	□ None	⊠ Few	🗌 Many			
<ul> <li>□ Very fair (little to no ability to tan on sun exposure)</li> <li>□ Fair (skin will tan lightly on sun exposure)</li> <li>○ Medium (light color but will tan moderate to dark)</li> <li>□ Olive (pigmentation of unexposed skin)</li> <li>□ Light</li> <li>□ Moderate</li> <li>□ Dark</li> <li>□ Dark (unexposed skin)</li> <li>○ Light tan</li> <li>□ Dark Tan</li> <li>□ Brown</li> <li>□ Black</li> </ul>						
Occupation: Emergene	cy Room Doct	or				
Education: Medical So	chool					
Special Skills or Chara	cteristics: Ath	nletic				
If living, describe her h	nealth:	Excellent	Good	🗌 Fair	Poor	
If deceased, give cause and age at time of death:						
What kind of person is Optimistic Assertive Leader Easy going	/was she?		$   \begin{bmatrix}     3 \\     3 \\     3 \\     \hline     3 \\     \hline     3   \end{bmatrix} $	<ul> <li>☐4 Pessin</li> <li>☐4 Passiv</li> <li>☐4 Follow</li> <li>☐4 Control</li> </ul>	re -	

### FAMILY HISTORY Father of Donor

Year of Birth 1961				Place of Birth:	USA	
Racial Group:		Black	Asian	ı [	Other	
If Jewish:	Ashkena 🗌	zi	Sephardic	□ O	riental	
Height: 6' 3" Weight:	210lbs Eye	e Color: Blue	Hair Color: Light Bi	rown		
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Visio	on: ] Excellent ] Good ] Fair ] Poor	Bone Structure: Small Medium Large Very Larg		
Other distinguishing fe	atures (dimples	s, cleft chin, Ro	oman nose, etc.):			
Skin Characteristics Freckles:	None 🗌	⊠ Few	☐ Many			
<ul> <li>□ Very fair (little to no ability to tan on sun exposure)</li> <li>□ Fair (skin will tan lightly on sun exposure)</li> <li>○ Medium (light color but will tan moderate to dark)</li> <li>□ Olive (pigmentation of unexposed skin)</li> <li>□ Light</li> <li>□ Moderate</li> <li>□ Dark</li> <li>□ Dark (unexposed skin)</li> <li>○ Light tan</li> <li>□ Dark Tan</li> <li>□ Brown</li> <li>□ Black</li> </ul>						
Occupation: Family D	octor					
Education: Medical Sc	chool					
Special Skills or Chara	cteristics: Ath	letic				
If living, describe his h	ealth:	Excellent	Good	🗌 Fair	Poor	
If deceased, give cause and age at time of death:						
What kind of person is/ Optimistic Assertive Leader Easy going	/was he? □1 □1 □1 □1			<ul> <li>☐4 Pessin</li> <li>☐4 Passiv</li> <li>☐4 Follov</li> <li>☐4 Control</li> </ul>	e	

### FAMILY HISTORY Sister of Donor

Year of Birth 1999			Place of Birth	: USA
	Full sibling Half sibling: Adopted into fami		ternal [ APLETE THIS	paternal FORM)
Height: 5' 10" Weight: 115lbs E	ye Color: Green	Hair Color: Light	Brown	
Hair:   Hair Type:     □ Balding   □ Curly     □ Thin   □ Wavy     ⊠ Average   ⊠ Straight     □ Thick   □ Thick		: I Excellent Good Fair Poor	Bone Structure Small Medium Large Very Lar	
Other distinguishing features (dimpl	es, cleft chin, Ron	an nose, etc.):		
Skin Characteristics Freckles:	🛛 Few	🗌 Many		
<ul> <li>Very fair (little to no ability to ta</li> <li>Fair (skin will tan lightly on sun</li> <li>Medium (light color but will tan</li> <li>Olive (pigmentation of unexposed</li> <li>Dark (unexposed skin)</li> <li>Occupation: Student</li> </ul>	exposure) moderate to dark)		D Moderate	e 🗌 Dark 🗌 Black
Education: High School				
Special Skills or Characteristics: Ar	tistic			
Does she have any children?		⊠No □Yes		
If yes, how many female children?		male cl	nildren?	
If living, describe her health:	Excellent	Good	🗌 Fair	Poor
If deceased, give cause and age at tin	me of death:			
What kind of person is/was she? Optimistic 1 Assertive 1 Leader 21 Easy going 1			☐4 Passi ☐4 Follo	

# FAMILY HISTORY Brother of Donor

Year of Birth 1992				Place of Birt	h: USA
Relationship to Donor	$\square$	Full sibling Half sibling: Adopted into fam		naternal DMPLETE THI	D paternal S FORM)
Height: 5' 11" Weigh	t: 170lbs E	ye Color: Green	Hair Color: Dar	k Brown	
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight		ı: Excellent Good Fair Poor	Bone Structur Small Medium Large Very La	n
Other distinguishing for	eatures (dimpl	es, cleft chin, Ron	nan nose, etc.):		
Skin Characteristics Freckles:	□ None	🛛 Few	🗌 Many	,	
<ul> <li>□ Very fair (little to</li> <li>□ Fair (skin will tan</li> <li>○ Medium (light col</li> <li>□ Olive (pigmentation)</li> <li>□ Dark (unexposed sono compation)</li> <li>□ Collage</li> </ul>	lightly on sun or but will tan on of unexpos skin)	exposure) moderate to dark		D Modera	te 🗌 Dark 🗌 Black
Education: College Special Skills or Chara	atoristics				
Does he have any child			No Ye	es	
If yes, how many fema	ale children?		male	children?	
If living, describe his l	health:	Excellent	Good	🗌 Fair	Poor
If deceased, give cause	e and age at ti	me of death:			
What kind of person is Optimistic Assertive Leader Easy going	s/was he?		$ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} $	4 Pass 4 Foll	simistic sive ower trolling, rigid

### FAMILY HISTORY Maternal Grandmother of Donor

Year of Birth 1934				Place of Birth:	USA	
Racial Group:		Black	🗌 Asia	n	Other	
If Jewish:	Ashkena	zi	Sephardic		Driental	
Height: 5' 6" Weight: 1	130lbs Eye	Color: Blue	Hair Color: Brown			
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Visio	on: ] Excellent ] Good ] Fair ] Poor	Bone Structure Small Medium Large Very Lar		
Other distinguishing fea	tures (dimple	s, cleft chin, Ro	oman nose, etc.):			
Skin Characteristics Freckles:	🛛 None	🗌 Few	/ Many			
<ul> <li>□ Very fair (little to no ability to tan on sun exposure)</li> <li>□ Fair (skin will tan lightly on sun exposure)</li> <li>○ Medium (light color but will tan moderate to dark)</li> <li>□ Olive (pigmentation of unexposed skin)</li> <li>□ Light</li> <li>□ Moderate</li> <li>□ Dark</li> <li>□ Dark (unexposed skin)</li> <li>□ Light tan</li> <li>□ Dark Tan</li> <li>□ Brown</li> <li>□ Black</li> </ul>						
Occupation: Retired						
Education: College						
Special Skills or Charac	cteristics: Mu	sicaly Inclined				
If living, describe her he	ealth:	Excellent	🔀 Good	🗌 Fair	Poor	
If deceased, give cause and age at time of death:						
What kind of person is/ Optimistic Assertive Leader Easy going	was she? □1 □1 □1 □1	$ \begin{array}{c}       2 \\       2 \\       2 \\       2 \\       2 \\       2 \end{array} $	$ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} $	☐4 Pessin ☐4 Passiv ☐4 Follov ☐4 Contr	ve	

### FAMILY HISTORY Maternal Grandfather of Donor

Year of Birth 1934				Place of Birth	USA
Racial Group:		Black	🗌 Asia	n	Other
If Jewish:	Ashkena	zi	Sephardic		Driental
Height: 6' 0" Weight:	170lbs Ey	e Color: Brown	Hair ColorBrowr	ı	
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Visio	on:   Excellent   Good   Fair   Poor	Bone Structure Small Medium Large Very Lar	
Other distinguishing fea	atures (dimple	s, cleft chin, Ro	oman nose, etc.):		
Skin Characteristics Freckles:	🛛 None	🗌 Few	🗌 Many		
<ul> <li>Very fair (little to r</li> <li>Fair (skin will tan l</li> <li>Medium (light colo</li> <li>Olive (pigmentation</li> <li>Dark (unexposed sl</li> </ul>	ightly on sun or but will tan n of unexpose	exposure) moderate to dar		D Moderate	e 🗌 Dark 🗌 Black
Occupation: Retired					
Education: College					
Special Skills or Charac	cteristics:				
If living, describe his h	ealth:	Excellent	🔀 Good	🗌 Fair	Poor
If deceased, give cause	and age at tim	ne of death:			
What kind of person is/ Optimistic Assertive Leader Easy going	√was he? ⊠1 □1 □1	$ \begin{array}{c}       2 \\       2 \\       2 \\       2 \\       2   \end{array} $	$   \begin{bmatrix}     3\\     3\\     3\\     3\\     3   \end{bmatrix} $	4 Passiv 4 Follo	

# FAMILY HISTORY Paternal Grandmother of Donor

Year of Birth 1926				Place of Birth	: USA	
Racial Group:		Black	🗌 Asi	an	Other	
If Jewish:	Ashkena	zi	Sephardic		Driental	
Height: 5' 7" Weight: 1	30lbs Eye	Color: Blue	Hair Color: Blond			
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Vis [ [ [	ion: ] Excellent ] Good ∑ Fair ] Poor	Bone Structure		
Other distinguishing fea	atures (dimples	s, cleft chin, R	doman nose, etc.):			
Skin Characteristics Freckles:	🛛 None	E Fe	w 🗌 Man	У		
<ul> <li>□ Very fair (little to no ability to tan on sun exposure)</li> <li>□ Fair (skin will tan lightly on sun exposure)</li> <li>□ Medium (light color but will tan moderate to dark)</li> <li>□ Olive (pigmentation of unexposed skin)</li> <li>□ Light</li> <li>□ Moderate</li> <li>□ Dark</li> <li>□ Dark (unexposed skin)</li> <li>□ Light tan</li> <li>□ Dark Tan</li> <li>□ Brown</li> <li>□ Black</li> </ul>						
Occupation: Nurse						
Education: College						
Special Skills or Charac	cteristics: N/A					
If living, describe her h	ealth:	Excellent	Good	🗌 Fair	Poor	
If deceased, give cause and age at time of death: Old Age / 82						
What kind of person is/ Optimistic Assertive Leader Easy going	was she?	$ \begin{array}{c} 2\\ \times 2\\ \times 2\\ \end{array} \\ 2\\ \end{array} $		4 Passi 4 Follo		

### FAMILY HISTORY Paternal Grandfather of Donor

Year of Birth 1925			Place of Birth: USA			
Racial Group:	an	Black	🗌 Asian	n 🗌 Other		
If Jewish:	Ashke	enazi	Sephardic	Oriental		
Height: 6' 1" Weigh	nt: 160lbs E	ye Color: Brown	Hair Color: Light	Brown		
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straig	ht E	on: ] Excellent ] Good ] Fair ] Poor	Bone Structure: Small Medium Large Very Large		
Other distinguishing	features (dimp	ples, cleft chin, Ro	oman nose, etc.):			
Skin Characteristics Freckles:	🔀 None	🗌 Few	n 🗌 Many			
<ul> <li>□ Very fair (little to no ability to tan on sun exposure)</li> <li>□ Fair (skin will tan lightly on sun exposure)</li> <li>□ Medium (light color but will tan moderate to dark)</li> <li>□ Olive (pigmentation of unexposed skin)</li> <li>□ Light</li> <li>□ Moderate</li> <li>□ Dark</li> <li>□ Dark (unexposed skin)</li> <li>□ Light tan</li> <li>□ Dark Tan</li> <li>□ Brown</li> <li>□ Black</li> </ul>						
Occupation: Navy						
Education: College						
Special Skills or Cha	racteristics: H	Іарру				
If living, describe his	s health:	Excellent	Good	Fair Poor		
If deceased, give cause and age at time of death: Old Age / 82						
What kind of person Optimistic Assertive Leader Easy going	is/was he? 1 1 1 1 1 1		$ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} \\ \boxed{3} $	<ul> <li>4 Pessimistic</li> <li>4 Passive</li> <li>4 Follower</li> <li>4 Controlling, rigid</li> </ul>		

### FAMILY HISTORY Maternal Uncle of Donor

Year of Birth 1959				Place of Bi	rth: USA
Racial Group: Caucas	sian	Black	As	ian	Other
If Jewish:	Ashker	nazi	Sephardic		Oriental
Height: 6' 0" Weig	ht: 200lbs Ey	e Color: Green	Hair Color: Ligl	nt Brown	
Hair: Balding Thin Average Thick	Hair Type: □ Curly □ Wavy ⊠ Straigh	Visi	on: ] Excellent ] Good ] Fair ] Poor	Bone Structu Small Mediu Large Very I	ım
Other distinguishin	g features (dimp)	es, cleft chin, R	oman nose, etc.):		
Skin Characteristic: Freckles:	s 🛛 None	🗌 Fev	v 🗌 Mar	ıy	
Fair (skin will t	to no ability to t an lightly on sur color but will tar ation of unexpos ed skin)	exposure) moderate to dat	rk)	Moder Moder Brown	=
Occupation: Clarin	etist				
Education: College	;				
Special Skills or Ch	aracteristics: D	edicated			
Does he have any c	hildren?		No No	les	
If yes, how many fe	male children?		mal	e children?	
If living, describe h	is health:	Excellent	Good	🗌 Fair	Poor
If deceased, give ca	use and age at ti	me of death:			
What kind of perso Optimistic Assertive Leader Easy going	n is/was he? 1 1 1 1 1 1	$ \begin{array}{c}       2 \\       2 \\       2 \\       2 \\       2 \\       2 \end{array} $	$ \begin{array}{c} 3 \\ \times 3 \\ \times 3 \\ \times 3 \\ \times 3 \end{array} $	☐4 Pa: ☐4 Fo	ssimistic ssive llower ntrolling, rigid

### FAMILY HISTORY Paternal Aunt of Donor

Year of Birth	1952			Place of Birth	n: USA
Racial Group:	Caucasian	Black	🗌 Asia	in	Other
If Jewish:	Ashke	nazi	Sephardic		Oriental
Height: 5' 7"	Weight: 150lbs E	/e Color: Blue	Hair ColorBlond		
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straigh		ion: Excellent Good Fair Poor	Bone Structure Small Medium Large Very La	I
Other distingu	uishing features (dimp	les, cleft chin, R	Roman nose, etc.):		
Skin Characte Freckles:	eristics	🛛 Fe	w 🗌 Many	1	
Fair (skin Medium ( Olive (pig	(little to no ability to t will tan lightly on sur light color but will tar gmentation of unexpose exposed skin)	n exposure)	urk)	☐ Moderat ☐ Brown	e 🗌 Dark 🗌 Black
Occupation:	Nurse				
Education: C	ollege				
Special Skills	or Characteristics: G	iving			
Does she have	e any children?			28	
If yes, how ma	any female children?		male	children?	
If living, desc	ribe her health:	Excellent	Good	🗌 Fair	Poor
If deceased, g	ive cause and age at ti	me of death:			
What kind of Optim Asser Leade Easy	tive 1 er 1	$ \begin{array}{c}       2 \\                             $	$ \begin{array}{c} 3\\ 3\\ 3\\ 3\\ 3\\ 3 \end{array} $	4 Passi 4 Follo	

### FAMILY HISTORY Paternal Aunt of Donor

Year of Birth 1954				Place of Birth: USA			
Racial Group:		Black	Asian	1	Other		
If Jewish:	wish: Ashkenazi		Sephardic	Sephardic Orienta			
Height: 5' 6'' Weight: 150lbs Eye Color: Green Hair ColorLight Brown							
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straight	Visio	n: Excellent Good Fair Poor	Bone Structure: Small Medium Large Very Larg			
Other distinguishing features (dimples, cleft chin, Roman nose, etc.):							
Skin Characteristics Freckles:	🛛 None	🗌 Few	🗌 Many				
Fair (skin will ta	n lightly on sun olor but will tan tion of unexpose	moderate to dark		☐ Moderate ☐ Brown	e 🗌 Dark 🗌 Black		
Occupation: Teacher							
Education: College							
Special Skills or Characteristics:							
Does she have any children?			No Yes	No Yes			
If yes, how many fer	nale children?	1	male children?	? 1			
If living, describe he	r health:	Excellent	Good	🗌 Fair	Poor		
If deceased, give cause and age at time of death:							
What kind of person Optimistic Assertive Leader Easy going	is/was she? □1 □1 □1 □1	$ \begin{array}{c} 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \end{array} $		☐4 Pessir ☐4 Passiv ☐4 Follov ☐4 Contr	ve		

### FAMILY HISTORY Paternal Aunt of Donor

Year of Birth 1957	7		Place of Birth: USA		
Racial Group:	asian	Black		sian	Other
If Jewish:	Ashke	enazi	Sephardic		Oriental
Height: 5' 5" We	ight: 140lbs E	ye Color: Brown	Hair ColorBlon	d	
Hair: Balding Thin Average Thick	Hair Type: Curly Wavy Straig	Visi	on: ] Excellent ] Good ] Fair ] Poor	Bone Structur Small Medium Large Very La	n
Other distinguishi	ng features (dimp	oles, cleft chin, R	oman nose, etc.):		
Skin Characteristi Freckles:	cs 🛛 None	🗌 Fev	v 🗌 Mai	лy	
Fair (skin will Medium (light	tan lightly on su color but will ta tation of unexpo	n moderate to da	rk) Light	☐ Modera n ☐ Brown	te 🗌 Dark 🗌 Black
Occupation: Teac	her				
Education: Colleg	ge				
Special Skills or C	Characteristics:				
Does she have any	children?			Yes	
If yes, how many	female children?		mal	e children? 1	
If living, describe	her health:	Excellent Excellent	Good	🗌 Fair	Deven Poor
If deceased, give c	ause and age at t	ime of death:			
What kind of perso Optimistic Assertive Leader Easy goin	$\begin{array}{c} & \boxtimes 1 \\ & \square 1 \\ & \square 1 \end{array}$	$ \begin{array}{c} 2\\ \times 2\\ \times 2\\ \times 2\\ \times 2\\ \times 2\end{array} $		☐4 Pass ☐4 Foll	simistic sive ower trolling, rigid

### FAMILY HISTORY Paternal Uncle of Donor

Year of Birth 19	56		Place of Birth:			
Racial Group:		Black	🗌 Asi	an	Other	
If Jewish:	Ashke	enazi	Sephardic		Oriental	
Height: 6' 0" W	/eight: 200lbs E	ye Color: Blue	Hair Color: Light I	Brown		
Hair: Balding Thin Average Thick	Hair Type: □ Curly □ Wavy ⊠ Straig		ion: Excellent Good Fair Poor	Bone Structu Small Mediu Large Very I	ım	
Other distinguis	hing features (dim	ples, cleft chin, R	Roman nose, etc.):			
Skin Characteris Freckles:	stics	🛛 Fe	w 🗌 Man	у		
Fair (skin w Medium (lig	ttle to no ability to ill tan lightly on su ght color but will ta entation of unexpo posed skin)	in exposure) in moderate to da	ark)	☐ Moder ☐ Browr		
Occupation: Co	onsulting					
Education: High	h School					
Special Skills or	Characteristics: H	Problem Solver				
Does he have an	y children?		□No ⊠Y	es		
If yes, how man	y female children?	3	male children	n? 1		
If living, describ	be his health:	Excellent	Good	🗌 Fair	Poor	
If deceased, give	e cause and age at	time of death:				
What kind of pe Optimis Assertiv Leader Easy go	tic $\square 1$ $\gamma e \square 1$ $\square 1$		$   \begin{bmatrix}     3 \\     3 \\     3 \\     \hline     3 \\     \hline     3   \end{bmatrix} $	4 Pas 4 Fol	ssimistic ssive llower ntrolling, rigid	

### In Your Own Words...

#### **What did you do immediately after high school?** Go to college

Which words describe your personality and character? Adventursome and outgoing

Which sports do you like to participate in? Football, and Soccer

Which sports did you play as a child? Track and field, baseball, soccer,

Which sports do you enjoy watching? Baseball, football

**Do you play any musical instruments?** Guitar

What is your most memorable childhood experience? Skiing in Lake Tahoe

#### To which countries have you traveled?

Italy, france, germany, spain, holand, belgium, australia, new zeland, canada, mexico, morocco

#### Describe one of your favorite vacations to another country:

Family trip to australia and new zeland

#### Describe things you like the most about your own country:

The great outdoors

**Describe a few of your strong sides:** dedicated, flexible

#### Describe a few of your weak sides:

Can be overly strong willed

### **Donor Essay**

#### Why do you want to be a donor?

It feels good to know I'm helping people.

# Describe your relationship with your family. How has your family shaped your values and who you are today?

I have a very strong relationship with the rest of my family, they have absoultly made me into the person I am today.

#### What makes you unique?

The persepective I've gained through travel in combination with an optomistic outlook on life.

#### What are you most proud of and why?

The fact that I have been able to make the best out of the opportinuties that my parents have been able to give me through their hard work and sacrifice.