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 2014.01.15  
 L\_jie

Messege to the Potential Couple

YD-661-GJ-Parker

|         |            |
|---------|------------|
| 所在国家    | 美国         |
| 籍贯      | 美国         |
| 出生或年龄   | 26岁        |
| 身高      | 5'7(英文单位i) |
| 体重      | 140LBS     |
| 血型      | A          |
| 当前受教育程度 | 本科         |
| 视力      | 正常         |
| 是否吸烟    | 否          |
| 健康状况    | 很好         |
| 是否捐过卵   | 否          |



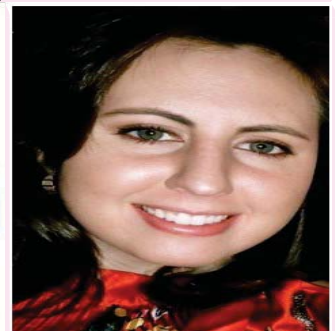
Donor Candidate

联系方式: 400-887-1005

档案制作时间: 2014年1月份



With Family Members



With Family Members

TODAY 14-1-17

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622 FORM  
DNAP Profile

DAP YUlane.org  
Donor Assessment Program



Profiles Presentation Lu Jie

Interview by GJ

DONOR Applicant Nick Name Parker

TODAY 14-1-17

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622 FORM  
DNAP Profile

DAP YUlane.org  
Donor Assessment Program



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Interview by GJ

DONOR Applicant Nick Name Parker

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|  |   |
|--|---|
| Name:  | Parker  |
| Middle Name:   |   |
| City:  | Charlotte   |
| State:   | North Carolina  |
| Donor Id:  | 270   |
| Ethnicity:   | Asian, Caucasian  |
| Maternal Heritage:   | Scottish, German  |
| Paternal Heritage:   | German, Filipino  |
| Date of Birth:   | 3/12/1988   |
| Marital Status:  | Single  |
| Blood Type:  | A -ve   |
| Have you ever been arrested?:                                      | No  |
| Comments:  | Parker is College Student with a major in Anthropology. She is athletic and played competitively for 15 years. Her goal is to earn her Master's Degree in Urban Planning and enjoy a career in Community Development. |
| Religious Affiliation:   | Catholic  |
| Exact Height:  | 5'7"  |
| Weight:  | 140   |
| Body Type:   | Medium  |
| Natural Hair Color:  | Brown   |
| Hair Texture:  | wavy  |
| Eye Color:   | Green   |
| Complexion:  | Fair  |
| High School GPA:   | 3.9   |
| SAT:   | 2000  |
| ACT:   |   |
| What was your college GPA?:  |   |
| What degrees do you hold?:   | Current College Student   |
| Please list any / all awards, honors or scholarships you have won: |   |
| Do you speak any other languages?:                                 | No  |
| What was your favorite subject in school and why?:                 | I enjoyed learning about history because it helped me to better understand current world relations.   |

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|   |   |
|---|---|
| Do you have any artistic abilities? Please list:.   | .   |
| Do you have any athletic abilities? Please list:.   | I played competitive basketball for 15 years and had offers to play in college..  |
| What was your college major?.   | Anthropology.   |
| If you have over a 3.8 GPA, went to (or are going to) an exceptional University, received academic scholarships, or have above a Bachelor's degree, please check this box:. | No.   |
| What is your current occupation?.   | Nanny.  |
| What were your previous occupations?.   | Afterschool teacher.  |
| Please describe your personality:.  | Courteous, honest, respectful, loving, forgiving, adventurous..   |
| Are you right or left handed?.  | Right.  |
| What is your favorite color?.   | Green.  |
| What is your favorite food?.  | Chips and salsa..   |
| Do you consider yourself introverted or extroverted?.   | Extroverted.  |
| Who do you live with?.  | I live by myself..  |
| Do you have a significant other? If so, tell us how you met:.   | No.   |
| What are your hobbies?.   | Volunteer, play basketball, travel..  |
| Describe your perfect day:.   | .   |
| Who is your hero and why?.  | My grandmother. She is encouraging and loving to everyone she meets..   |
| If Steven Spielberg were filming a movie about your life, what famous actress would play you and why?.  | .   |
| What would you say is your biggest accomplishment in your life thus far?.   | .   |
| What do you hope to accomplish in your life in years to come?.  | I plan on pursuing a master's degree in Urban Planning and hope to start my career in community development soon..  |
| If you could meet anyone in the world, who would it be and why?.  | .   |
| Tell us about your most favorite vacation:.   | Paris was the most amazing place I've ever been. I loved the open markets, cheese, wine, and chocolate shops. The people were very friendly and the city was gorgeous!. |

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|   |   |
|---|---|
| If you could travel anywhere, where would it be and why? .1 | I would travel to the Philippines and visit family that I have never met. .1  |
| What would you say is your biggest talent? .1               | .1  |
| Reason for becoming a donor. .1                             | I think people who are willing to go through this sort of process to become parents truly want children and I am a big believer in helping others in any way that I can. .1 |
| Anything we have not asked? .1                              | .1  |

Donor Information .1

BECOMING A DONOR.1

|  |  |
|--|--|
| How long have you been thinking about it? .1   | .1   |
| Being a donor is a big responsibility. It requires going to several doctor's appointments, taking injections and having a minor out-patient surgery. Our office, the doctor's office, and your intended parent (s) will count on you to be responsible throughout the entire cycle. So you feel prepared to commit to this process? .1 | Yes. .1  |
| How do your friends and family feel about your decision? .1  | I have always been a responsible, independent person and my friends and family support me in my choice. .1 |
| What would you like to say to the couple who chooses you to be their donor? .1   | I wish you the best with your future family and hope that this process will bring you joy. .1              |
| Would you be willing to take a donor compensation of \$5,000 to help a couple who has been affected by the recession? It may help get you matched more quickly the first time and if you choose to come back and donate again, you would be considered a 'Previous' donor and would be given a higher fee? .1                          | Yes. .1  |
| .1   | .1   |
| Gifted Journeys strongly believes all loving and able couples or individuals deserve the chance to be parents regardless of sexual preference, marital status, ethnicity or sex of the egg .1  | Yes. .1  |

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| recipient. Are you open to being matched with all types of families? If no, please explain:. |     |
| Are you willing to meet your intended parent(s)?.  | No. |
| Are you open to meeting the child in the future if that is requested?.                       | No. |
| Are you open to exchanging future contact information with your intended parent(s)?.         | No. |

**FAMILY LIFE**

|  |  |
|--|--|
| What were you like as a child?.                                  |  |
| What were you like as a teenager?.                               | I was very hardworking, ambitious. I wanted to be the best at everything.                                  |
| Where did you grow up?.  | A small town in NC.  |
| How would you describe your family life as you were growing up?. | My parents were very loving, we are still close with one another and always have something to laugh about. |
| Do you have any siblings? If so, tell us about each of them:.    |  |
| Do you have any children? If so, tell us about each of them:.    | No.  |

**Donor Information**

**FAMILY GENETIC HISTORY**

| Family Member.        | Height. | Eye Color. | Hair Color. | Education Level.  | Deceased. | Occupation. |
|-----------------------|---------|------------|-------------|-------------------|-----------|-------------|
| Father.               | 6'.     | Blue.      | Black.      | College Graduate. | No.       | NA.         |
| Mother.               | 5'8".   | Blue.      | Brown.      | College Graduate. | No.       | NA.         |
| Paternal Grandmother. | 5'1".   | Brown.     | Brown.      | High School.      | Yes.      | NA.         |
| Paternal Grandfather. | 5'5".   | Brown.     | Black.      | College Graduate. | Yes.      | NA.         |

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NICK NAME: Parker.

|                       |       |      |            |                         |     |    |
|-----------------------|-------|------|------------|-------------------------|-----|----|
| Maternal Grandmother: | 5'3"  | Blue | Brown      | Some College            | No  | NA |
| Maternal Grandfather: | 6'3"  | Blue | Blonde     | College Graduate        | Yes | NA |
| Sibling 1: Sister     | 5'8"  | Blue | Auburn/Red | Some College            | No  | NA |
| Sibling 2: Brother    | 5'11" | Blue | Brown      | Current College Student | No  | NA |
| Sibling 3: NA         | NA    | NA   | NA         | NA                      | NA  | NA |

PERSONAL HEALTH HISTORY:

|  |        |
|--|--------|
| Any past or current medical problems? If so, please list:                    | No     |
| Have you ever been pregnant? If so, how many times and what was the outcome? | No     |
| Have you ever been a donor before? If so, did a pregnancy occur?             | No     |
| What kind of birth control are you on?                                       |        |
| Do you drink alcohol? If so, how many drinks a week?                         | Yes, 1 |
| Are you currently taking medication?   | Yes/No |
| Do you smoke?  | Yes/No |
| Are you taking any recreational drugs?                                       | Yes/No |
| Are your cycles regular?   | Yes/No |

Donor Information

FAMILY MEDICAL HISTORY:

|  |
|--|
| Following Diseases has occurred in a family and explain: |
|  |

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| Disease:  | To Whom:  | Passed Away: | Age of onset/ Medication: | Age at the time of passing: |
|---|---|--------------|---------------------------|-----------------------------|
|   |   |              |                           |                             |
| Cancer:   | maternal grandfather, lung cancer, smoked for 50 y. | NA.          | NA.                       | 86.                         |
|   |   |              |                           |                             |
| Mental retardation:                             | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Autism / Aspergers:                             | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Physical malformations:                         | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Paralysis or crippling disorders:               | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Alcoholism:                                     | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Cystic fibrosis:                                | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Sickle cell anemia:                             | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Lupus:  | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Miscarriages, still births, or neonatal deaths: | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| High blood pressure, heart attacks or strokes:  | paternal grandmother, smoked for over 40 years.     | NA.          | NA.                       | 70.                         |
|   |   |              |                           |                             |
| Memory loss or dementia:                        | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |
| Osteoporosis:                                   | NA.   | NA.          | NA.                       | NA.                         |
|   |   |              |                           |                             |

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|  |          |      |      |      |
|--|----------|------|------|------|
| Arthritis: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Allergies: .1  | father.1 | NA.1 | NA.1 | .1   |
| .1   |          |      |      |      |
| Blood disease: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Diabetes (Specify Type I or Type 2): .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Thyroid issues: .1   | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Learning disabilities: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Seizures or epilepsy: .1   | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Depression: .1   | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Panic attacks: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Schizophrenia: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Bipolar: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| ADD or ADHD: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Age related causes: .1   | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Any history of kidney problems / diseases: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Reproductive Problems: i.e. Endometriosis, hysterectomies, late-term miscarriages, etc. .1 | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Vision/sight/eye Problems: .1  | NA.1     | NA.1 | NA.1 | NA.1 |
| .1   |          |      |      |      |
| Other (any medical issues we've not listed above please explain here): .1                  | .1       |      |      |      |

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