













Date of Birth

05/29/1996

Height (Feet)

5.75

Weight (lbs)

140.00

Hair Color

Brown

Eye Color

Brown

Ethnic Origin

Mexican

Maternal Heritage

Mexican

Paternal Heritage

Italian/Mexican

Blood Type

B Positive

Highest Level of Education

Bachelor's degree

University Name

University of Texas at Austin

Name of your Degree

International Relations and Political Economy

Do you have any artistic abilities?

Yes

List of abilities

Musicality

Do you have any athletic abilities?

Yes

List of athletic abilities?

Flexibility

What is your current occupation?

Manager of a Retail Store for a multi-billion dollar company

Please describe your personality

I am a social butterfly that needs isolation to recharge and recenter. I am very spiritually in tune with the universe, Mother Earth, and all its inhabitants. I am extremely sensitive to people's energies and I have learned that my ability to feel deeply and empathize with others is a superpower, not a weakness. I love fashion and music. I love to journal and workout and spend time in nature. I love to nurture myself and those I love.

Do you wear or have you worn eyeglasses?

Yes

Have you worn braces?

No

Why do you want to become a donor?

I would love to be able to help someone who really wants a child, but cannot have one on their own. I am not using my eggs currently, so if I can be of service and help a wonderful family out there, I'd love to!

Being a donor is a big responsibility. It requires going to several doctor's appointments, taking injections and having minor out-patient surgery. Do you feel prepared to commit to this process?

Yes

Are you open to being matched with all types of families regardless of sexual preference, marital status, ethnicity or sex of the egg recipient?

Yes

Please explain why

I would hope that whoever is looking for an egg donor and chooses me, would have the same level of openness and understanding.

If they request it, are you willing to meet your intended parents?

Yes

Are you open to meeting the child in the future if that is requested?

Yes

Are you open to exchanging future contact information with your intended Parents(s)?

Yes

Where did you grow up?

Queretaro, Mexico and Arlington, Texas

Do you have any siblings?

Yes

Tell us about them

I am the oldest of three. They are amazing human beings who now have children of their own. I'm so grateful to be an auntie to their babies. My sister, Mariana, is a 4th grade teacher and she has done an amazing job as a mother even through all the trials and tribulations life has thrown at her. My brother, Sebastian, is a wonderful father and he works as a welder while dabbling in music in his free time. I love them both very much and I am so grateful to be their big sister.

Do you have any children?

No

Personal Health History

Any past or current medical problems (including surgeries, accidents, birth defects, depression, etc.)?

No

Do you drink alcohol?

No

Have you ever been pregnant?

No

Have you ever been a donor before?

No

Are you currently taking any medication (for physical or mental health)?

Yes

What medications are you on and why?

I'm on some antibiotics due to some random hormonal acne flare up.

Are you taking any recreational drugs

No

Do you smoke?

No

Are your menstrual cycles regular?

No

Please explain why

They've been pretty regular since I got off birth control over 3 years ago, but in this past year of 2026, my periods have fluctuated a lot. I think maybe due to stress and syncing up with my girlfriends.

Family Medical History

Note: Medical history will be verified. Anything purposefully omitted may result in being dropped from the program.

The following members need to be in your list.

Father

Mother

Paternal Grandmother

Paternal Grandfather

Maternal Grandmother

Maternal Grandfather

Siblings

List family medical history

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Biological Family Member

Father

Sex

Male

Age

51

Height (Feet)

5.9

Eye Color

brown

Hair Color

brown

Education Level

high school

Deceased

No

Occupation

Bar manager

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Diseases & Medical Conditions

Cancer

No

Mental Retardation

No

Autism / Asperger's

No

Physical Malformation

No

Paralysis or crippling disorders

No

Alcohol or Drug Addiction

No

Cystic Fibrosis

No

Sickle Cell Anemia

No

Lupus

No

Miscarriages, still births, neonatal deaths

No

High blood pressure, heart attacks or strokes

No

Memory loss or dementia

No

Osteoporosis

No

Arthritis

No

Allergies

No

Blood diseases

No

Diabetes (Specifically Type 1 or Type 2)

No

Thyroid issues

No

Learning disabilities

No

Seizure or epilepsy

No

Depression

No

Panic attacks

No

Schizophrenia

No

Bipolar Disorder

No

ADD or ADHD

No

Age-related issues

No

Kidney problems / diseases

No

Reproductive problems: i.e. endometriosis, hysterectomies, late-term miscarriages, etc

No

Vision/Sight/Eye Problems

Yes

Please explain to whom, have they passed away (please include age), what was the age of onset/medication

Need reading glasses after age of 50