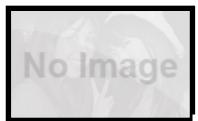
rohit GDFGDFG



Identifying Information

Full Name : rohit *****

Age : 1989-02-3 yrs.

Social Security Number : *****

Marital Status : Married

Contact Information & Basic Details

Address : *****

City : DFGDFG

State : NT

Zip code : 0

Country : CA

State : NT

Closest largest city : DFGDFG

Phone number : *****

Cell Number : *****

Email Address : *****

Length of employment : DFGDFG

Driving License Number : *****

Driving License State : *****

Preferred Method of Contact : *****

How many times have you been married : DFGDFG

How did you hear about Simple Surrogacy : magazine

Please name : DFGDFG

Ethnicity/Heritage

Current :

Current Employer :DFGDFGDF Position : DFGDF

Length of employment :DFGDFG Part Time/Full Time :parttime

Infertility History

How long have you been trying to conceive : DFGD

How many times have you become pregnant : DFGDFG

Have you been told by a doctor you have a fertility problem : yes

DFGDFGDFG

How many times have you attempted to conceive : DFGDFD

Have you had any reproductive organs removed : yes

DFGDFG

Medical History

Have you had any significant or life threatening illnesses : no

dfgd

Have you ever been treated for syphilis or gonorrhea : no

fgdf

Were you treated by a physician : no

Have you ever been refused as a blood donor : yes

dsfgsdfsdf

List names and addresses of all previous Primary Care Physicians :

Are you healthy now : yes

dfgdf

Is there any history of fertility problems in your family : yes

gdfg

Have you or any of your sexual partners had herpes, venereal warts, HIV, aids, syphilis and/or any other sexually transmitted disease yes

dfg

Have you been treated for this disease dfgdfgdfg

Psychological Information

Have you ever been, or are you now, under the care of a psychiatrist or : yes

counselor

fdgdfgdf

Name of counselor : dfgdfgdgdf

Phone of counselor : gdfgdfg

Have you had any psychiatrist hospitalization : yes

dfg

Diagnosis : dfgdfg

Are you currently using prescribed drugs for psychiatric reasons : yes

Name of dosage : gdfgdf

Name of dosage : dfgfdg

Name of dosage : dfgdfg

Criminal History

Date

fgdf

Charge

gdf

Disposition

gdfg

Personality

How would you describe your personality dfg

How do you handle disagreements with others dfgdf

Do you consider yourself humorous

Yes

Do you consider yourself and optimist or a pessimist

Yes

How do you think your life has turned out so far

fdgd

Is there anything about yourself that you would like to change : yes

Where do you see yourself 10 years from now fgdf

What are your current life goals gdfg

What are your future life goals dfgdfg

Do you think you will reach the goals you set yes

What are your hobies dfgd

Do you drink: yes

no

Do you smoke: yes

dfg

Do you use or have you ever used Illegal Drugs : yes dfgdfg

Are you trying to quit or will you quit before the baby is born : yes dfgdfg

Have you ever been in the military:

yes

Is your home located in reasonable distance from schools and parks and locations that children would enjoy ves

Do you plan on moving once you are a parent if you answered No ves

Are you religious : yes dfgdf

What are your family traditions for holidays and birthdays gdfgdfg

How does your family handle conflict or disagreements

What are your reasons for choosing surrogacy or egg donation dfg

How long have you wanted to do a surrogacy and when did you start looking for a surrogate mother or egg donor dfgdfg

Please list any concerns or hopes you have for or about your impending journey through surrogacy dfgdfgdf

Extended Family

Number of Siblings : dfgdfg

Number of Aunts and Uncles : dfgdfg

Are your parents living : yes

Do you have any children : yes

Gender

Age of children :

Childrens from previous relationship

Do you have legal and physical custody of

all the above children: yes

fdgdfgdfgfdg

Does your family know of your plans for surrogacy or egg donation : yes

Are they supportive

dfgdfgdfgdfg

yes

Surrogate Preferences

I am seeking a : Gestational

Would you consider an inexperienced surrogate : yes

Preferred Age Range :

Do you prefer a married surrogate : yes

Would you be willing to be matched with a single surrogate: yes

*Do you have preferences about Ethnicity and or Education: yes

Ethnicity/Heritage

zxczx Education hfghfgh

Are you looking for a surrogate who is a stay at home

Would you consider abortion in the event of fetal

mother

abnormalities

Diffinalities

Would you consider fetal reduction for higher order multiples

Please give Simple Surrogacy a detailed description of your ideal Surrogate Mother :

: yes

: yes

: yes

gfhfghfg

Surrogate Preferences [SECTION-2]

Do You Need an Egg Donor : no

Do you prefer an experienced Egg Donor : yes

Do you want a Proven Donor : yes

Ideal donor preferences

Race : Asian

Heritage : Russian

Height : 5 01

Weight : dfg lbs

Eye Color : Brown

Skin Color : Asian

Hair Color : Red

Hair Texture : Curly

Ethnicity/Heritage : Gestational

High School : High School

Vocational Degree : Vocational Degree

Attended College :

2 year College Grad

4 year college grad :

Advanced Degree :

Please give Simple Surrogacy a detailed description of your ideal Egg Donor

Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed description of your ideal Egg Donor: Please give Simple Surrogacy a detailed desc

Couple Information

If you are a couple, please answer the following questions together ves

How long have you been together/married dfgdf

How did you meet each other? dfqdf

How long have you wanted to do a surrogacy and when did you start looking for a surrogate mother or egg donor? fqdfqdf

What are your desires regarding being present during the birth of your child? fqdfqdf

Please describe your partner gdfgd dfg dfgdf

Describe their personality, what you like about them the most, what you might not like about them, if anything dfq dfqdf

If your doctor recommended an amniocentesis, how would you feel about this and would you want to have one performed? df gdf

What are your views regarding abortion in the event that a baby is conceived and then is determined by a physician to have birth defects? gdfgdfg d

How many attempts do you plan to try in order to conceive a child? dfq dd

How many children would you welcome if a multiple pregnancy occurred? Twins

How do you envision your role during the pregnancy of your surrogate?

Do you see yourself heavily involved in the pregnancy? adfadfq

Do you plan to document your Surrogacy experience with Photos and/or Video from the time you meet your Surrogate? dfgdf

What amount of contact do you want with the surrogate or egg donor once your child arrives? gdfqdf

What information do you plan on giving the child about the surrogacy once the child is older? What age do you plan on giving the child this information?

dfgdfg

If your surrogate completes a successful surrogacy for you, and you become a parent, do you think you will want a sibling for your child? dfgdfgdfgdf

Would you be likely to want to use the same surrogate? dfgdf

What are your plans for childcare after the child is born? gdfg

If the transfer or inseminations failed, how soon would you want to try again? dfqdf

What do you plan to tell your child about his or her conception? gdfgdfg

Are you open to sharing pictures of your baby with your surrogate?

Please list any concerns you have about your impending journey through surrogacy fgdfg

Please let us know of anything Simple Surrogacy can do to make your journey more pleasant and stress free

- Dashboard
- Pages

CMS executed by Konstant Lab

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