DONOR MEDICAL AND SOCIAL HISTORY FORM

DONOR ID #: 7391

Thank you for your interest in becoming a sperm donor. The following three-part questionnaire has been developed to help us and potential recipients gain insight into your personal and family medical and social history.

PART I - DONOR GENERAL AND PSYCHOSOCIAL DESCRIPTION

These are questions about your general description, occupation, education, and personal characteristics.

PART II - DONOR'S FAMILY SOCIAL INFORMATION

This refers to your parents, siblings, and maternal/paternal grandparents. Please complete to the best of your knowledge. You may want to consult with these family members to complete the questions/statements that are unknown to you.

PART III - DONOR'S PERSONAL MEDICAL HISTORY

This refers to you, your immediate family, aunts, uncles and cousins and grandparents. Once again, you may need to consult with these other family members to answer questions that are unknown to you.

PART IV - DONOR AND FAMILY MEDICAL HISTORY

This page is a legal document, in which you verify that, to the best of your knowledge, your responses to the questions accurately reflect the past and current state of your personal and family health. It will be detached from the rest of the questionnaire and will remain confidential.

Please sign and date the statement on page 12.

INSTRUCTIONS FOR COMPLETING THIS FORM:

- 1. DO NOT USE PENCIL: USE BLUE OR BLACK INK
- 2. FORMS IN PENCIL WILL NOT BE ACCEPTED!
- Please answer all questions to the best of your ability by checking the appropriate boxes, circling the appropriate answer or providing written responses in the spaces provided.
- 4. Do not put your name anywhere on this form, except your signature on page 12.
- Do not list the city as place of birth for you or family members. List state only (or country if not US born).

PART 1A – DONOR GENERAL AND PSYCHO-SOCIAL DESCRIPTION
1. Current Age: 27 2. Today's Date: 05/8/11 3. Place of Birth (State or Country only): California
4. Mo./Yr of Birth: 4 5. Height: 6 ft 6. Weight: 182 pds 7. Eye Color: Bown 8. Hair Color: Brown
9. Hair (circle that apply): Balding Thin Average Thick Curly Wavy Straight 10. Freckles: None Few Numerous
11. Skin Color; Fair Medium Dark Olive Light Brn Reddish Brn Med. Brn Dark Brn
12. Are you: Left Handed Right Handed Ambidextrous
13. Are you a twin? Yes No Are there twins in your family? Yes No If yes are they: Identical Fraternal
14. Family Background: Race: Caucasian Kalack Asian Latin Middle Eastern Cother
15. Mother's Ethnicity: 1. Ewopea / Tright. Native America 3. (CHerokee + CHOCTAN) 4.
16. Father's Ethnicity: 1. European/Normanive Americas: Black generating
17. Circle any group from which you descend: African Mediterranean Middle Eastern French/Canadian Jewish Irish American Cajun
If Jewish, please circle one of the following: Asian Ashkenzai Sephardic
PART 1B - EDUCATION AND CAREER
1. Occupation: Tosique / project manager 2nd Occupation: Artist
2. What was your high school GPA? 2.7 3. Are you currently in college? Yes No
College/University GPA: 2.7 Degree: Media Arts & Animation Major: Bachelors of Science
Post Graduate GPA: Degree: Major:
4. What are your career goals? To work my own Destan Firm
PART 1C - PERSONAL CHARACTERISTICS
1. Math Skill Ability: Not my strong suit, but completed College math requirements 2. Mechanical Ability: I'm usually pretty good with my hards
2. Mechanical Ability: I'm usually pretty good with my hards
3. Athletic Ability: I'm govel at tenn's, but don't really care for other sports
4. Musical Ability: I don't consider mysief musical, but come from many musicians
5. Foreign Language Ability: I only speak English
6. Artistic Ability: experimend
7. Special hobbies, talents and interests: At & Archectral History as well as Design 8. Favorite Sport: Ternis 9. Favorite Food: Specifical food:
10. Favorite Color: Blue 11. Favorite Pet: Childhood Dog named Harry
12. Favorite Movie: Pay IT Forward 13. Favorite Book or Author: F. Scott Fitzgerald
14. Favorite Music and/or Group(s): Comby, Blue Grass, most Popular nuisiz
y or officer formation
14. Favorite Music and/or Group(s): Comby, Blue Grass, most Popular music 15. Where would you like to travel and why? I have not traveled very much but hope to closo soon

Interviewer Comments:

Donor ID# PART 1C - PERSONAL CHARACTERISTICS Cont'd Analytical, Introspective 1. How would you describe your personality? 2. Do you consider yourself to be more: Analytical/Rational or Intuitive/Feeling 5. why do you want to be a donor? I'm interested in help: In people creeke families that otherwise would not be able to do so. I'm also planning on starting my own business in the near fature and would like to supliment by 3. Why do you want to be a donor? income during this transition 4. Who do you most admire and why? I must admice my grandmother, if not for her I would not have turned out to be the man that I am. She was an that always thought outside the box PART 2 - DONOR'S FAMILY INFORMATION (Please Circle choices and/or complete) 1. Do you have any children? (No If Yes, please complete the following below: Age:__ Health Problems Health Problems: Age: Health Problems: 2. Have you been responsible for any other pregnancies? Y (N) If yes, what year(s) did they occur? Yr of Birth: 64 3. DONORS FATHER Place of Birth: California Hair Color: Brown Describe Hair: Balding Thin Average Thick Curly Wavy Straight Height: Complexion: Fair Medium Olive Light/Brown Medium/Brown Dark/Brown Freckles: (No Bone Structure: Small (Medium Vision: Excellent Good Poor Large Very Large ontractor Special skills or characteristics: Skilled List any past or present significant health problems: none Is he more (circle one in each column): Optimistic/Pessimistic Assertive/Passive Leader/Follower Easy Going/Controlling Eye Color: Yr of Birth: 65 Place of Birth: palifornia 4. DONOR'S MOTHER Describe Hair: Balding Thin Straight Average Thick Height: 5/3 Olive Complexion: Fair Medium Light/Brown Medium/Brown Dark/Brown Freckles: (Yes Bone Structure: Small Medium Vision: Excellent Good Fair Large Very Large Poor Occupation: Nurse Education: Trade School Special skills or characteristics: List any past or present significant health problems: 20ne Is she more (circle one in each column): Optimistic/Pessimistic | Assertive/Passive Leader/Follower Easy Going/Controlling

Interviewer Comments: ___

5.DON								[Donor I	ID#
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Describ	e Hair: Balding	Thin Avera	ge Thic	k Curl	y Wavy	Straight	Heigh	t 5/10"	and streets	Weight: 140 ds
Comple	exion: Fair	Medium	Olive	Light/Bi	rowh N	/ledium/Brown	Da	ark/Brown	Freckle	es: Yes No
Bone S	tructure: Sma	II Medium	Large	· Very	Large	Vision: E	Exceller	nt Good	I F	air Poor
Occupa	ation: teach	AS				Education:	bac	holers	of,	Arts
Special	skills or characte	eristics: O	must							
List any	past or present s	significant heal	th proble		whe	TO MAN IN COMMISSION OF THE CO		**************************************		
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Describ	e Hair: Balding	Thin Avera	ge Thic	Curl	y Wavy	Straight	Heigh	t: 5/8/	- Chambridge	Weight: 130 pds
Comple	exion: (Fair)	Medium	Olive	Light/Br	rown M	Medium/Brown	Da	ark/Brown	Freckle	es: Yes No
Bone S	tructure: Sma	II Medium	Large	Very	Large	Vision: E	Excellen	it Good		Fair Poor
Occupa	ation: stude	nt	***************************************	75, 955,56,584, 155,7 - 55,7 - 55,7 - 5, 200, 20		Education:	Hi	on Sch	wool	
Special	skills or characte	ristics:	athi	letic		kanna amana ara-ara-ara-ara-ara-ara-ara-ara-ara-ar		1		
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PGM	oklahoma	63	Brown	Prom	G)F F	NA		N/A		High Blood pres
PGF	California	63	brown	Brown	⑥ F F	N/A	-	N/A		
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PART	3 – DONORS	PERSONA	AL MED	ICAL F	ISTOR'	′ (Please ci	ircle c	hoice)		
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			: th	the follow	wing?	No	□ \(\)	yes (ci	rcle all ti	nat apply):
1. What	ou have any curre	nt problems w	ith any of							
1. What	ou have any curre	nt problems w Throat Brea	•	ngs He	art Stor	mach Intestii	nes K	Kidney Bla	dder I	Nervous System

Pacific Reproductive Services

444 DeHaro Street, Suite 222 San Francisco. CA 94107 Tel: (415) 487-2288 65 N. Madison Ave. Suite 610 Pasadena, CA 91101 Tel: (626) 432-1681

Email: info@pacrepro.com

ADDITIONAL SIBI		or our car very constitution of the department		Donor	ID #:	1011
DONOR'S SIBLING	Half- Sibling Yr of Birth	1999	Eye Color:	AZEL 1	Hair Color: SAN	ny Blonac
Describe Hair: Baiding	Thin Average Thick	Curly Wavy	Straight H	eight: 5'5"	Weig	ht: 100
Complexion: Fair	Medium (Olive) Li	ght/Brown	Medium/Brown	Dark/Brown !	reckles:	Yes (No)
Bone Structure: (Sm	ail Medium Large	Very Large	Vision: Exc	allent Good	Fair	Poor
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ls (s)he more (circle one	in each column). Optimistic	c/Pessimistic	Assertive/Passive	Leader/Follow	er Eas	y Going/Controllin
Interviewer Comment	-					

4. Have you ever had surgery for (including but not limited to un-descended testicle(s), hernia, pelvic, bladder or abdominal)
□Yes □No If yes please provide the following information:
Year Hospital Type of Problem/Surgery
5. Do you have any allergies to drugs, food, or environment, such as hay fever?
6. Are you taking any non-prescription medications, including vitamins? No Yes Please list any you are currently taking and for how long.
7. Are you taking any prescription medications? No ☐Yes Please list any you are currently taking and for how long.
8. Do you use any performance enhancing drugs, including steroids? Yes No If so, please list:
9. Do you wear glasses?
10. Are you: ☑ Nearsighted or ☐ Farsighted Your vision is: 20/ ☑ Unsure
11. Do you have any hearing problems? Yes X No If yes, please explain:
12. What is the condition of your teeth? Excellent Good Fair Poor How is your diet? Good Fair Poor Vegetarian
13. Do you exercise: 4 or more times per week 1-3 times per week Never/almost never
14. Describe your exercise routine: 1-15 WS weights/cardio in mornings before we
15. Have you ever had a serious or prolonged illness? 🔲 Yes 💹 No If yes, please explain:
15. Have you ever had a serious or prolonged illness? Yes No If yes, please explain: 16. Do you take hot baths, hot tubs, saunas or steam baths? Daily Weekly Infrequently
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	Medical Problem	F 44.63			SI	bling		Grand	parents		ONOr Aunts	/Uncles	Cou	usins	
В	Skin Problems	You	М	F	М	F	Maternal	Maternal	Paternal	Paternal	A	U	М	F	None
							GM	GF	GM	GF					Known
1	Adult Acne (not teen pimples)		ļ	ļ	ļ							\times			
2	Eczema	************										19 1/11 (\geq
3	Psoriasis		The state of the s									***************************************			><
4	Skin Cancer (Melanoma)			State of the state											\times
5	Skin Cancer (Basal Cell Carcinoma)								The state of the s						X
6	Other Skin disorders						***************************************								\times
	Medical Problem				Si	bling		Grand	parents		Aunts	/Uncles	Cou	ısins	
C	Sight/Sound/Smell	You	М	F	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	Α	U	M	F	None
1	Deafness before age 60			- CANADAR TO S			1 38 C T 1 1 6 6 6 6				and the state of t	and the second second			Known
2	Significant hearing loss												******************	AND	
3	Deformity of the ear		and the same of th	-									*****************		
4	Strabismus	***************************************		-			A THE PROPERTY OF THE PARTY OF				ļ				
5	Cataracts before age 60			-											
6	Macular Degeneration	***************************************													
7	Blindness			TANK I PROPERTY OF			,								
8	Color Blindness														
9	Glaucoma	***************************************									ļ		****************		
10	Anosmia (Lack of Smell)			<u> </u>						***************************************	-			ļ	
11	Other sight/sound/smell disorders	Mathematical and an appropriate				9							THE THE TAX STATE OF STATE OF		
	Medical Problem				Sil	oling		Grand) Darents		Aunts	Uncles	Cou	ısins	
D	Mental or Neurological	You	М	F	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	A	U	М	F	None Known
1	Migraines											-			\times
2	Senility before 50														\times
3	Alzheimer's diseases (age of onset)									ANNAMATA OR PROPERTY ANNAMANA OF CHEM					X
4	Parkinson's	***************************************					***************************************								><
5	Multiple sclerosis	2.701 M EM Matalanas					i delinke par - joi com Manineter e - r		***************************************	*************************					\times
6	Cerebral palsy	************							***************************************					PTRAFFE CRICTRINAL ACT	\Rightarrow
7	Autism/Mental Retardation									a (M/ U and announce - peace.			***************************************		><
8	Epilepsy or seizure				`	***************************************					X	***************************************	***************************************		
9	Stroke	a più illust più activa i tale activa i ta								Andrew Manager on the 1925 of the conference of			d for all the control of the control		><
10	Progressive Muscular Disorders		1400,01100,01							PROPERTY OF THE RESERVE OF THE PROPERTY OF THE					X
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Interviewer Comments:	
MATERNAL AUNT - SET WEES	related to lupus



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D	Mental or Neurological Cont'd	You	M	F	М	F	Maternal GM	Maternal GF	Paternal , GM	Paternal GF	Α	U	M	F	None Known
11	Learning Difficulties/ Special Ed/Speech Delay	and a second													\times
12	Sleep Disorders					***************************************									\times
13	Attention Deficit Hyperactivity Disorder (ADHD)		Man in m or castle before a												X
14	Hydrocephalus (Fluid on the brain)											The state of the s			\geq
15	Disorder of the spinal cord												,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\times
16	Huntington's disease														><
17	Degenerative Nerve Disorders													decades and selection and any	X
18	Neurofibromatosis														\times
19	Neural tube defect														\times
20	Other diseases of the nervous system														\times
	Medical Problem				· SI	oling		-	parents		Aunts	/Uncles	Cou	ısins	
E,	Heart Problems or Circulatory	You	М	F	М	F	Maternal GM	Maternal GF	Palemal GM	Paternal GF	Α	Ü.	M	F	None Known
1	Heart defects at birth	,													
2	Heart disease								And the second second second						\times
3	Heart attack (age of onset)						×6	4							
4	High Cholesterol														>
5	High Blood Pressure								$> \langle$	3					
6	Cardiomyopathy								**************************************						><
7	Sudden Death														\geq
	Medical Problem				SI	bling	ALCOHOLOGY CONSTRUCTOR	والمتعالم	parents	1	Aunts	/Uncles	7.25	isins 1	
F	Blood Problems	You	М	F	М	F	Maternal GM	Malemal GF	Paternal GM	Paternal GF	A	U	M	F	None Known
1	Anemia														>>
2	Sickle-Cell anemia														\times
3	Hemophilia or other bleeding problems														X
4	Polycythemia														\times
5	Blood Clots						>69								
6	Other blood disorder														\geq
134	Medical Problem				ζŞI	bling		2.000	parents	1	1000	Uncles T		isins	
G	Respiratory (Lungs)	You	М	F	М	F	Maternal GM	Maternal GF	- Paternal GM	Paternal GF	A	U	М	F	None Known
1	Hay Fever													$ \overline{} $	
2	Asthma									<u></u>					

Interviewer Comments: MCM - HONEY ATTACK/PRIESO CLOT DECEMBED POECG WATERMAI UNCLET COUSIN - INHTHERS NO MEDED. MID NOTHING VOOR report PAM high blood pressure controlled a medication

	Medical Problem				5 011	oling		Grand	parents,		ONOr Aunts/	Uncles	Col	isins	
	15 (15)				CHILLES.		Maternal	Maternal	Paternal	Paternal		1	77.00	11271	None
G	Respiratory (Lungs) Cont'd	You,	M	⊮F	M	F	GM	GF	GM	GF	A	U	М	F	Known
3	Tuberculosis														\leq
4	Lung cancer														> <
5.	Emphysema or Chronic Lung Disease														\times
6	Other lung disease														><
	Medical Problem				SI	oling	90000	Grand	parents		Aunts	/Uncles	Cou	ısins	
H	Metabolic, Endocrine, or Autoimmune	Yoù	M	E	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	A	Ů.,	М	F	None Known
1	Type I Diabetes (Insulin Dependent, Juvenile Onset)							and a perfect of the stage, as yet (signiful)		OLIO PRESI SANCES ANTIGORIA SE SE					X
2	Type II Diabetes (Adult Onset)														X
2	Thyroid cancer														\geq
3	Thyroid disease									, a () () ()					\times
4	Goiter						A STATE OF THE PARTY OF THE PAR								><
5	Adrenal dysfunction or disorder														X
6	Other														\geq
	Medical Problem				SI	bling		Grand	parents		Aunts	/Uncles	Cou	snisu	
1	Gastro-intestinal Problems	You	M	F	М	F.	Maternal GM	Maternal GF	Paternal GM	Paternal GF	A	U.	M	F	None Known
1	Ulcer or stomach or duodenum	L. LIAN LIAN LIAN	of the state of th	X											_
2	Gallstones														\geq
3	Other liver disease														\geq
4	Colon cancer														\geq
5	Intestinal cancer														><
6	Ulcerative colitis														\geq
7	Crohn's disease														><
8	Any other disease/problem of digestive system														$ \times $
	Medical Problem				Si	bling		Grand	parents		Aunts	/Uncles	Col	usins	
J	Urinary Problems	You	М	F	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	Α	Ü	М	F	None Known
1	Kidney disease										Titte Bank St. Value	-			\geq
2	Bladder Cancer									ļ					\angle
3	Kidney Cancer														\geq
4	Other disease of the Urinary tract (urethra, bladder, ureter)														X
5	Other, including born with one kidney or kidney failure														\times

Interviewer Comments:

F. Apreys TURKED VICER, LOVAR Ollen BY THE ARY CHANGES.

9M- Draw reports Fatner made changes to reduce acidic food

A

	Modical Drobles	in the M		W. F.	en.	oling	40.0	Grandi	parents		Onor Aunts/	Úncles	Cou	SAME SAME	
	Medical Problem		108.		54 5 (a)	NEW PLAN	Maternal	Maternal	Paternal	Paternal			570-16000		None
K	Problems of the Genital or Reproductive System	You	M	F	М	F	GM	GF	GM	GF	A	U	М		Known
1	Abnormally placed urethra (Hypospadius)								AAA AAA AAA AAA AAA AA AA	(to many 111111111111111111111111111111111111				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\times
2	Premature Menopause or Ovarian Failure														X
3	Fragile X Syndrome														\times
	Multiple Miscarriages														\geq
3	Uterine fibroids								******************************					48-44	$\langle \rangle$
4	Ovarian cysts			ļ			140 http://www.com/								
5	Cancer of cervix, ovaries or uterus														
6	Ambiguous genitals (hermaphrodite)						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								\geq
7	Other		- Innue			L-sarre-years					SD AND SOCIETY	23045524Z	1880/4024	31474007	
	Medical Problem				SI	bling		والمراوعة والمراوع المراوع	parents	1-2		Uncles		sins	<u> </u>
M	Cancers	You	М	F	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	Α	U.	М	F.,	None Known
1	Early onset cancer (before age 50)						a station where the state of an annual to								\times
2	Breast cancer														\geq
3	Ovarian Cancer										ļ	,			\geq
4	Colon Cancer										ļ				\geq
5	Lung Cancer			-							ļ	.,			$\langle \rangle$
6	Brain Cancer				ļ										$\langle \rangle$
7	Prostate Cancer														
8	Pancreatic Cancer			-	<u> </u>										
9	Leukemia	-			ļ						ļ				
10	Lymphoma			ļ											\sim
11	Any family member with more than one type of cancer		***************************************												X
12	Olher cancer (Describe)											The state of the s		The state of the s	X
	Medical Problem	121			SI	bling i			parents	du ja	ATT	/Uncles	125-125-2	isins	
Ĺ	Mental Health Problems	You	М	F	М	F	Maternal GM	Maternal GF	Paternal GM	Paternal GF	A	יטי	M	F.	None Known
1	Schizophrenia	100000		1000	2365KD))	7,97,336.1									$ \times $
2	Manic-depressive illness (Bi-Polar)														X
3	Other mental health disorder requiring hospitalization	:						A SACRATE OF THE SACR							X
4	Severe depression with period of inability to function														X

Interviewer Comments:	

		rimana	Michigan serve		******		4 100- 44-0-				Donor	'ID#_	1//	nació e unacionado con	
1	Medical Problem			1	Si	bling		Grandp	arents		Aunts/	Uncles	Cou	isins	
N	Problems of the Muscle, Bones, or Joints	You	М	F	М	:F	Maternal GM	Materna GF	Palerna GM	Paterna GF	A	U	M	F	None Known
1	Muscular dystrophy														><
2	Degenerative Muscle Disorders												AMERICAN AND AND AND AND AND AND AND AND AND A		\times
3	Lupus										\times				
4	Scoliosis														\times
5	Spina bifida														$\overline{\mathbf{X}}$
6	Osteoporosis									***************************************					$\langle \times \rangle$
7	Arthritis (rheumatoid osteo, unknown type)									and dispersed them, sales the second			**************************************	~	X
8	Gout														\times
9	Other muscoskeletal disease														\searrow
10	Other chronic muscle disease						and the property was as son, or the weekeld distri								X
	Medical Problem				SI	bling	Delle seed	Grandp	arents		/Aunts/	Uncles	Cou	isins	W.
0	Other Disorders	You	М	F	М	F	Maternal GM	Malerna GF	Paterns GM	Paterna GF	Α	י ט	М	F	None Known
1	Alcoholism	Z42251	2.2820,040	100000	Sures:	CANALISE COL		120204017488883	AZELDINASI PLAS		alchicor white	in in his	24/2022-1222	ata - Lambatan	
2	Drug abuse, misuse, or addiction							21 et a. 4 12 12 12 12 12 14 14 14 14 14 14 14 14 14 14 14 14 14		1820 (** *********************************			MINISTER STATE OF THE STATE OF		X
3	Tay-Sachs														\times
4	Canavan Disease														\times
5	Cystic Fibrosis														> <
6	Gaucher's disease														\geq
7	Familial Dysautonomia														\times
8	Bloom syndrome														\times
9	Fanconi anemia group C														\geq
10	Glycogen storage disease type 1a														\times
11	Maple syrup urine disease	*************						*****************	***************************************	1 h.dom - 1000 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2					\times
12	Mucolipidosis type IV														\times
13	Niemann-Pick disease														\times
14	Huntington's chorea														\gg
15	Marfan's disease					***************************************	altra sa mangginis deletification de comme met a		######################################	% Exercises of a decrease contract					\nearrow
16	Gulliam-Barre					and a local desired and			E / pd - a con- y street to the late of the late of						\times
17	Wilson's disease														\times
18	Adverse Reaction to Medications						and the second of the second of								\times
19	Diagnosis of any known genetic syndrome	:								d distances of the state of the					\geq
20	Missing teeth (from birth)													Į	\sim
21	Any other condition not previously mentioned													1	\times

Interviewer Comments:

MATERIAL AUNT - LUPUS. THENESSO IA Y.O. NOW IN LATE GOS

NO OTHER AUTO IMMUNE DISOPPERS IN FAMILY.