COVID - 19 VACCINATION CARD

Please keep this record card, which includes medical information about the vaccines you have received.

54-378-1990

Control No. _____

Name: Maria Aurora Teresita Taladro Sex: F

Address: VSU Visca Baybay City

Date of Birth: 05-18-62 Contact No. 0917 717 4514

Place Administered: Pangasugan

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	5/17/21	ASTRAZENECA		AD V7279
	Vaccinator Name: MILDRED G. ABADIEZ		Signature:	
Schedule of 2nd Dose:	APTER 8 WKS			
2nd Dose	7-26-21	AstraZeneca	L210072	
	Vaccinator Name: MILDRED G. ABADIEZ, RM, BCHS Lic. No. 0120718		Signature:	

Our City, Our Home, Our Future