COVID - 19 VACCINATION CARD

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

Control No. 78-090USDA-008

Name: Chinelo M. Cardaño Sex: F

Address: Brgy. Guadalupe Baybay City

Date of Birth: 12-10-94 Contact No. 09359797124

Place Administered: Gaas Gym

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	9-1-21	SINOVAC		J202108082
	Vaccinator Name: HERCULES C. BALTAZAR, RN Lic. No. 0827579		Signature:	
Schedule of 2nd Dose:		After 4 weeks		
2nd Dose	10-6-21	sinovac		J202108095
	Vaccinator Name: Erlina F. Bulacan, RM-BCHS License No. 0078172		Signature:	

Our City, Our Home, Our Future

120/80mmHg

26

3:12

BO- 100/70

1:34