
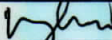


COVID - 19 VACCINATION CARD

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



Name: Michelle A. Borleo Control No. SD-0017JDA-010
Sex: F
Address: VSO Lower Campus, Baybay City, Leyte
Date of Birth: Jan. 6, 1986 Contact No. 09364155627
Place Administered: Baybay City

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	9-17-21	Sinovac		J2010805
	Vaccinator Name: Jaica Joy R. Bacalso RM, BSM Lic. No. 0177213		Signature:	
Schedule of 2nd Dose: After 4 wks.				
2nd Dose	10-15-21	Sinovac		J202108093
	Vaccinator Name: MA. VISSIA G. CANO, RM, BCHS		Signature:	

Our City, Our Home, Our Future