

COVID - 19 VACCINATION CARD

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



Control No. 57-16797117

Name: CARMELA A. YAMADA Sex: F

Address: PLARIDEL BAYBAY

Date of Birth: 11-26-1961 Contact No. 09161432586

Place Administered: BAYBAY GYM

Vaccine	Date	Product Name	Batch No.	Lot No.
1 st Dose	12.01.21	MODERNA		086J21A
	Vaccinator Name: Dairyl T. Astorga, RN Lic. No. 0369135		Signature: 	
Schedule of 2 nd Dose: AFTER 4 WKS				
2 nd Dose	12-12	MODERNA		029121A
	Vaccinator Name: RHEA JANE C. CIABU, RN Lic. No. 0137369		Signature: 	

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