

# COVID - 19 VACCINATION CARD

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



Name: Letty Jean C. Lor Control No. 54-703-4025 Sex: Female

Address: Brgy. Pangarigan Baybay, Leyte

Date of Birth: 9-20-1992 Contact No. 09173056757

Place Administered: CHO - Baybay

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	8-13-21	ASTRAZENECA		A1025
	Vaccinator Name: <u>SWEET ANGELY B. SANCHEZ, RN</u> NURSE, II Lic. No. 0827549		Signature:	
Schedule of 2nd Dose: <u>After 6-12 weeks.</u>				
2nd Dose	10-28-21	ASTRAZENECA		A1039
	Vaccinator Name: <u>RHEA D. ROA, RM, BSM</u> Lic. No. 0168616		Signature:	

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