COVID - 19 VACCINATION CARD

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

20-199

Control No. -146

Name: Ma. Nena Ramos Sex: F

Address: Brgy. Guadalupe Baybay Leyte

Date of Birth: 07-07-1964 Contact No. 09267727077

Place Administered: Baybay Gym

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	9.22.21	Sinovac		C202105170
	Vaccinator Name:	HERCULES C. BALTAZAR, RN Lic. No. 0827579	Signature:	
Schedule of 2nd Dose:	after 4 wks			
2nd Dose	10-28-21	sinovac		C202109170
	Vaccinator Name:	MA. VISSIA G. CANO, RM, BCHS Lic. No. 0034758	Signature:	

Our City, Our Home, Our Future