

COVID - 19 VACCINATION CARD

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



Name: Jhone Ronelle G. Maaghop Control No. 38-240-1013
Sex: M
Address: Brgy. Kilim Baybay City, Leyte
Date of Birth: 5/23/95 Contact No. 09265265714
Place Administered: Baybay Gym

Vaccine	Date	Product Name	Batch No.	Lot No.
1500518K 1st Dose	2/2/22	MODERNA ROXANNE MAIA F. CORPUZ, RN PRC Lic. No. 0838277	029K21A	
Schedule of 2nd Dose:				
2nd Dose				
Vaccinator Name:			Signature:	

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