COVID - 19 VACCINATION CARD

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

Control No. 68-69-277

Name: Dalilay F. Andres Sex: F

Address: Zone 12 Baybay city Leyte

Date of Birth: Oct. 24, 1968 Contact No. 09172341498

Place Administered: Baybay Gym

Vaccine	Date	Product Name	Batch No.	Lot No.
Booster Shot	1-12-22	Moderna		029K21A
	Vaccinator Name: MILDRED G. ABADIEZ, RM, BCH Lic. No. 0120718		Signature:	

Our City, Our Home, Our Future