COVID - 19 VACCINATION CARD

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

EMC 23

Control No. 54-1025-

Name: VALERIE C. VALENZONA Sex: F

Address: BRGY. PANGASUGAN BAYBAY, LEYTE

Date of Birth: AUG. 05, 1994 Contact No. 09504441319

Place Administered: BAYBAY GYM

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	10/25/21	PFIZER		3106008D
	Vaccinator Name: VILMA A. OMPOY, RM, BSM Lic. No. 0106272		Signature:	
Schedule of 2nd Dose: After 3 weeks				
2nd Dose	11/18/21	PFIZER		FL5324
	Vaccinator Name: FLORITA M. BARIT, RM, MPM LIC. No. 0055400		Signature:	

Our City, Our Home, Our Future