COVID - 19 VACCINATION CARD

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

Control No. 54-0519-FIB09

Name: MANUEL E. CASANOCAPAN Sex: M

Address: VCU, BAYBAY CITY, LEYTE

Date of Birth: 3/26/61 Contact No. 09368419241

Place Administered: PANGASUGAN GYM

Vaccine	Date	Product Name	Batch No.	Lot No.
1st Dose	5/19/21	ASTRAZENECA		ABV7779
	Vaccinator Name: MICHAEL G. AMADIEZ		Signature:	
Schedule of 2nd Dose:		AFTER 6 WKS		
2nd Dose	7/28/21	Astrazeneca		ZINT2
	Vaccinator Name: IMELDA F. ELMUNDO, RM, BCHS		Signature:	

Our City, Our Home, Our Future