

COVID - 19 VACCINATION CARD

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



Name: Danilo V. Sento		Control No. 93-36-2248	
Address: San Agustin Baybay City		Sex: Male	
Date of Birth: 9/11/1968		Contact No.	
Place Administered: Baybay Bayn			
Vaccine	Date	Product Name	Batch No. Lot No.
1st Dose	9/22/21	SINOVAC	C202108170
Vaccinator Name: HERCULES C. BALTAZAR, RN		Signature: [Signature]	
Schedule of 2nd Dose: after 4 wks			
2nd Dose	10/12/21	SINOVAC	C202108161
Vaccinator Name: MILDRED G. ABADIEZ, RN, BCHS		Signature: [Signature]	

Our City, Our Home, Our Future

Bm 11/10/80

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