

COVID - 19 VACCINATION CARD
Please keep this record card, which includes medical information about the vaccines you have received.

Name: FRANCES LOUISE B. DAUHO Control No. 74-28-1163
Sex: F

Address: ZONE 18, BANGAY CITY

Date of Birth: 10/16/1998 Contact No. 09235240629

Place Administered: BANGAY CAN

Vaccine	Date	Product Name	Batch No.	Lot No.
1 st Dose	<u>9-3-2021</u>	<u>SINOVAC</u>		<u>J202108082</u>
Vaccinator Name: <u>LOUTILA L. HOTUMPA, RM, BSM</u> Signature: <u>[Signature]</u>				
Lic. No. <u>0171324</u>				
Schedule of 2 nd Dose: <u>After 4 weeks</u>				
2 nd Dose	<u>10-6-21</u>	<u>SINOVAC</u>		<u>1202108082</u>
Vaccinator Name: <u>[Signature]</u> Signature: <u>[Signature]</u>				
License No. <u>0079127</u>				

Our City, Our Home, Our Future

13/9/20
22
3:47

130/80
22
12:20