

Review your information

Vaccination Document

Personal Health Number
9708931787

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Vaccination Information

Date of first dose entered
2021-12-21

Vaccine product name
Pfizer

Lot #	Dose #
SDCN3	3

Injection Site	Country
Arm - Left	France

Province/State
43

Comments

Personal Information

Legal first name

CELINE

Middle name

Legal last name

MAISONNEUVE

Date of birth

1988-10-10

Sex

Female

Email address

celine.maisonn@gmail.com

Primary phone number

6047295192

Street address

1255 Pendrell Street, #202

City

Vancouver

Province

BC

Postal code

V6E 1L7



By submitting this form, I confirm that the information I have provided is accurate. I understand that providing false information may make me subject to prosecution under the *Criminal Code* of Canada.