

## Certificate of Vaccination

GIAN FRANCO M. ISLA

Name:

Sex:

MALE

Date of Birth: **AUGUST 02,1998** 

Nationality: FILIPINO

This is to certify that the person above has been vaccinated or received prophylaxis as shown below:

		CHOLERA	CHOLERA	Vaccine or Prophylaxis
		NOV 03,2022	OCT 27,2022	Date
	0	Oravacs Lot#:202106P17	Oravacs Lot#:202106P17	Manufacturer & Batch or Lot No.
			11	
	CIC * 000	LIC # DADITY MINDANA M.D.  POLITICA MINDANA M.D.	CLANC PHYSICIAN N.D.	Signature, License and Professional Status

of the vaccine or prophylaxis. The certificate is valid until the date indicated for the particular vaccine or prophylaxis. The certificate is signed by a medical practitioner of other authorized health worker, supervising the administration