

COVID-19 VACCINATION CERTIFICATE

PATIENT INFORMATION

Name: John Doe
Date of Birth: 05/15/1980
Patient ID: P-1001
Gender: Male
Address: 123 Main Street, Anytown, CA 12345

VACCINATION DETAILS

Certificate Number: VAX-2023-5678
Vaccination Status: FULLY VACCINATED

DOSE INFORMATION

Dose 1:
Date: May 15, 2021
Vaccine Product: Pfizer-BioNTech COVID-19 Vaccine
Lot Number: EW0182
Administered at: Cityview Medical Center

Dose 2:
Date: June 5, 2021
Vaccine Product: Pfizer-BioNTech COVID-19 Vaccine
Lot Number: EW0207
Administered at: Cityview Medical Center

Booster:
Date: January 15, 2023
Vaccine Product: Pfizer-BioNTech COVID-19 Vaccine \$Bivalent\$
Lot Number: FG3421
Administered at: Cityview Medical Center

CERTIFICATION

This is to certify that the above-named individual has received COVID-19 vaccination as documented above. This certificate is issued in accordance with the guidelines of the Department of Health and the Centers for Disease Control and Prevention.

HEALTHCARE PROVIDER INFORMATION

Name: Dr. Michael Chen, MD
License Number: MD54321
Medical Center: Cityview Medical Center

*Electronically signed by: Dr. Michael Chen
Date: January 15, 2023*