



CITY OF URDANETA

COVID-19 Vaccination Card



ID No. RMC-012314

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

* Pakitago ang record card na ito, kung saan mababasa ang impormasyong medikal tungkol sa bakunang iyong natanggap

Last Name DUZON First Name MARC BRYAN Middle Name O. Suffix _____

Address Bayabas Urd. City Pangr. Contact No. 09653520235

Date of Birth 3-5-95 Sex M Phil Health No. _____ Category _____

Dosage Seq.	Date (mm/dd/yy)	Vaccine Brand	Name of Vaccinator (with Signature)	Batch No.	Lot. No.
Booster	2/9/22	Pfizer	Jayson E. Macanas, RN Lic. No.: 0900247	PAA17	3696

Health Facility Name: **Urdaneta City Health Office**

Facility Contact No.: **0933.869.4961**