

呂錦蓉診所

Dr. LOI KAM IONG

Address : EM MACAU, AVENIDA DO HIPÓDROMO N^o273, PAK LEI
RÉS-DO-CHÃO M

Tel. : 62813482

病假證明書 CERTIFICATE FOR SICK-LEAVE

日期

Date 15/2/2023

敬啓者：

To whom it may concern:

茲證明

This is to certify that

鄭文波 先生(女士、小姐)

the patient Mr./Mrs./

因患

Miss is suffering from

腸胃炎

and

建議休病假，由

15/2/2023 至 15/2/2023 共 1 天

that a sick-leave of

days as from

to

for days

him/her is recommended.



執業醫生

Medical Practitioner