

Example Clinic

Vaccine Card

Name: Herbert Keogh

Sex: Male

Date of Birth: August 31, 1950

Contact Number: (60) 111 2222

Patient Number: 00-0034

VACCINE	PRODUCT NAME	MANUFACTURE	DATE	ADMINISTERED
Tetanus	Tetaprod	Bentley H.	7-Nov-23	Dr. Min

Instructions

- 1. Do not lose this card.
- 2. Present this card on your next vaccination appointment.



Doctor's Signature

Dr. Example
Primary Care Physician
(60) 000 2222