

## New York State COVID-19 Vaccine Form

## This form is not proof of an appointment.

Thank you for completing the New York State COVID-19 Vaccine Form.

## **Thomas Hazel**

Submitted: 04/12/2021, 09:50 am

## **Submission ID:**

1618235381\_60744ff5394583.62280072

Please show this page to your COVID-19 vaccine healthcare provider before the vaccination.

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https://forms.ny.gov/s3/vaccine 1/1