CDC COVID-19 Vaccination Record Card

COVID-19 Vaccination Record Card

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

Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.

Last Name | First Name | MI

Date of birth | Patient number *(medical record or IIS record number)*

Vaccine	Product Name/Manufacturer Lot Number	Date	Healthcare Professional or Clinic Site
1st Dose COVID-19		____/____/____ *mm dd yy*	
2nd Dose COVID-19		____/____/____ *mm dd yy*	
Other		____/____/____ *mm dd yy*	
Other		____/____/____ *mm dd yy*	

State of Hawaii Safe Travels Application

Trips

+ Add Trip

Trip Origin and Destination

Trip Details

Hawaii Arrival Date	[redacted]
Traveling To	Honolulu (HNL)
Flight Number	[redacted]
Airline	[redacted]
Traveler	[redacted]
Other Travel Party Members	
Hawaii Departure Date	[redacted]
In Quarantine	No
Last Day of Quarantine	-NA-

Screened: Yes

Exemption/Exceptions

Exempt: Yes [redacted] COVID-19 Vaccine

View

VAMS Report

VAMS Vaccine Administration Management System

Certificate of COVID-19 Vaccination

This is to certify that Aloha Test Hawaii , date of birth January 01, 1950 , has on the date indicated been vaccinated against COVID-19.

Vaccination History: VAMS ID: VAMS-116100568

Date Administered	Product	Manufacturer	Lot Number	Clinic
8/2/2021	Moderna COVID-19 Vaccine	Moderna US, Inc.	008C21A	C and C POD - LCC
8/31/2021	Moderna COVID-19 Vaccine	Moderna US, Inc.	002C21A	C and C POD - LCC

SAMPLE

State of Hawaii DOH Vaccination Record Report

State of Hawaii
Department of Health
Immunization Branch
1250 Punchbowl Street, 4th floor
Honolulu, Hawaii 96813
Telephone: (808) 586-8300

The State of Hawaii Department of Health, Immunization Branch's records shows that Name: Aloha Test Hawaii, DOB: 01/01/1950, received the following immunizations on the dates shown in the table below.

Certificate of COVID-19 Vaccination

This is to certify that Aloha Test Hawaii , date of birth January 01, 1950 , has on the date indicated been vaccinated against COVID-19.

Vaccination History: VAMS ID: VAMS-116100568

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8/31/2021	Moderna COVID-19 Vaccine	Moderna US, Inc.	002C21A	C and C POD - LCC

For any questions regarding this record, please contact the State of Hawaii Department of Health, Immunization Branch.

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