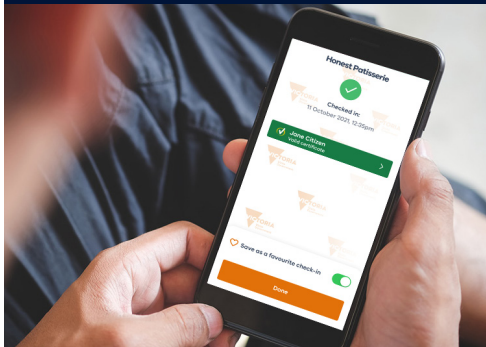


# PROOF OF COVID-19 VACCINATION STATUS

Customers aged 16 or over must show proof of COVID-19 vaccination or a signed medical exemption as a condition of entry to most businesses. **Here is what is accepted:**

## COVID-19 digital certificate via the Service Victoria app



## COVID-19 digital certificate saved to smartphone



## Printed copy of COVID-19 digital certificate together with photo ID

  
Australian Government

**COVID-19 digital certificate**

This individual has received all required COVID-19 vaccinations.

Name: **JOHN CITIZEN** Date of birth: **01 Jan 1970**  
Individual Healthcare Identifier (IHI): **1234 5678 91011 1213** Document number: **1234 5678 9100**

Valid from: **01 Jan 1970**

Vaccinations: **Pfizer Cominaty** Dates received: **02 Aug 2021, 23 Aug 2021**

Disclaimer  
This certificate shows your COVID-19 vaccination details as reported to the Australian Immunisation Register by your vaccination provider. It is available because you have received all required COVID-19 vaccinations. The valid from date reflects the date from which you received all required COVID-19 vaccinations.

Every effort is made to ensure that the information contained on the Australian Immunisation Register is correct. The data is based on information provided by vaccination providers and the accuracy of data is dependent on the quality and timeliness of information provided.


If any of the vaccination details shown on the certificate are not correct, please ask your vaccination provider to provide the correct details. They can call us on 1800 653 809 (call charges may apply).

If you have any questions about this certificate please call the Australian Immunisation Register on 1800 653 809 (call charges may apply).

Version v2021.06.15




## Printed copy of Immunisation history statement together with photo ID

  
Australian Government  
Services Australia **medicare**

**Immunisation history statement**

As at: 15 October 2021  
For: **JOHN CITIZEN**  
Date of birth: 01 Jan 1970  
Individual Healthcare Identifier (IHI): 1234 5678 91011 1213

COVID-19 immunisation status:   
This individual has received all required COVID-19 vaccinations.

Date given	Immunisation	Brand name given
12 Nov 2009	Influenza	Parvax
01 May 2018	Influenza	Fluarix Tetra
24 Aug 2018	Diphtheria Tetanus Pertussis	Boostrix
02 Aug 2021	COVID-19	Pfizer Cominaty
23 Aug 2021	COVID-19	Pfizer Cominaty

Next NIP immunisation's due: **No vaccines due.** Date due: **Not applicable.**

**Notices**


Disclaimer  
The Australian Immunisation Register is a national register that records vaccinations given to people of all ages in Australia. Vaccinations given before 1 January 1999 are not displayed on the statement.

NIP immunisations refer to immunisations required under the National Immunisation Program schedule only, not including COVID-19 vaccinations. A separate COVID-19 immunisation status will appear on this statement when you have received all required COVID-19 vaccinations.

Every effort is made to ensure that the information contained on the Australian Immunisation Register is correct. The data is based on information provided by vaccination providers and the accuracy of data is dependent on the quality and timeliness of information provided.

If any of the vaccination details shown on the statement are not correct, please ask your vaccination provider to provide the correct details. They can call us on 1800 653 809 (call charges may apply).

If you have any questions about this statement, please call the Australian Immunisation Register on 1800 653 809 (call charges may apply).



## Medical exemption together with photo ID

Sampleton Medical Centre

1 Sample Rd  
Sampleton  
VIC 3000

Provider no: 001 755

This is to certify that Mr John Citizen has the following contraindication to all of the COVID-19 Vaccines available in Australia including:

- Anaphylaxis to a previous dose or to an ingredient
- History of capillary leak syndrome/thrombosis with thrombocytopenia after a previous dose
- Mycocarditis and/or pericarditis attributed to a previous dose

  
<signature Dr Jane Sample>

Medical Practitioner details  
Dr. Jane Sample GP  
Sampleton Medical Centre  
1 Sample Rd  
Sampleton VIC 3000  
Registration number MED 000 001 001



