

1820**Vaccinereede**

| No. | Attestens dato | Den vaccineredes Navn | Alder | Faders Navn | føde-og opholdssted | Vaccinator's Navn | Ammerkninger |
|-----|----------------|-----------------------|-------|-------------|---------------------|-------------------|--------------|
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Vaccination

| No. | Certificate Date | Name of person vaccinated | Age | Father's name | Place of birth and residence | Name of vaccinator | Remarks |
|-----|------------------|---------------------------|-----|---------------|------------------------------|--------------------|---------|
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