

INTERNATIONAL SANITARY CONVENTION FOR AERIAL NAVIGATION, 1944

INTERNATIONAL CERTIFICATE OF INOCULATION
AGAINST CHOLERA

THIS IS TO CERTIFY THAT.....
(Age.....Sex.....) whose signature appears below was on the
dates indicated inoculated against cholera.

Date	Material		Inoculating Officer	
	Origin	Batch Number and Type	Signature	Official Title

.....
(Signature of person inoculated)

.....
(Home address)

.....
(Date)

Official
Stamp
of
Inoculating
Officer

(This certificate is not valid for more than 6 months from date of issue.)

INTERNATIONAL SANITARY CONVENTION FOR AERIAL NAVIGATION, 1944

INTERNATIONAL CERTIFICATE OF INOCULATION
AGAINST YELLOW FEVER

THIS IS TO CERTIFY THAT.....
(Age.....Sex.....) whose signature appears below has this day
been inoculated by me against yellow fever.

Origin and batch No. of vaccine.....

Signature of inoculating officer.....

Official position

Place

Date.....

.....
(Signature of person inoculated)

.....
(Home address)

Official
Stamp
of
Inoculating
Officer

FOOTNOTE: This certificate is not valid:

- (a) unless the vaccine and the method employed have been approved by UNRRA,
- (b) until 10 days after the date of the inoculation except in the case of persons re-inoculated within 4 years,
- (c) for more than 4 years from the date of the last inoculation.