

RURAL HEALTH UNIT

MEDICAL CERTIFICATE

TO WHOM IT MAY CONCERN:

Municipal Health Officer Lac No 0149442

| This is to certify that Antiocoma, John my | mouer si anc |
|---|-------------------------------|
| from Names (Kar) Comment mort | was seen and examined in this |
| health center on 8/ 11/1500 | |
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| Diagnosis: | |
| ESSENTIALLY NOTWAL ARE AT THE TH | at our amond |
| Remarks: | |
| MI TO MOLK | |
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| Issued and given this bin day of weart >> w | at San Francisco, Quezon |
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| Don Kim/E. Bariata, RND, MD | |

