AFFIDAVIT

I, , translator in the City of Toronto, Province of Ontario, make oath and say:

1. I am fluent in both Chinese and English.

2. I have translated the annexed document and carefully compared the translation from Chinese into English with regard to the following document:

   Beijing Certificate of Vaccination

3. The said translation is, to the best of my knowledge and ability, the complete and correct translation of said document.

SWORN before me at the City of Toronto
In the Regional Municipality of Metropolitan Toronto)
)
)
)
)
This 29 day of May, 2025)
)
)
)
A Notary Public in and for the Province of Ontario)

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Beijing Certificate of Vaccination

(It is necessary for the enrolment of nursery, kindergarten, primary school)

Beijing Municipal Health Bureau

S e 09-8

General information

No.: Child ID Card:

Child's Name Gender: Female

Date of Birth: September 06, 2009 Weight: 3.35 (kg)

Delivery Hospital: √ 1 Above County-Level 2 Above Township-Level 3 Village-Level 4 At Home

Child's Household Registration Attribute: √ 1 Within the District/County 2 Outside the District/County 3 Outside the Province

Child's Allergy History: Vaccination Contraindications:

Child's Mother's Hepatitis B Surface Antigen (HBsAG) Test Result: 1 Positive √ 2 Negative 3 Not Tested

Parent Information: Father: Mother

Employer:

Father:

Mother:

Contact No Mobile

Current Home Address: Room B-13A, Jinhu Garden Apartment, Tuanjiehu, Beijing

(Town/Street) (Village/Residential Committee/Community)

Household Registration Addres

Certificate Issuance Date: September 24, 2009

Certificate Issuance Unit:

Contact No.:

Seal: Tuanjiehu Community Health Service Center

Health Care Departmen

ry Public

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Vaccination records

Vaccine	Dose No.	Vaccination date	Vaccine batch No.	Dose	Vaccine manufacturers	Vaccination unit	Signed by the doctor	Notes
Bacillus Calmette-Guerin		2009-09-09	2009028014-3			Mary Obstetrics and Gynecology Hospital		
Hepatitis B Vaccine	1	2009-09-06	2008030205			Mary Obstetrics and Gynecology Hospital		
	2	2009-10-13	2008030205	0.5ml	Dalian Hanxin	Tuanjiehu Hospital Community		
	3	2010-03-25	2009020304	0.5ml		Tuanjiehu Hospital Community		
Polio vaccine	1	2009-11-10	2007111012	1 granule	Beijing Tiantan	Tuanjiehu Hospital Community		
	2	2009-12-10	2008100712	1 granule	Beijing Tiantan	Tuanjiehu Hospital Community		
	3	2010-01-12	2008100705	1 granule	Beijing Tiantan	Tuanjiehu Hospital Community		
	4	2013-10-10	201203023-4	1 granule	Beijing Tiantan	Tuanjiehu Hospital Community		
Cell-free DPT vaccine	1	2009-12-10	2008110102	0.5ml	Beijing Tiantan	Tuanjiehu Hospital Community		
	2	2010-01-12	2008110102	0.5ml	Beijing Tiantan	Tuanjiehu Hospital Community		
	3	2010-02-23	2008110102	0.5ml	Beijing Tiantan	Tuanjiehu Hospital Community		
	4	2011-05-31	20100701-2	0.5ml	Beijing Tiantan	Tuanjiehu Hospital Community		

Vaccination records

Vaccine	Dose No.	Vaccination date	Vaccine batch No.	Dose	Vaccine manufacturers	Vaccination unit	Signed by the doctor	Notes
Diphtheria+Tetanus vaccine	1	2015-09-10	20131223-2	0.5ml	Wuhan Biology	Tuanjiehu Hospital		
Leprosy vaccine	1	2010-05-13	2008120805	0.5ml	Beijing Tiantan	Tuanjiehu Hospital		
MMR vaccine	1	2011-03-31	768AA	0.5ml	Beijing Tiantan	Tuanjiehu Hospital		
	2	2015-09-10	201411001	0.5ml	Beijing Tiantan	Tuanjiehu Hospital		
Group A meningococci vaccine	2	2010-03-25	2008060701	0.5ml	Beijing Tiantan	Beijing Tiantan		
	2	2010-06-29	2010020302	0.5ml	Beijing Tiantan	Beijing Tiantan		
Group A+C meningitis vaccine	1	2012-09-13	E0994-1	0.5ml	Pasteur	Tuanjiehu Hospital		
Japanese Encephalitis Live Vaccine	1	2010-11-25	201002A014-3	0.5ml	XXX	Tuanjiehu Hospital		

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北京市

免疫预防接种证

BEIJING CERTIFICATE OF VACCINATION

（入托、入园、入学必备）

北京市卫生局

BEIJING MUNICIPAL HEALTH BUREAU

I certify that this is a true copy
of the original document
Date: 29th day of Mar 2025

#09-8

基本信息

编号：　　儿童身份证：

儿童姓名：　　男/女

出生日期：　年　月　日　时　　出生体重：3.35千克

出生医院：1县级以上　2乡级以上　3村级　4家中

儿童户口属性：1本区县　2外区县　3外省市

儿童过敏史：　　接种禁忌：

儿童母亲乙肝表面抗原（HBsAG)检测结果：1阳性2阴性3未查

家长姓名：　父　　母

工作单位：　父

母

联系电话：

家庭现住址：　　街道)

　村（居委会、社区）　号　楼　室

户籍地址：

建证日期：

建证单位：

联系电话：

I certify that this is a true copy
of the original document
Date
of May 2025

疫苗预防接种记录

疫苗	剂次	接种日期	疫苗批号	剂量	疫苗厂家	接种单位	医生签字	备注
卡介苗		2009-09-09	20090280[illegible]-3			[illegible]		
乙肝疫苗	1	2009-09-06	2008030205			[illegible]		
	2	2009-10-13	2008030205	0.5ml	大连汉信	团	[illegible]	
	3	2010.3.25	[illegible]	0.5ml	汉信	团		
脊灰疫苗	1	2009-11-10	2007111012	1粒	北京天坛	团结湖医院社区		
	2	2009-12-10	2008100712	1粒	北京天坛	团结湖医院社区		
	3	2010-01-12	2008100705	1粒	北京天坛	团结湖医院社区		
	4	2013.10.10	201203023-4	[illegible]	天坛	团	[illegible]	
无细胞百白破疫苗	1	2009-12-10	2008110102	0.5ml	北京天坛	团结湖医院社区	[illegible]	右
	2	2010-01-12	2008110102	0.5ml	北京天坛	团结湖医院社区		
	3	2010.2.27	2008110102	0.5ml	天坛	团	[illegible]	右
	4	2011.5.31	200901-2 [illegible]		天坛	团		

I certify that this is a true copy
of the original document
Date: 29 day of Ma

疫苗预防接种记录

疫苗	剂次	接种日期	疫苗批号	剂量	疫苗厂家	接种单位	医生签字	备注
白破疫苗	1	2015-09-10	20131223-2	0.5ml	武汉生物	团结湖医院	[illegible]	
	2							
	3							
麻风疫苗	1	2010.5.13	[illegible]	0.5	天坛	团	[illegible]	[illegible]
	2							
麻风腮疫苗	1	11.3.31	768AA	0.5	史	团	[illegible]	
	2	2015-09-10	201411001	0.5ml	北京天坛	团结湖医院	[illegible]	
A 群流脑疫苗	1	2010.3.25	[illegible]	0.5ml	天坛	团	[illegible]	
	2	2010.6.29	2010020302	0.5ml	天坛	团	[illegible]	
A+C 群流脑疫苗	1	2012.9.13	[illegible]	0.5	[illegible]	团	[illegible]	
	2							
乙脑病毒活疫苗	1	2010.11.25	[illegible]	0.5	[illegible]	团	[illegible]	[illegible]

I certify that this is a true copy
of the original document
Date: 29th day of May,