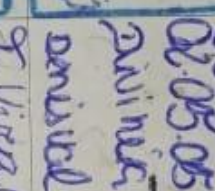
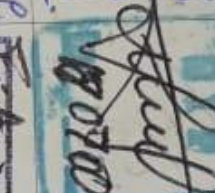
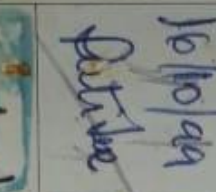
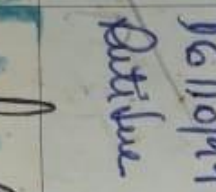
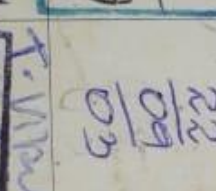
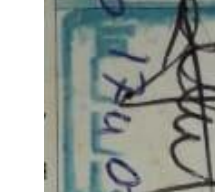
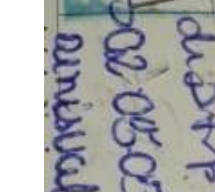
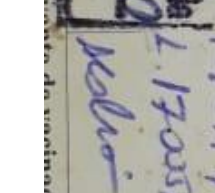
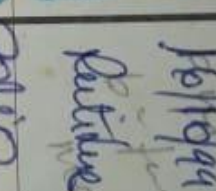
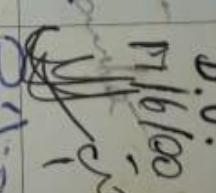
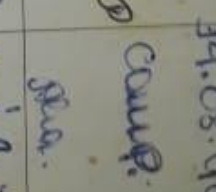
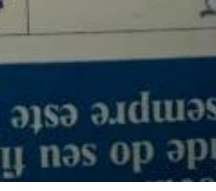
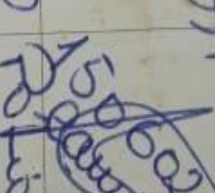
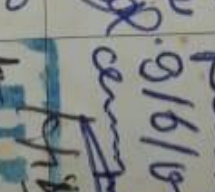
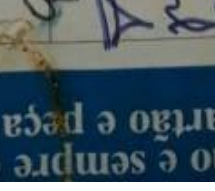
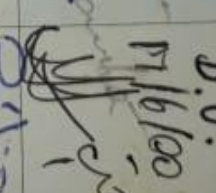
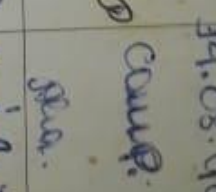
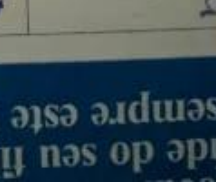
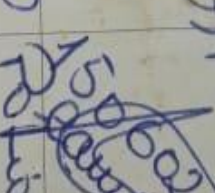
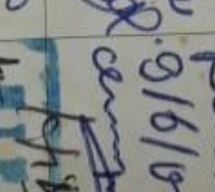
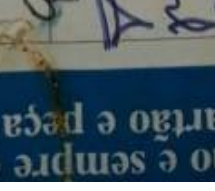


a saúde do seu filho e sempre que ele ficar doente.
Leve sempre este cartão e peça que seja preenchido.

VACINAS OBRIGATORIAS NO 1º ANO DE VIDA						Outras Vacinas	
Anti-Pólio	DPT (Triple)	Contra Hepatite B	BCG	Contra Sarampo	Contra Febre-Amarela		
    	    	    	    	    	    	   	   
1a.	2a.	3a.	Reforço				
Data/Rubrica	Data/Rubrica	Data/Rubrica	Data/Rubrica				



DN
03/04/99

Cartão da Criança

Nome da criança

EMILLY PÂMELA SOARES PINHEIRO

Nome da mãe

Elaineia Soares Pinheiro COELHO

Nome do pai

Endereço

Acrísio, Mourão 43241 - Blumenau

Cidade/Estado

Sto. Isabel do Para

Telefone

CEP

68.790-000

Local de referência

Data de nascimento

03/04/99

Local

Hosp. St. Isabel do Para

15.174

Data de Insc. _____ N° Mat. _____

Nome: EMILLY PÂMELA SOARES

Sexo: F Data Nasc. 03/04/99

Estado Civil

Endereço: Acrísio Mourão 43241 - Blumenau

Cidade/Estado

Sto. Isabel do Para