

Town of Barnstable

Inspectional Services Public Health Division

200 Main Street - Hyannis, MA 02601

TOWN OF BARNSTABLE RESIDENTS ONLY

Fax: 508-790-6304

Over the Age of 4

ADULT VACCINE ADMINISTRATION RECORD	
Name (Last, First, Middle)	
Birth Date:	Age:
Street Address:	Phone #:
Town	State Zip
X	Date:
Signature of person to receive vaccine, or that person's guardian	
OFFICIAL USE ONLY	
□ FLUZONE Quad U8435AA Exp. 06/30/2025 (Town supply)	
□ FLUZONE Quad Exp (Town supply)	
□ Left - Delto	id □ Right - Deltoid
□ Brown, Laurie	□ Freeman, Cheryl □ Stanton, Margaret
□ Cxypoliski, Roberta	□ Isaac, Maggie
☐ Covell, Theresa	□ DeSimone, Danielle
☐ Casey, Mary Lynn	□ Reitlier, Pam
□ Vermette, Nora	□ Ruskowski, Susan