

Certificate of the examination for COVID-19

Date of issue(dd/mm/yyyy) :

NAME(First,Last) :

SEX : Male / Female

Date of Birth (dd/mm/yyyy):

Passport NO. :

Nationality : Japan

The result of the examination for COVID-19 is as follows,

Specimen sample : Nasopharyngeal swab

Examination method : RT-PCR

Date of sampling(dd/mm/yyyy) :

Result : Negative

We certify this report as stated above.

Dr.

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