

I. INTERNATIONAL CERTIFICATES OF VACCINATION

AS APPROVED BY
THE WORLD HEALTH ORGANIZATION

(EXCEPT FOR ADDRESS OF VACCINATOR)
CERTIFICATS INTERNATIONAUX DE VACCINATION

APPROUVÉS PAR
L'ORGANISATION MONDIALE DE LA SANTÉ
(SAUF L'ADRESSE DU VACCINATEUR)

II. PERSONAL HEALTH HISTORY

TRAVELER'S NAME—Nom du voyageur

WILLIAM F. WICKSTROM

ADDRESS
ADRESSE

(Number—Numéro)

(Street—Rue)

2533 DONNA AVENUE

(City—Ville)

WARREN

MICHIGAN

48091

(County—Département)

(State—État)

MACOMB

U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE



READ CAREFULLY
INSTRUCTIONS
Pages 10 and 11

PHS-731
Rev. 8-65