

Pelmeds  
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2/10/2021

**Covid Vaccination Roster Form**

Dear Customer,

Please see attached covid roster form that needs to be filled out in this particular format for uploading to the state MIIS system.

Please fill out the following information on the form:

- Last name, first name
- Date of birth
- Gender
- Street address, city, zip code, state.

All the other information will be filled out by Pelmeds.

Should you have anything else, please feel free to contact us.



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