

## **CERTIFICATE OF PAYMENT**

Concerning the supply of [Brand Name Vaccine]	Comirnaty
Batch Number	EK9788
Supplier	Pfizer BV
SAP Article Number RIVM	92613
PO Number RIVM	3910141754/00001
Number of Doses	5.1.2c
Number of Packages	5.1.2c
Acting on behalf of RIVM, the (first) undersigned, authorised for this purpose by the RIVM, hereby declares that the vaccines and necessary documents have been supplied to RIVM timely, according requirements and thereby deemed to have been accepted	
Bilthoven, Date	03-FEB 2071
On behalf of the RIVM,	
Name	5.1.2e
Position	☐ Qualified Person ☑ Responsible Person
Signature	5.1.2e

This Certificate of Payment releases only payment of the received invoice of the above mentioned batch