

[Covering of lab report]

To whom it may concern:

This laboratory/health institution,\* \_\_\_\_\_ (*name of laboratory or health institution*), as a laboratory/health institution\* recognised or approved by the Government of \_\_\_\_\_ (*name of the country*) hereby certifies that the following named person has a **negative** SARS-CoV-2 nucleic acid test. Details are as follows:

Name of person tested : \_\_\_\_\_

Passport / HKID No. : \_\_\_\_\_

Date and time of Specimen collection : \_\_\_\_\_

Test conducted : SARS-CoV-2 nucleic acid test

Results : Negative

Signature \_\_\_\_\_

Name of person-in-charge \_\_\_\_\_

Position of person-in-charge \_\_\_\_\_

Organisation chop \_\_\_\_\_

\*Delete as appropriate