## COVID-19 Vaccination Verification For entry to Courtroom 5 or the Chambers of Judge Rodgers

| By signing this statement, I hereby verify as true that I have been      |
|--|
| fully vaccinated for COVID-19 (having received the second dose in a two- |
| dose series or a single-dose vaccine) more than two weeks before this    |
| date.  |

| Signature |  |  |  |  |
|-----------|--|--|--|--|
|           |  |  |  |  |
| Date:     |  |  |  |  |