

Ministry of Health & Family Welfare Government of India

Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 63836415609

Beneficiary Details

Beneficiary Name / लाभार्थी का नाम Jay Narayan Sharma

Age / उम्र **29**

Gender / लिंग **Male**

ID Verified / पहचान पत्र सत्यापित Aadhaar # XXXXXXXX6979

Unique Health ID (UHID)

Vaccination Status / टीकाकरण की स्थिति Fully Vaccinated (2 Doses) and a Precaution Dose

70336837696260

Vaccination Details

Beneficiary Reference ID

Vaccinated By / टीका लगाने वाले का नाम **Manju Gayakward**

Vaccination At / टीकाकरण का स्थान SHC Girod(B), Raipur, Chhattisgarh

Dose Number	Date of Dose	Vaccine Name	Batch Number	Vaccine Type	Manufacturer
खुराक की संख्या	खुराक की तारीख	वैक्सीन का नाम	बैच संख्या	टीका का प्रकार	उत्पादक
1/2	19 Aug 2021	COVISHIELD	4121Z151	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India
2/2	09 Dec 2021	COVISHIELD	4121AA047M	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.
Precaution dose	09 Sep 2022	COVISHIELD	4122AA010	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.



Together, India will defeat COVID-19"

- प्रधानमंत्री

In case of any adverse events, kindly contact the nearest Public Health Center/Healthcare Worker/District Immunization Officer/State **Helpline No. 1075**

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें





