



Ministry of Health & Family Welfare
Government of India

Provisional Certificate for COVID-19 Vaccination - 1st Dose

Beneficiary Details

Beneficiary Name / लाभार्थी का नाम	Vikas Pandey
Age / उम्र	41
Gender / लिंग	Male
ID Verified / पहचान पत्र सत्यापित	Aadhaar # XXXXXXXX1722
Unique Health ID (UHID)	
Beneficiary Reference ID	62362303837870

Vaccination Details

Vaccine Name / वैक्सीन का नाम	COVISHIELD
Date of Dose / खुराक की तारीख	26 May 2021 (Batch no. 4121Z072)
Next due date / अगली नियत तिथि	Between 18 Aug 2021 and 15 Sep 2021
Vaccinated by / टीका लगाने वाले का नाम	BEENA
Vaccination at / टीकाकरण का स्थान	DISTRICT MALE HOSPITA 18 TO 44, Basti, Uttar Pradesh

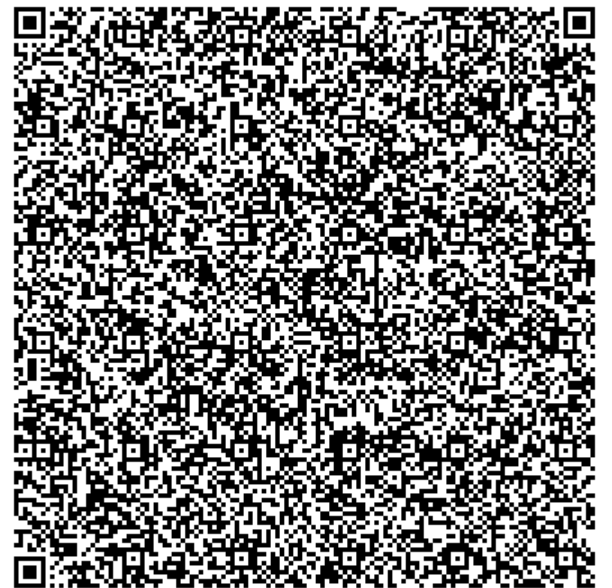


“दवाई भी और कड़ाई भी।
Together, India will defeat
COVID-19”
- प्रधानमंत्री नरेंद्र मोदी

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 नजदीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण
अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करें

COWIN
Winning Over COVID



This certificate can be verified by scanning the QR code at
<http://verify.cowin.gov.in>