

## 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 18634814243

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24967174503550

## **Beneficiary Details**

Beneficiary Name / लाभार्थीचे नाव Bhagyashri Tejas Thakur

Age / वय

Gender / लिंग Female

ID Verified / ओळखपत्र Aadhaar # XXXXXXXX6542

Unique Health ID (UHID)

Vaccination Status / लसीकरण स्थिती Fully Vaccinated (2 Doses)

**Vaccination Details** 

Beneficiary Reference ID

Vaccinated By / यांच्याद्वारे लसीकरण Mr. Vinayak Ramchandra Dimble

Vaccination At / लसीकरणाचे स्थळ PMC P 14 Apollo Clinic Kharadi, Pune, Maharashtra

Dose Number डोस क्रमांक	Date of Dose डोसची तारीख	Vaccine Name लसीचे नाव	Batch Number बॅच क्रमांक	Vaccine Type लस प्रकार	Manufacturer उत्पादक
1/2	21 Jun 2021	COVISHIELD	4121Z080	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India
2/2	18 Jan 2022	COVISHIELD	4121P194	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.



औषध सुद्धा आणि शिस्त सुद्धा Together, India will defeat COVID-19"

- पंतप्रधान श्री. नरेंद्र मोदी

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

कोणतेही प्रतिकूल परिणाम आढळून आल्यास कृपया जवळचे सार्वजनिक आरोग्य केंद्र/ आरोग्यसेवा कर्मचारी/ जिल्हा लसीकरण अधिकारी/ राज्य हेल्पलाइन क्रमांक १०७५ वर संपर्क साधा.





