



Ministry of Health & Family Welfare
Government of India

Final Certificate for COVID-19 Vaccination

Beneficiary Details

Beneficiary Name / लाभार्थीचे नाव	Dr Kalpana Ashish Hajirnis
Age / वय	53
Gender / लिंग	Female
ID Verified / ओळखपत्र	PAN Card # AAOPH2028R
Unique Health ID (UHID)	
Beneficiary Reference ID	21395682547601

Vaccination Details

Vaccine Name / लसीचे नाव	COVISHIELD
Date of Dose / डोसची तारीख	22 Feb 2021 (Batch no. 4120Z012)
Vaccinated by / यांच्याद्वारे लसीकरण	Sulbha Shete
Vaccination at / लसीकरणाचे स्थळ	Sion Hospital 5, Mumbai, Maharashtra



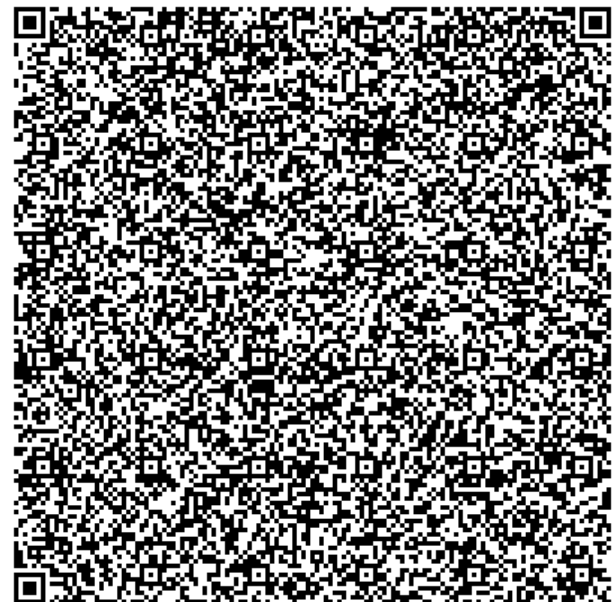
औषध सुद्धा आणि शिस्त सुद्धा
Together, India will defeat
COVID-19”

- 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.

COWIN
Winning Over COVID



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