



Ministry of Health & Family Welfare  
Government of India

## Certificate for COVID-19 Vaccination

Partially Vaccinated : 1st Dose

### Beneficiary Details

Beneficiary Name / लाभार्थीचे नाव

**Avinash Dharmendra Kumar Sharma**

Age / वय

**18**

Gender / लिंग

**Male**

ID Verified / ओळखपत्र

**Aadhaar # XXXXXXXXX8419**

Unique Health ID (UHID)

**42-8746-1338-6844**

Beneficiary Reference ID

**36757381587090**

### Vaccination Details

Vaccine Name / लसीचे नाव

**COVISHIELD**

Date of 1<sup>st</sup> Dose / पहिल्या डोसची तारीख

**18 Sep 2021 (Batch no. 4121MC080)**

Next due date / पुढील देय तारीख

**Between 11 Dec 2021 and 08 Jan 2022**

Vaccinated by / यांच्याद्वारे लसीकरण

**Shubhangi Dhavale**

Vaccination at / लसीकरणाचे स्थळ

**TATA MEMORIAL HOSPITAL PAREL, Mumbai,  
Maharashtra**



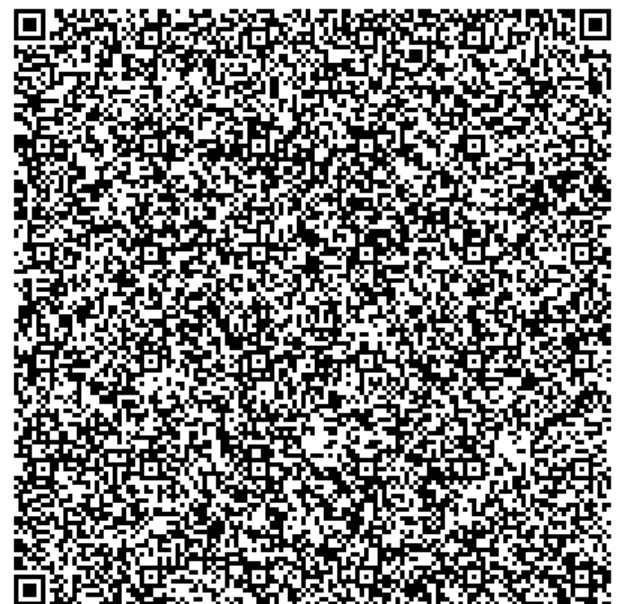
औषध सुद्धा आणि शिस्त सुद्धा  
Together, India will defeat  
COVID-19”

- 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



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