

*Dr. Suhail F. Patankar*

Reg. No. 14497

G.C.E.H., A.R.S.H. (Lon.)



**Ref. No. : 007**

**Date : 01.02.2025.**

Ref. By.	Self		
Patient name / age	MRS.ALAMARA / 58	Gender	MALE
Passport No.	C4604939	Patient ID.	007
Date of Registration	01/02/20 25	Travel Date.	N.A.

**MENINGISTIS VACCINE CERTIFICATE**

This is to certify that Mr./ Mrs. Azeem Ahmad  
having Passport No. C 4604939 is Vaccinated for ( Quadri Meningococcal  
Meningitis Group A.C. Y&W 135).

**Vaccination Details :**

Vaccination Date:01/02/2025

Dose :1

Vaccine :Meningococcal

Description :Quadri Meningococcal Meningitis Group A.C. Y&W 135

Batch No. :MQ020224

Expiry Date :01/2026



**For Falah Medicare  
Dr. SUHAIL F. PATANKAR**

*Spatankar*  
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**Falah Medicare, 1st Floor, Burlington Square, Vidhan Sabha Road, Licknow-226001.**