## **SELF DECLARATION**

		Date:
I	, Passp	ort No
arriving from	by flight No	, presently residing
at		hereby declare
that I have completed my b	ooth the dosage of authent	ic Covid-19 vaccine and
enclosing valid documents de	picting the completion of do	osage.
I am aware that I shall be sub revealed to be wrong/ mislead	100 mm m m m m m m m m m m m m m m m m m	
Govt. of Maharas <mark>h</mark> tra/ Govt.		in in
(MCGM) with respect to Cov	rid-19 pandemic.  Signature:	nordrion
	Mobile No:	