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Ministry of Health & Family Welfare
Government of India

Final Certificate for COVID-19 Vaccination

Beneficiary Details

Beneficiary Name / लाभार्थी का नाम	Mahendra
Age / उम्र	66
Gender / लिंग	Male
ID Verified / पहचान पत्र सत्यापित	Voter ID # 270935
Unique Health ID (UHID)	
Beneficiary Reference ID	29506947500154

Vaccination Details

Vaccine Name / वैक्सीन का नाम	COVISHIELD
Date of Dose / खुराक की तारीख	05 May 2021 (Batch no. 4121Z064)
Vaccinated by / टीका लगाने वाले का नाम	Rekha ks anm
Vaccination at / टीकाकरण का स्थान	CD HIGH COURT SITE 2, Jaipur I, Rajasthan