#### **VALID CERTIFICATE**

## **Summary**

### **Patient Information**

Name: Tharana Perera
Patient ID: P2025/387/26

Date of Birth: -

Contact: chenathperera@gm

ail.com

# **Vaccination Details**

**Date Administered:** 10/13/2025, 2:26:00

PM

Healthcare Provider: Rakindu Mandunu

Rajapaksha

Facility: Hospital

Certificate Status: Valid

### **Vaccination Information**

Vaccine	Manufacturer	Dose	Batch No.	Route/Site
Rotavirus	GSK (Rotarix)	Dose 1	GSK- ROTA-25X01	Oral / N/A

### **Additional Information**

Expiry Date	Next Dose Due	Lot Number	Administrator	Signature
10/30/2025	-	GSK-ROTA-25X01	Rakindu Mandunu Rajapaksha	_