

VALID CERTIFICATE

Summary

Patient Information

Name: Rakindu Rajapaksha

Patient ID: P2025/747/32

Date of Birth: -

Contact: rakindur03@gmail.c

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Vaccination Details

Date Administered: 10/10/2025,

10:31:00 PM

Healthcare Provider: Odara Induwari

Haputhanthrige

Facility: Hospital

Certificate Status: Valid

Vaccination Information

Vaccine	Manufacturer	Dose	Batch No.	Route/Site
COVID-19	Pfizer-BioNTech	Dose 1	PFZ- COV-25B01	IM / Left Deltoid

Additional Information

Expiry Date	Next Dose Due	Lot Number	Administrator	Signature
10/21/2025	-	PFZ-COV-25B01	Odara Induwari Haputhanthrige	_