

## **VALID CERTIFICATE**

## **Summary**

**Patient Information** 

Name: Sanjula Dilhara

Haputhanthrige

**Patient ID:** P2025/798/12

Date of Birth: -

Contact: dilhara2002sanju@g

mail.com

**Vaccination Details** 

**Date Administered:** 10/12/2025, 5:32:00

PM

Healthcare Provider: Rakindu Mandunu

Rajapaksha

Facility: Hospital

Certificate Status: Valid

## **Vaccination Information**

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

## **Additional Information**

Expiry Date	Next Dose Due	Lot Number	Administrator	Signature
11/7/2025	-	PFZ-COV-25B01	Rakindu Mandunu Rajapaksha	_