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GREATER CHENNAI CORPORATION
PUBLIC HEALTH DEPARTMENT
ZONE -
COVID-19 Vaccination Card

Name: A.S. Mrahjian Ganesh, Age : 24 Gender : M Mob: ~~9~~ 7984033921O

Sl. No.	Vaccine type Covishield/ ~~Covaxin~~	Date of Vaccination	Next booster Dose (Date)	Signature of the medical officer	Official stamp/ Name of the facitlity
1st Dose		12/5/21	30/6/21		
2nd Dose	✓	20/8/21			
Reactions if any:-					