



**GREATER CHENNAI CORPORATION
PUBLIC HEALTH DEPARTMENT/
MEDICAL SERVICES DEPARTMENT
ZONE -**

COVID-19 Vaccination Card

Name: crange gunyath Age: 28 Gender: 7 Mob: 8925466815

Sl. No.	Vaccine type	Date of Vaccination	Next booster Dose (Date)	Signature of the medical officer	Official stamp/ Name of the facility
	<u>Covishield/</u> Covaxin				
1st Dose	✓	26/12/21			MEDICAL OFFICER KULATHUR II UFHC CORPORATION OF CHENNAI
2nd Dose	✓	26/3/22 given.			
Reactions if any:-					