

15970 2nd dose 25/9/21

(7)



2561



THOOTHUKUDI CITY MUNICIPAL CORPORATION COVID VACCINE CARD

S.No.

Name : Rajalekshmi Age / Sex : 46/F

Vaccine Name COVISHIELD

Dose	Vaccine Batch No. / Exp.	Due Date	Given Date
1 st Dose			21/6/21
2 nd Dose		21/9/21	

For queries, Call Control Room,
Thoothukudi City Municipal Corporation
Mobile: 63837 55245 Ph: 0461-4227202

Nodal Officer ALJ