



Certificate No. OC8310953

IMMUNIZATION CERTIFICATE FOR COVID-19

Name _____ Saud Sabir Shah
Date of Birth _____ 17-04-1997 CNIC No. _____ 42101-5435441-7
Nationality _____ Pakistan Passport No. _____
Vaccination Name _____ Sinopharm Recommended Dosage _____ 2
Status _____ Fully Vaccinated



has been administered following **COVID-19** vaccine:

Vaccine or prophylaxis	Date	Name of Health Center	Vaccine manufacturer & batch No.
01.	10-06-2021	Expo Center Karachi	Sinopharm, China National Pharmaceutical Group Co., Ltd 2021030324
02.	02-07-2021	Expo Center Karachi	Sinopharm, China National Pharmaceutical Group Co., Ltd 202105B0751



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