



Ministry of Health - Sri Lanka
Certificate of COVID-19 Vaccination

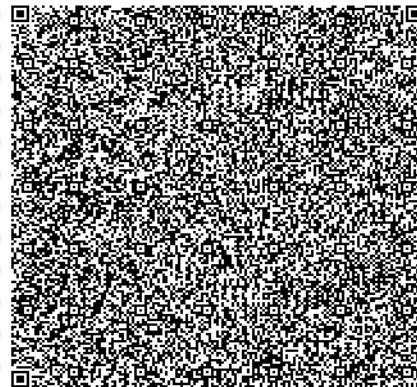
1. Beneficiary Name / ප්‍රතිලාභියාගේ නම / நலன் பெறுநர் பெயர்
HITHANADURA NILUKA CHATHURANI KANTHA DE SILVA

2. Residential Address / පදිංචි ලිපිනය / வதிவிட முகவரி
375,NAGAS JUNCTION, MAHA WASKADUWA, WASKADUWA

3. Gender / ස්ත්‍රී පුරුෂ භාවය / பாலினம்
Female

4. Date of Birth / උපන් දිනය / பிறந்த தேதி
08-Sep-1987

5. Verified Identity Number / අනන්‍යතාවය / அடையாள எண்
NIC: 877523322v / PASSPORT: N7402225



6. Vaccination Details / එන්නත් කිරීමේ විස්තර / தடுப்பூசி விபரங்கள்

	Vaccine Doses			
	1. Date	2. Vaccine Product	3. Batch Number	
1. Date	21-Jul-2021	28-Oct-2021	18-Jan-2022	
2. Vaccine Product	SINOPHARM BIBP-CorV	SINOPHARM BIBP-CorV	PFIZER	
3. Batch Number	SINOPHARM (VERO CELL) - 2021020158	SINOPHARM (VERO CELL) - 2021030211	PFIZER - EW0151	

7. Vaccination Status / එන්නත් කිරීමේ තත්වය / தடுப்பூசி நிலை
3 doses given

8. Date of Issue / නිකුත් කරන දිනය / வழங்கப்பட்ட திகதி
23-Jan-2023

Secretary of Health

Verification Portal
<https://cert.covid19.gov.lk>

