

Police Department, Arkham, Massachusetts

POL-1521FP

302 East Armitage Street Telephone 3659

Last Name (capital letters) _____ First _____ Middle _____

Signature of person fingerprinted _____ File no. _____ Charge _____

Residence of person fingerprinted _____ Date of Birth _____ Height _____ Weight _____

Place of Birth _____ Eyes _____ Hair _____ Sex _____ Race _____

Signature of person taking fingerprints _____ Date _____



Photo
(facing front)

R. Thumb	R. Forefinger	R. Middle Finger	R. Ring Finger	R. Little Finger
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L. Thumb	L. Forefinger	L. Middle Finger	L. Ring Finger	L. Little Finger
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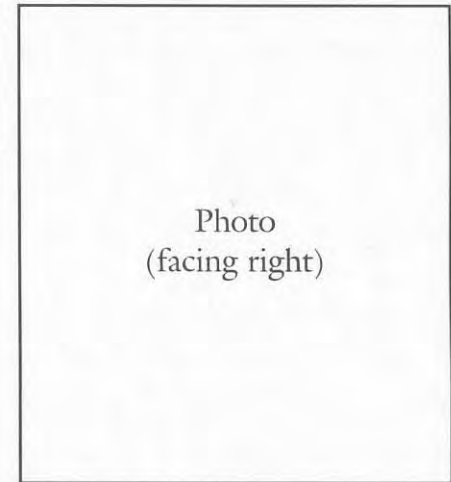


Photo
(facing right)

Left four fingers taken simultaneously	Left Thumb	Right Thumb	Right four fingers taken simultaneously
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