

**ELIMINATION FINGER AND PALMPRINTS FORM**

**C. 24**

FULL NAME .....

C.I.D. F.P. No..... Offence ..... C.R. No. .... Date of Offence. ....
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**RIGHT HAND**

THUMB	FOREFINGER	MIDDLE FINGER	RING FINGER	LITTLE FINGER

**Fold**

**LEFT HAND**

THUMB	FOREFINGER	MIDDLE FINGER	RING FINGER	LITTLE FINGER

Fingerprints taken by .....

Rank ..... Date .....

Police Station .....

**RIGHT PALM**

**LEFT PALM**