

# FINGER-PRINT FORM

(This form must be completed in BLOCK LETTERS)

Name of person being fingerprinted \_\_\_\_\_

Alias \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Registered number \_\_\_\_\_ Office of issue \_\_\_\_\_ Date of issue \_\_\_\_\_

Reason for search _____		For use by Criminal Investigation Bureau															
Office of origin of prints	Full address of office to which this form is to be returned	C.I.D.H.Q Ref _____															
WHERE FINGER-PRINTS ARE NOT SHOWN BELOW INDICATE IN APPROPRIATE SPACE, WHETHER "MISSING" "INJURED", ETC WITH DATE OF AMPUTATION OR INJURY		Bureau Docket Number _____															
		Bureau Number _____															
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See reverse of form for address to which finger prints are to be sent and for notes on finger printing																	

## RIGHT HAND

Right thumb	Right forefinger	Right middle finger	Right ring finger	Right little finger
-Fold				

## LEFT HAND

Left thumb	Left forefinger	Left middle finger	Left ring finger	Left little finger
-Fold				

## LEFT HAND

## RIGHT HAND

Impression of all LEFT fingers taken simultaneously	Impression of all RIGHT fingers taken simultaneously
-Fold	

Finger-prints taken by \_\_\_\_\_

Date \_\_\_\_\_

For C.C.B. use only

Classified by \_\_\_\_\_

Checked by \_\_\_\_\_

Searched by \_\_\_\_\_

Impress simultaneously	
LEFT THUMB	RIGHT THUMB

NATIONAL .I.D NUMBER..... DISTRICT.....  
FATHER.....  
HEADMAN.....  
VILLAGE.....  
CHIEF.....AREA.....  
DISTRICT OF ORIGIN.....  
COUNTRY OF ORIGIN.....  
DATE OF BIRTH..... PLACE OF BIRTH .....  
HEIGHT.....  
PASSPORT NUMBER.....DATE OF ISSUE.....  
COUNTRY OF ORIGIN.....

**SIGNATURE OF PERSON FINGERPRINTED**

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**CARDED / NOT CARDED**  
CRIMINAL RECORDS OFFICE VIC FALLS

ADDRESSES OF FINGER-PRINT BUREAUX:

- (1) OFFICER IN CHARGE,  
CENTRAL CRIMINAL BUREAU (C.C.B)  
C.I.D. HEADQUARTERS  
**HARARE**

*Notes on how to take clear finger prints*

**A BLURRED FINGER-PRINT HAS NO VALUE. ALL PRINTS MUST BE AS CLEAR AS POSSIBLE**

- (a) ALWAYS enter particulars of person on finger-print form IMMEDIATELY AFTER taking his/her finger prints. Do not take other prints until you have done so.
- (b) ALWAYS use the correct ink supplied. DO NOT use ordinary ink on an inking pad for rubber stamps.
- (c) Fingers must be clean and dry, if necessary person having prints taken must wash hands.
- (d) If fingers are badly worn, make smooth by using pumice stone, remove oil or tar with benzine.
- (e) Use a clean pad with no dust or old ink on it. Put ink on evenly-no lumps or blobs. Do not use too much ink(this is a common fault)
- (f) ALL impressions must be in correct sequence to head of space where print is made, taken right down to the first joint of the finger.
- (g) ALL impressions are to be taken by ROLLING the fingers or thumbs, thus: the person having the print taken must let his/her fingers go limp.
- (h) Take each finger ,with nail towards you, and roll on the paper so that the nail finishes away from him/her. CHECK prints to see that they are not smeared.
- (i) CHECK the separate prints of each finger with all four fingers taken together and so make sure that you have taken the separate prints in the correct order.