

FINGER PRINT FORM

(This form must be completed in BLOCK LETTERS)

Name of person being finger printed KAMUBU NATHAN
 Alias _____ Sex MALE Race B/A
 Registered Number 29-056521Z29 office of Issue _____ date of issue _____
 Reasons for search HOLAN VETTING

Office of Origin of Prints

Full address of office to which this form is to be returned

For use by Criminal Investigation Bureau

C.I.D. H.Q. Ref.

Bureau Docket No.


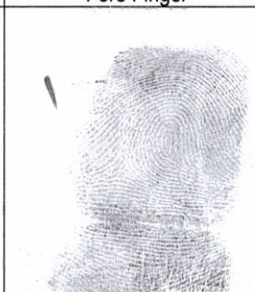


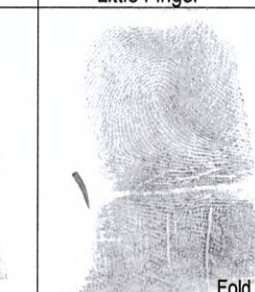
Bureau No

WHERE FINGER PRINTS ARE NOT SHOWN BELOW INDICATE IN APPROPRIATE SPACE WHETHER 'MISSING' 'INJURED' ETC WITH DATE OF AMPUTATION OR INJURY

See reverse of form for address to which fingerprints are to be sent and for notes on how to take clear prints





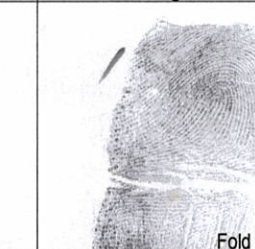
1	4	3	4	3	14
1	4	3	3	3	12

RIGHT HAND

Thumb	Fore Finger	Middle Finger	Ring Finger	Little Finger
				

Fold

LEFT HAND

Thumb	Fore Finger	Middle Finger	Ring Finger	Little Finger
				

Fold

LEFT HAND

RIGHT HAND

Impressions of LEFT fingers taken simultaneously

Impressions of RIGHT fingers taken simultaneously

	
--	--

Fold

Finger prints taken by: 0510035 B/S KAMBA

Date 26/1/24

For C.C.B. use only

Certified by

Checked by

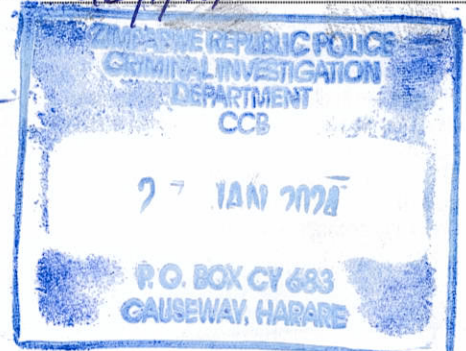
Searched by

Impress simultaneously

LEFT THUMB

RIGHT THUMB

	
--	---



N.I.C. Number 29-056521 Z29 District HARARE

Additional documents of identity _____

District of origin HARARE Country of origin ZIMBABWE

Date and place of birth 28/04/1964, HARARE Height _____

Visible Identifying marks of deformities _____

Passport No. and country of origin _____ Date of issue _____

Signature of person whose prints are on the front of this form [Signature]

Remarks _____

ADDRESSES OF FINGER-PRINT BUREAU

- | | |
|------------------------|------------------|
| 1) Officer Commanding | 2) The Registrar |
| C.C.B. | A.I.F.B |
| C.I.D Headquarters | P.O. BOX 1399 |
| P.O Box 8125, Causeway | Bulawayo. |
| Harare. | |

Note on how to take clear finger prints

A BLURRED FINGER PRINT HAS NO VALUE, ALL PRINTS MUST BE AS CLEAR AS POSSIBLE

- ALWAYS enter particulars of persons on finger-print form IMMEDIATELY AFTER taking his/her finger prints. Do not take other prints until you have done so.
- ALWAYS use the correct ink supplied. DO NOT use ordinary ink on an inking pad for rubber stamps.
- Fingers must be clean and dry. If necessary person having prints taken must wash hands.
- If fingers are badly worn, make smooth by using pumice stone, remove oil or tar with benzene.
- Use 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)
- ALL impressions must be in correct sequence to head of space where print is inside, taken right down to the first joint of the finger.
- ALL impressions are to be taken by rolling the fingers or thumbs, thus: the person having the print taken must let his/her fingers to limp. 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.
- Check the separate prints of each finger with the prints of all four fingers taken together and so make sure that you have taken the separate prints in the correct order.