

FINGERPRINT CARD For use of this form, see AR 190-8; the proponent agency is DCSPER.				INTERNMENT SERIAL NUMBER			
LAST NAME				FIRST NAME			GRADE
POWER SERVED		NATIONALITY		SEX	AGE	HEIGHT	WEIGHT
OTHER MARKS OF IDENTIFICATION				COLOR OF EYES		COLOR OF HAIR	
				<i>LEAVE THIS SPACE BLANK</i>			
SIGNATURE OF OFFICIAL TAKING FINGERPRINTS				CLASSIFICATION			
SIGNATURE OF EPW/CIVILIAN INTERNEE				REFERENCE			
1. RIGHT THUMB	2. RIGHT INDEX	3. RIGHT MIDDLE	4. RIGHT RING	5. RIGHT LITTLE			
6. LEFT THUMB	7. LEFT INDEX	8. LEFT MIDDLE	9. LEFT RING	10. LEFT LITTLE			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY			LEFT THUMB	RIGHT THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY		