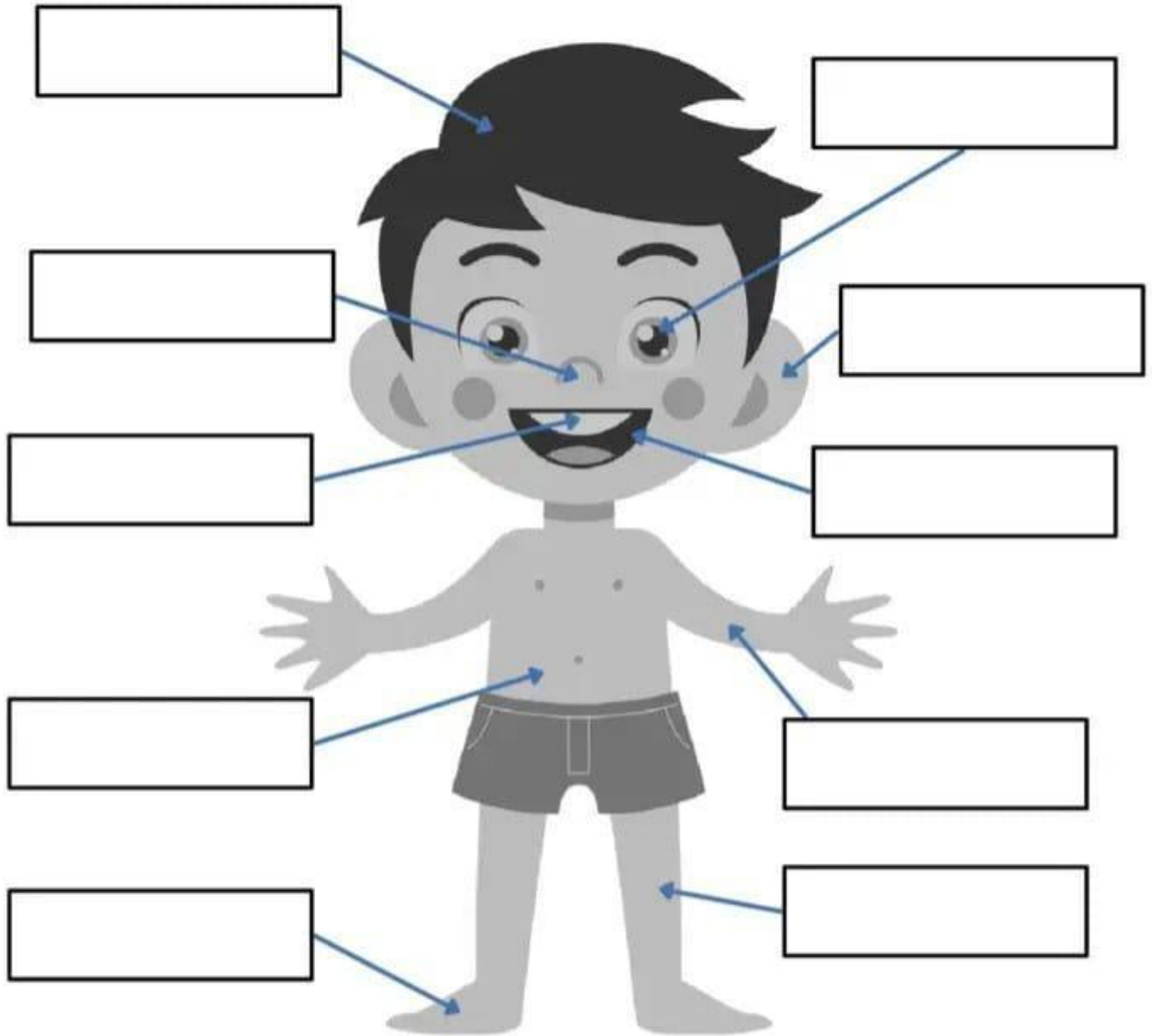


Name : _____

Name the Body Parts

Fill the boxes using the words given below.



Head	Feet	Hand	Ear	Nose
Eye	Leg	Stomach	Mouth	Teeth