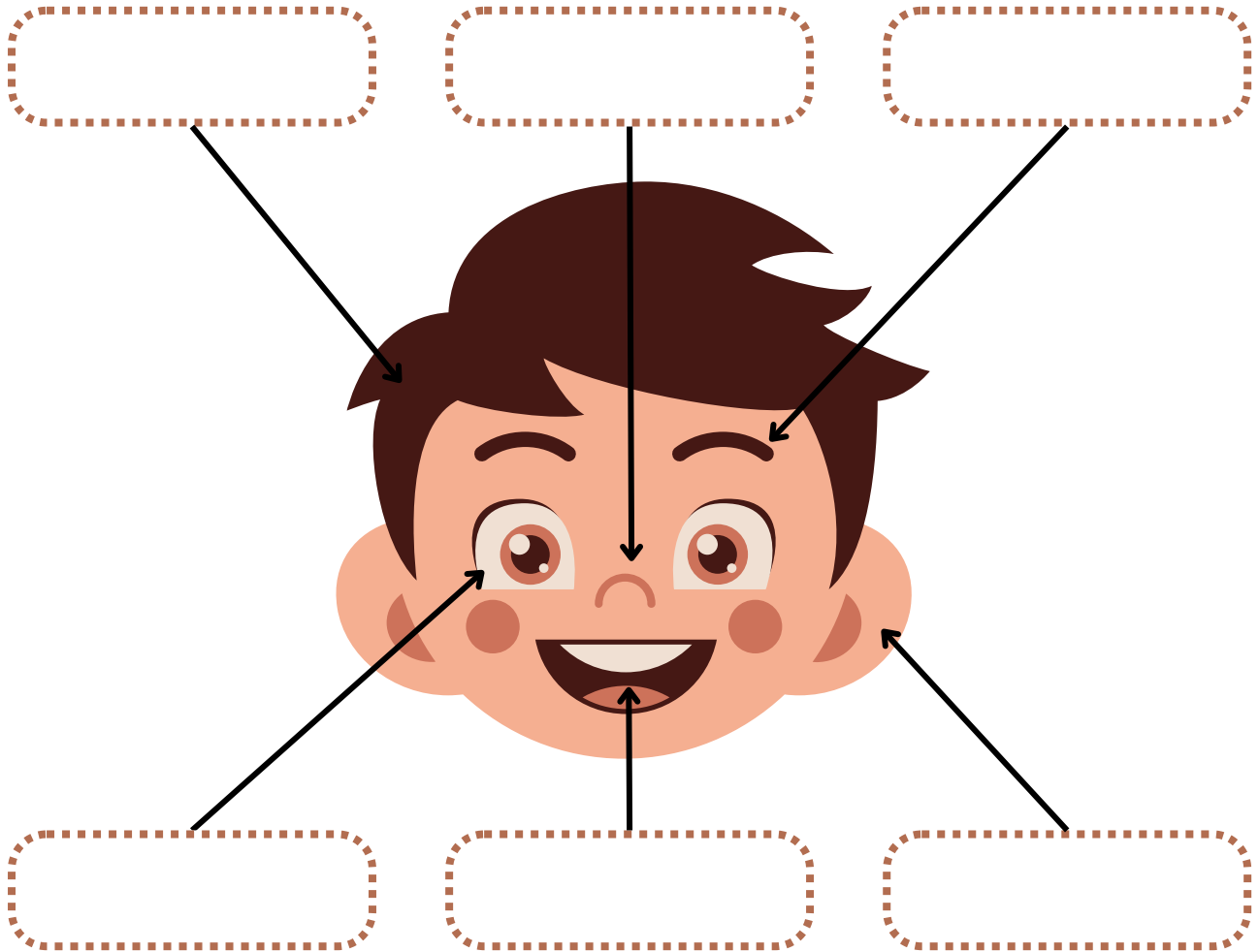


Body Part Names Matching

Name: _____

Date: _____



Mouth

Eye

Hair

Nose

Eyebrow

Ear