

|          |          |                  |          |          |
|----------|----------|------------------|----------|----------|
| <b>B</b> | <b>I</b> | <b>N</b>         | <b>G</b> | <b>O</b> |
| Tongue   | Ankle    | Finger           | Nose     | Knee     |
| Ear      | Toe      | Mouth            | Arm      | Throat   |
| Tooth    | Back     | espacio<br>libre | Hand     | Head     |
| Stomach  | Hip      | Neck             | Foot     | Leg      |
| Chest    | Shoulder | Elbow            | Wrist    | Eye      |

|          |          |                  |          |          |
|----------|----------|------------------|----------|----------|
| <b>B</b> | <b>I</b> | <b>N</b>         | <b>G</b> | <b>O</b> |
| Tooth    | Wrist    | Arm              | Hip      | Ear      |
| Nose     | Head     | Finger           | Leg      | Back     |
| Hand     | Ankle    | espacio<br>libre | Foot     | Neck     |
| Eye      | Tongue   | Elbow            | Stomach  | Chest    |
| Knee     | Hair     | Throat           | Mouth    | Toe      |

|          |          |                  |          |          |
|----------|----------|------------------|----------|----------|
| <b>B</b> | <b>I</b> | <b>N</b>         | <b>G</b> | <b>O</b> |
| Stomach  | Foot     | Tooth            | Eye      | Nose     |
| Shoulder | Throat   | Wrist            | Hip      | Back     |
| Neck     | Arm      | espacio<br>libre | Hand     | Finger   |
| Hair     | Knee     | Chest            | Ankle    | Tongue   |
| Toe      | Mouth    | Head             | Leg      | Elbow    |