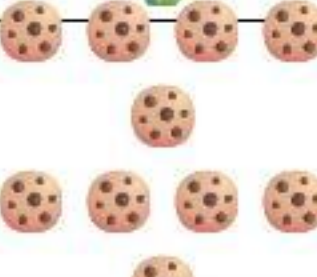


Name: _____

Date: _____

Number Tracing Practice

1		1	1	1	1	1
2		2	2	2	2	2
3		3	3	3	3	3
4		4	4	4	4	4
5		5	5	5	5	5
6		6	6	6	6	6
7		7	7	7	7	7
8		8	8	8	8	8
9		9	9	9	9	9
10		10	10	10	10	10