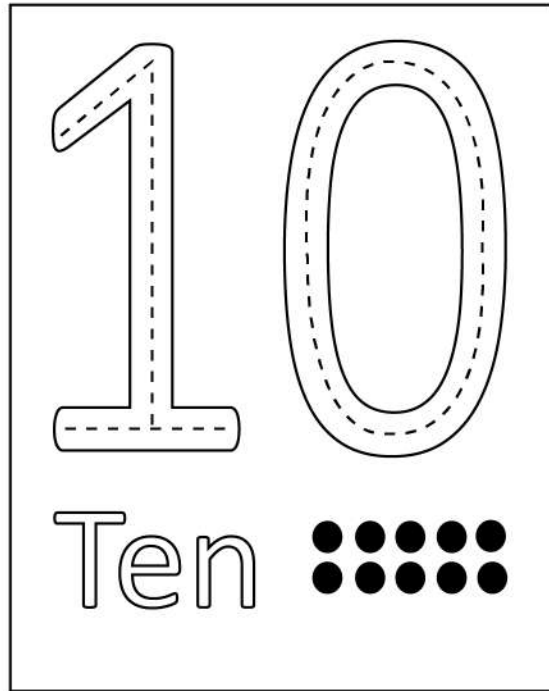


Name: .....

Date: .....

# Tracing & Coloring Number 10



10	10	10	10
10	10	10	10
10	10	10	10

10	9	7	2	10	4	13	3
6	4	10	2	5	7	10	11