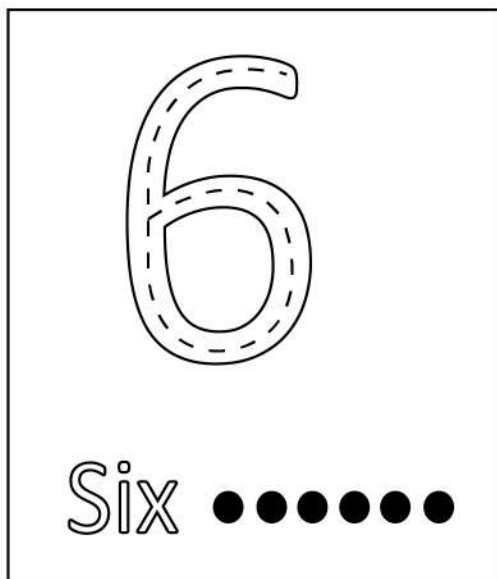


Name:

Date:

Tracing & Coloring Number 6



| | | | | |
|---|---|---|---|---|
| 6 | 6 | 6 | 6 | 6 |
| 6 | 6 | 6 | 6 | 6 |
| 6 | 6 | 6 | 6 | 6 |

