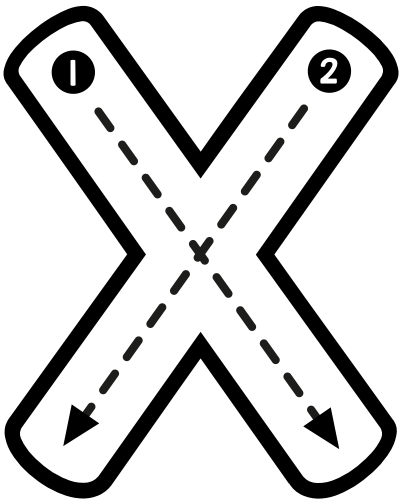
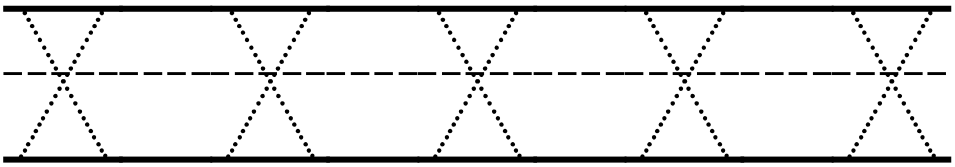
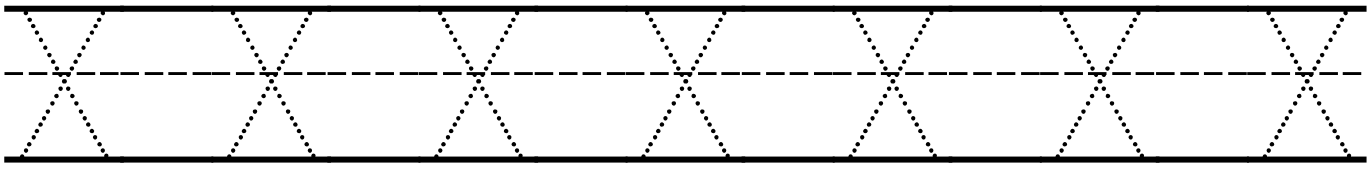
Student Name: _____ Teacher: _____

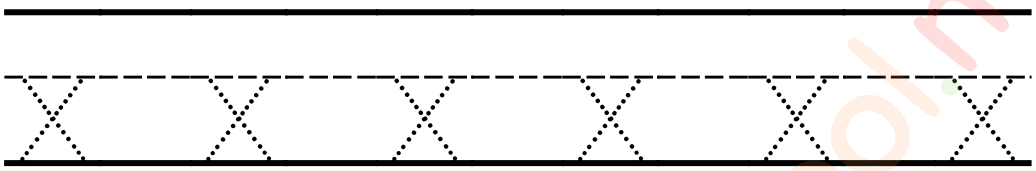
Class: _____ Date: _____

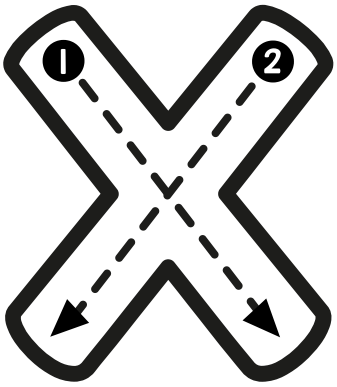
LETTER X

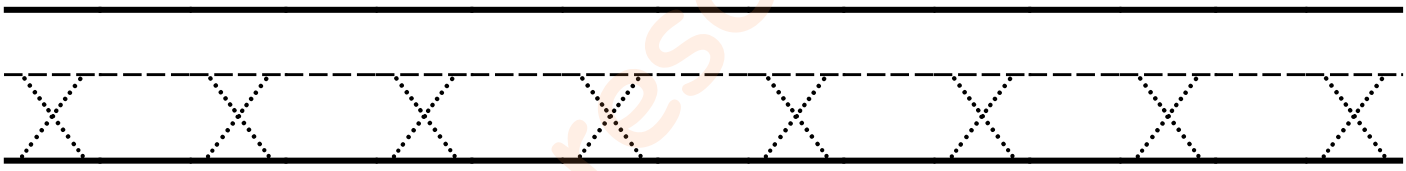


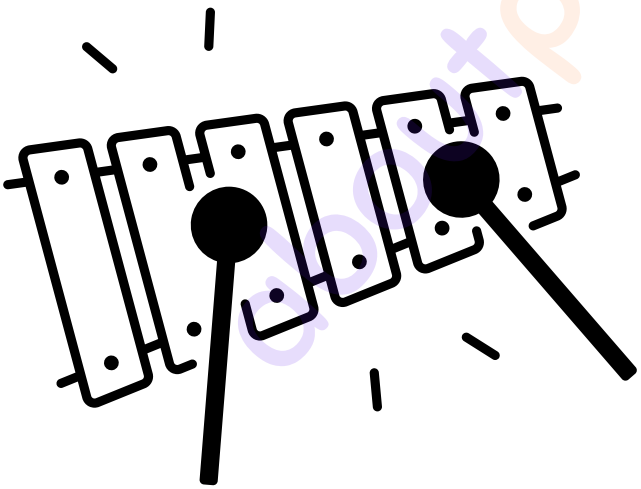












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