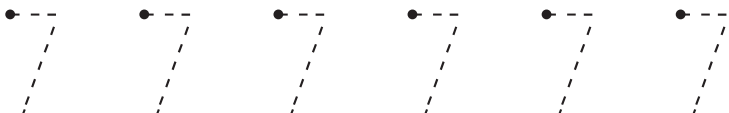


FINE MOTOR SKILLS

Tracing Numbers



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<input type="checkbox"/>	

Name: _____

Age: _____

Grade: _____