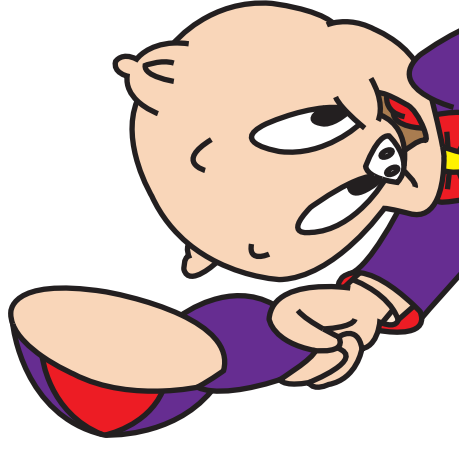


Name: _____

Date: _____



SCS:33

SKIP COUNTING

10

10 20 30 40 50

60 70 80 90 100