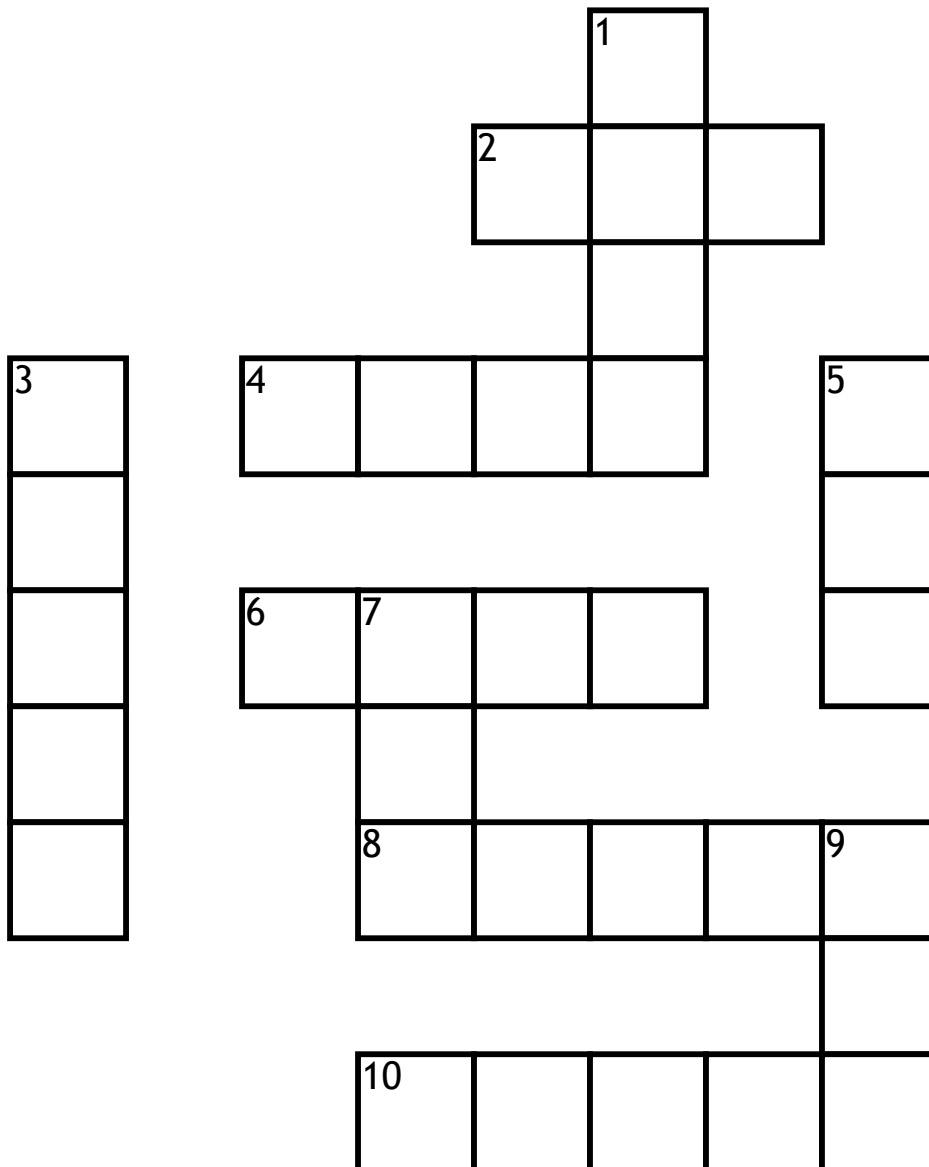


Name: _____

Date: _____

Numbers 1-10



Across

- 2. 6
- 4. 9
- 6. 4
- 8. 8
- 10. 7

Down

- 1. 5
- 3. 3
- 5. 2
- 7. 1
- 9. 10