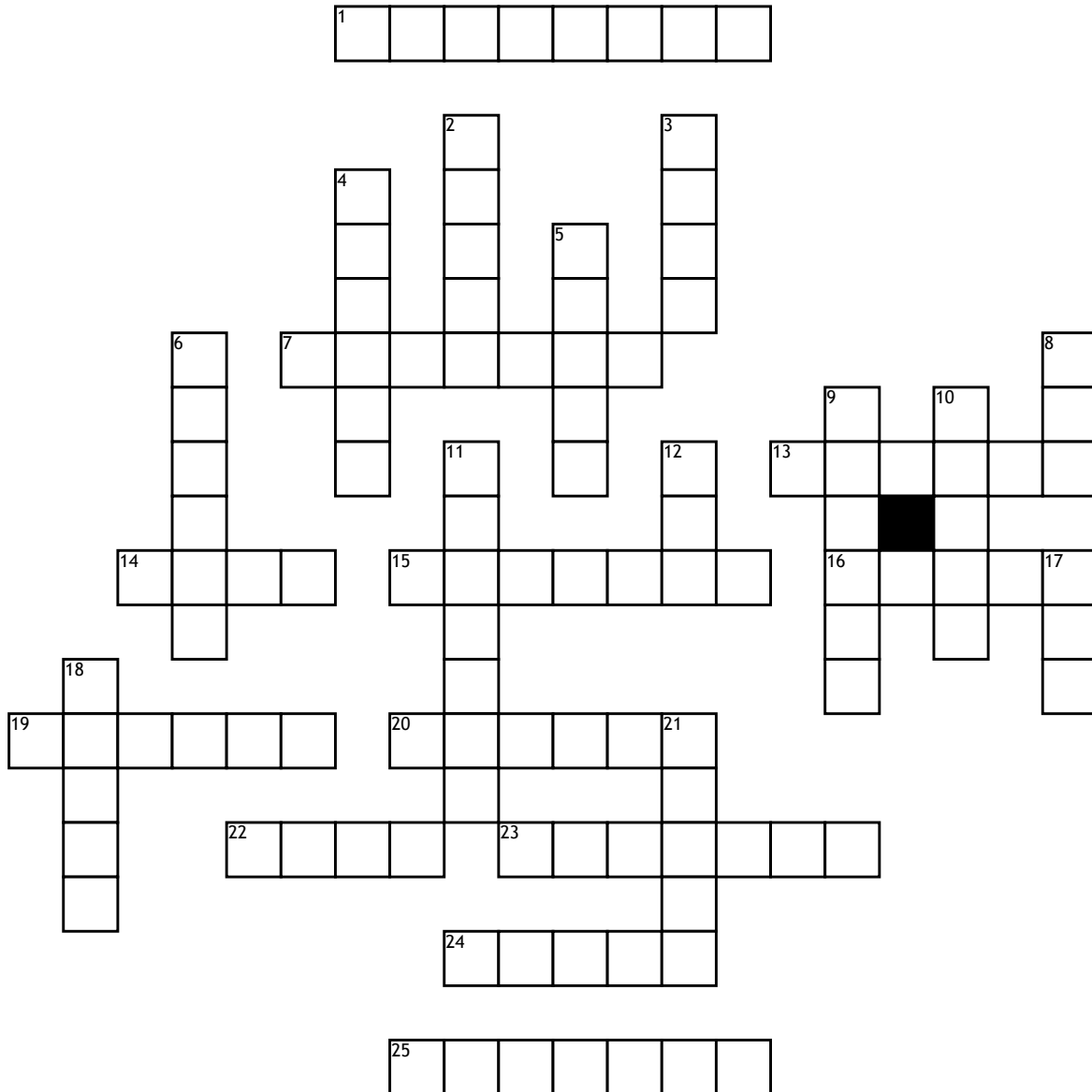


Name: _____

Date: _____

Room 3



Across

- 1. 9
- 7. 20
- 13. 13
- 14. 19
- 15. 6
- 16. 7
- 19. 12
- 20. 22

- 22. 1
 - 23. 22
 - 24. 16
 - 25. 10
- ## Down
- 2. 21
 - 3. 4
 - 4. 2
 - 5. 24

- 6. 5
- 8. 25
- 9. 3
- 10. 15
- 11. 17
- 12. 11
- 17. 8
- 18. 23
- 21. 14