

Name: _____

Date: _____

September Sight words

K O G F D Y M Q I B
O E X E Y O X N E D
O H R A T A S U P O
L T N B X A U X G F
L D I I I H D Y O U
U G I D T R V Q S G
E T J I H O U V N G
E H T S A F E V W U
X A P U I O N Q C F
F C I F V M F A Z P

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