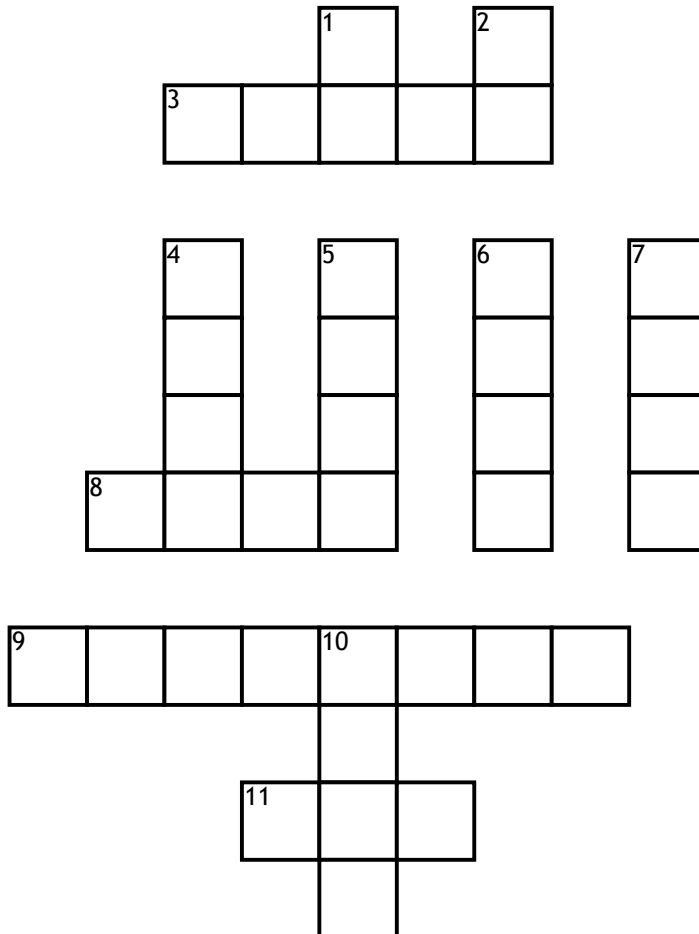


Name: _____

Date: _____

Tattoo



Across

3. 4

8. 5

9. 8

11. 6

Down

1. 2

2. 11

4. 9

5. 1

6. 3

7. 7

10. 10