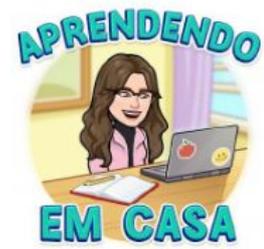


DATA: ____/____/2021

LIGUE A LETRA AO SOM QUE ELA FAZ.



<input type="checkbox"/>	A	<input type="checkbox"/>
<input type="checkbox"/>	B	<input type="checkbox"/>
<input type="checkbox"/>	C	<input type="checkbox"/>
<input type="checkbox"/>	D	<input type="checkbox"/>
<input type="checkbox"/>	E	<input type="checkbox"/>

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>