

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

PERIOD: \_\_\_\_\_

**SPELLING # 27 – ALPHABETIZE**

Alphabetize words by the first, second, or third letter **WHEN NEEDED**. Write the words next to the appropriate letter. Mark all empty letters with a **ZERO**.

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