

Name:

Date:

Fill in the boxes.

orange

brown

black

pink

red

yellow

white

gray

green

blue





•

orange

•



•

purple

•



•

blue

•



•

black

•



•

red

•



•

yellow

•



•

green

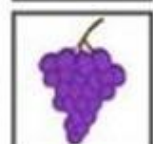
•



•

pink

•



•

gray

•



•

brown

•

