

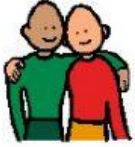
Name \_\_\_\_\_

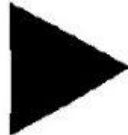
Tell what you do or do not like about Fall.

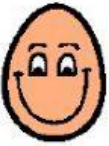
|                                                                                        |  |  |
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| I<br> |  |  |
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| like<br> | don't like<br> | fall<br> |
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|-----------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--|----------------|--------------------------------------------------------------------------------------------|--|
| One<br><b>1</b> | thing<br> | I<br> |  | is<br><b>=</b> | the<br> |  |
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| like<br> | don't like<br> | leaves changing.<br> | windy weather<br> | start of school<br> | new friends.<br> |
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| one<br><b>1</b> | thing<br> | I<br> |  | is<br><b>=</b> | the<br> |  |
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| like<br> | don't like<br> | leaves changing.<br> | windy weather<br> | start of school<br> | new friends.<br> |
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