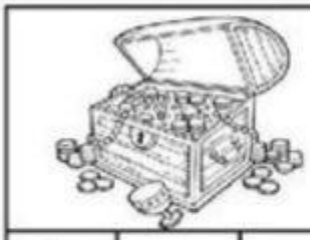
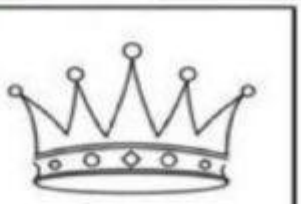
Nombre:_____ Fecha_____

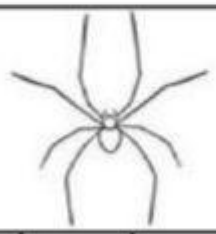
na	re	si



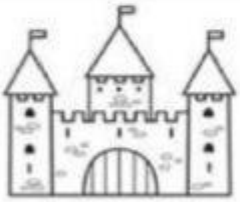
te	ro	so



ro	na	co



a	ña	ra



ti	cas	llo

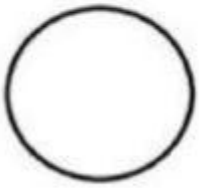
col	ra	ca

lla	bo	ce

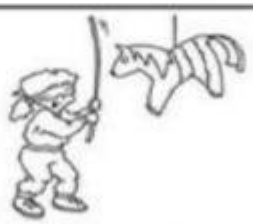
na	ga	lli

nó	mi	do

ga	re	lo



lo	cir	cu



ta	pi	ña