

1 Look, circle, and copy.



- | | |
|-----------------------|-------|
| ① cough / sore throat | _____ |
| ② cut / bruise | _____ |
| ③ cold / headache | _____ |
| ④ sore throat / cut | _____ |
| ⑤ cough / cold | _____ |
| ⑥ stomachache / cut | _____ |
| ⑦ cold / toothache | _____ |
| ⑧ stomachache / cough | _____ |

2 Listen and number.



3 Look and write.

I have

a bruise a toothache a cold a headache



I have _____






