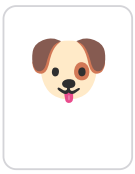
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Name: _____ Date: _____

A Letter Revision Practice

Revise D.

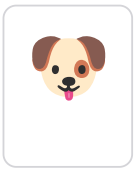


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