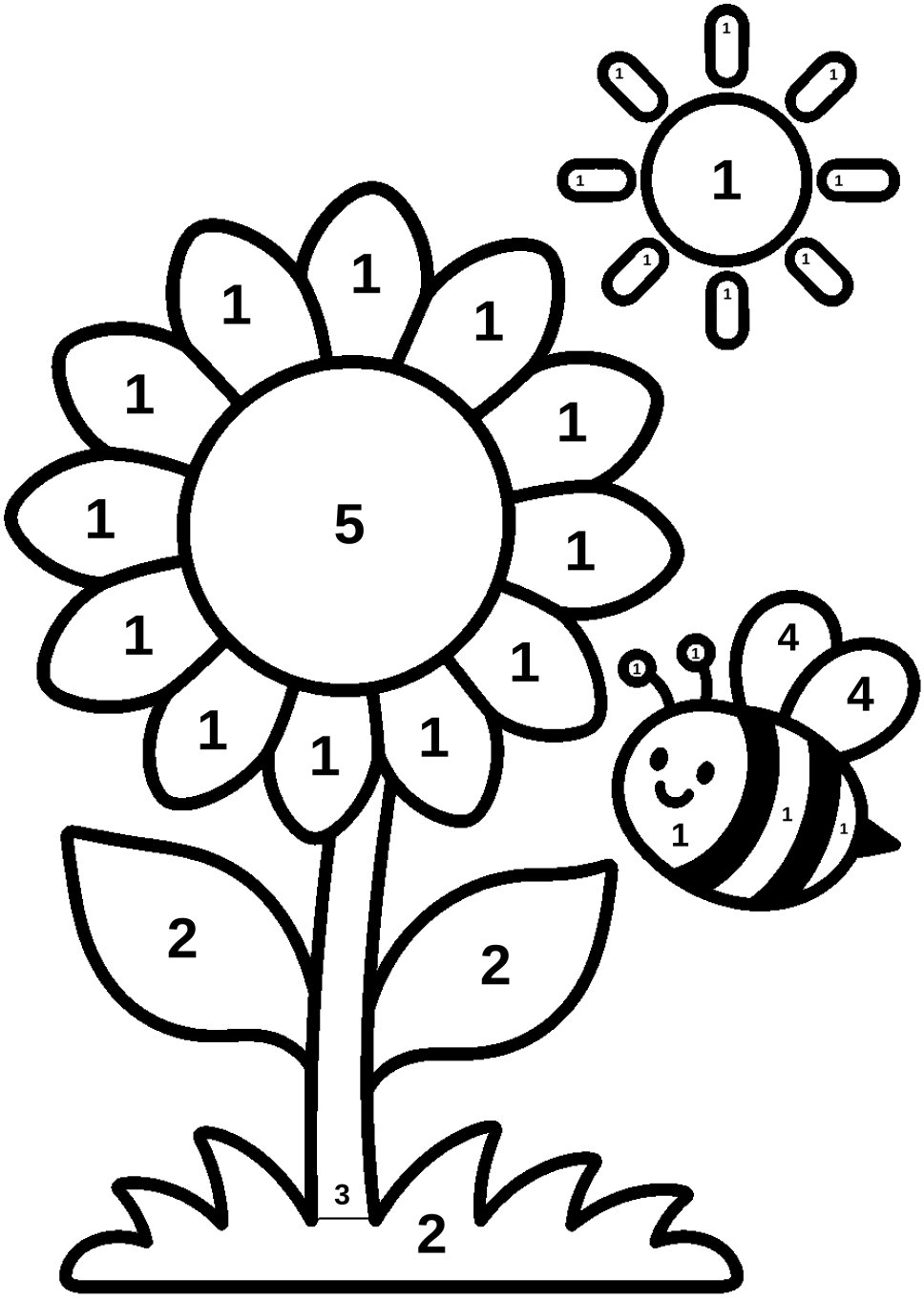
Name: _____ Date: _____



1	yellow	2	light green	3	green	4	light blue	5	brown

