

Name: _____ Date: _____ Score: _____

Counting Grid - fill in the blanks

| | | | | | | | | | |
|----|----|----|----|----|----|----|----|----|----|
| 1 | | 3 | 4 | | 6 | 7 | 8 | | 10 |
| 11 | 12 | 13 | | | 16 | 17 | 18 | | |
| 21 | 22 | 23 | | 25 | 26 | 27 | 28 | | |
| 31 | 32 | 33 | | 35 | 36 | 37 | | 39 | 40 |
| 41 | | 43 | | 45 | 46 | 47 | | 49 | 50 |
| 51 | | 53 | 54 | 55 | 56 | 57 | | | 60 |
| 61 | 62 | | 64 | 65 | 66 | 67 | | 69 | 70 |
| | 72 | 73 | | | 76 | | | 79 | |
| | 82 | 83 | | 85 | 86 | 87 | 88 | 89 | |
| | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | |