

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Score: \_\_\_\_\_

### Skip counting

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

## Answers

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern:

Fill in the pattern: