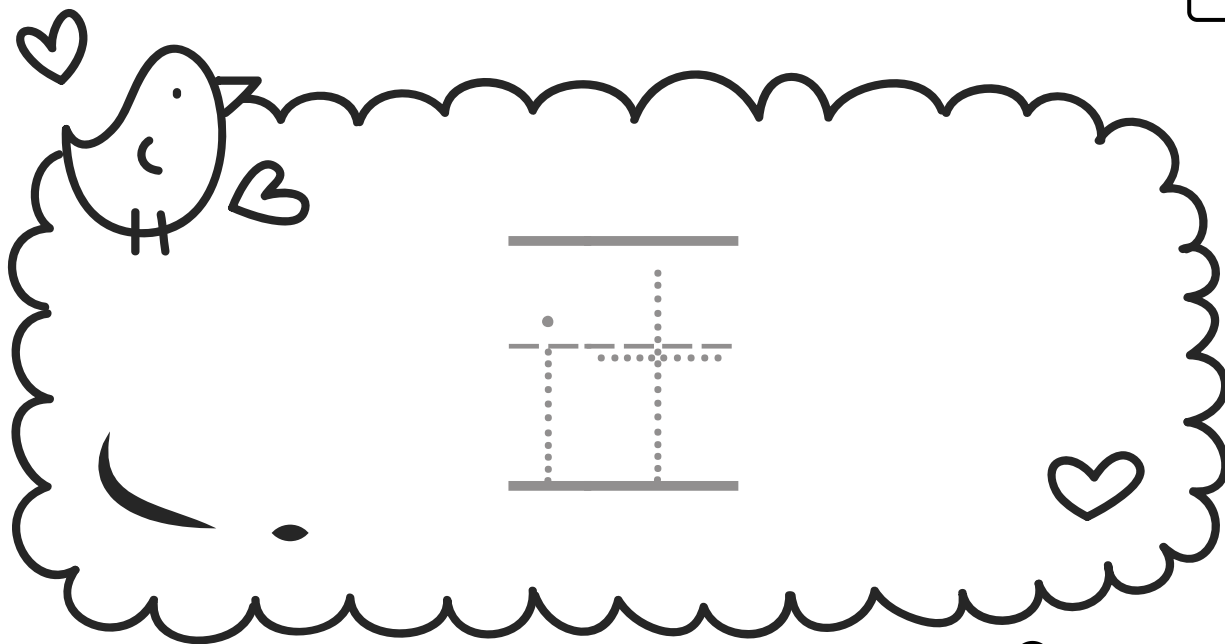


Name: _____

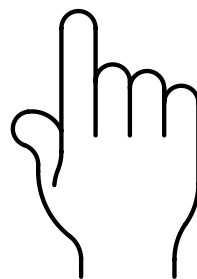
Date: _____

Sight Word

it



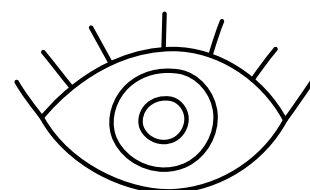
We touch with



We smell with



We see with



We hear with



We taste with

