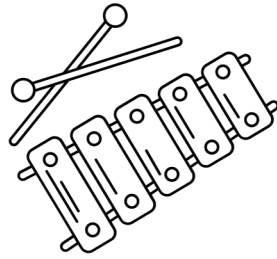


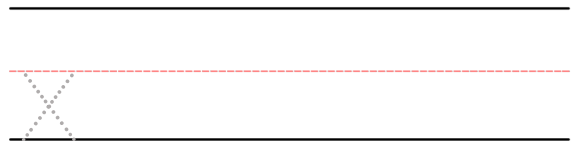
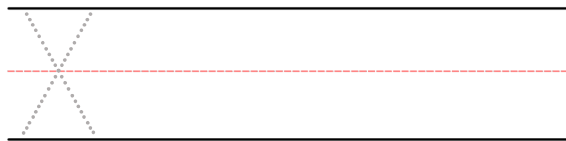
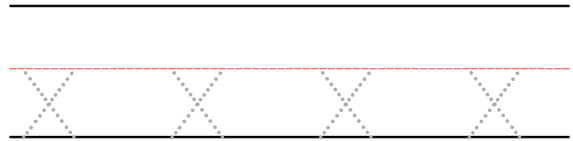
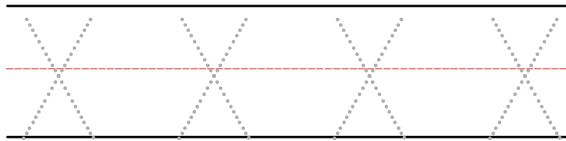
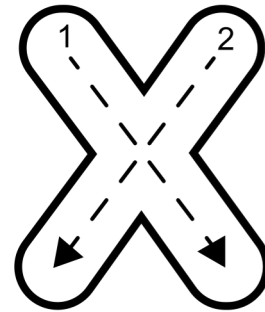
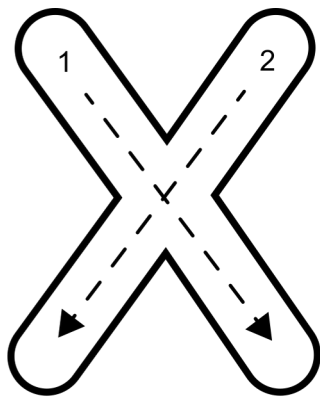
Name _____

Date _____

Letter X Tracing Practice



Xylophone



Blank handwriting lines for independent practice of uppercase X.

Blank handwriting lines for independent practice of lowercase x.