Name: _____ Date: _____

Stage 9: Hundreds

Dot Cards:

Number Bars:

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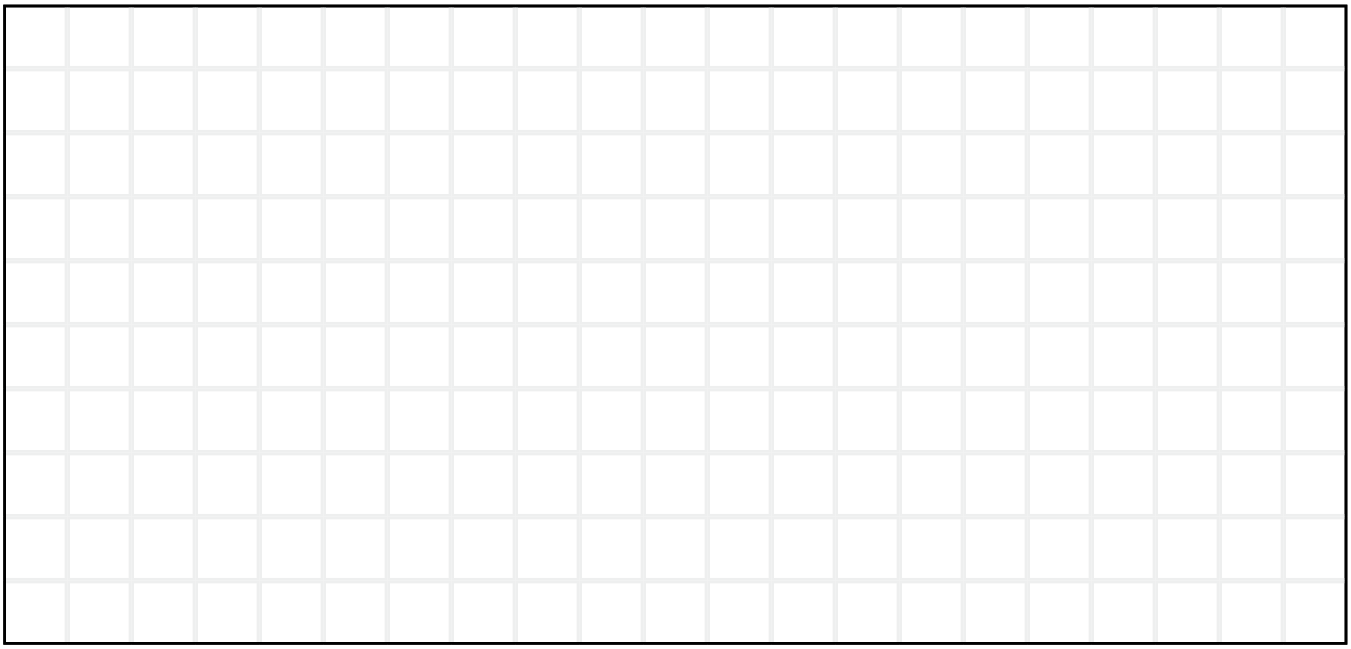
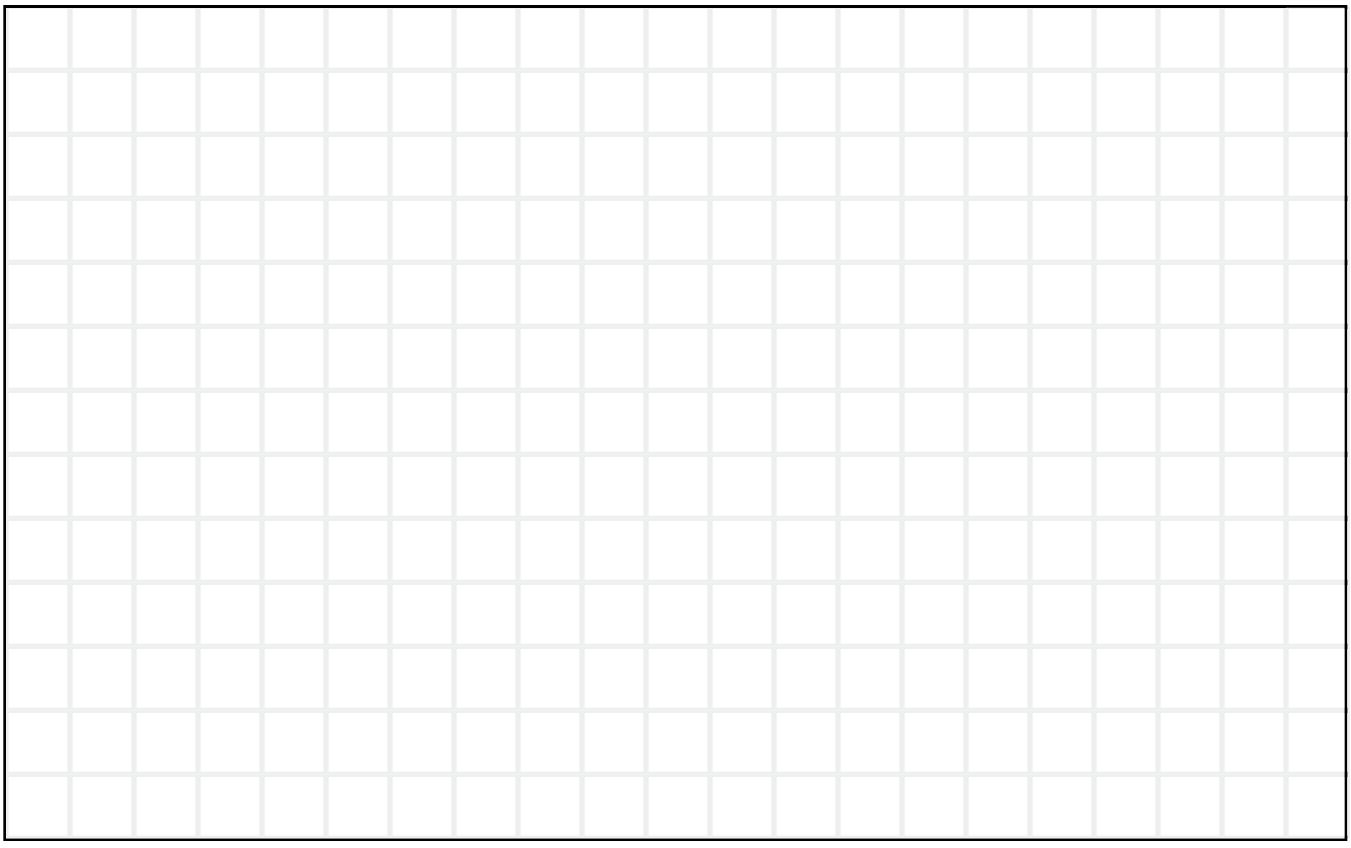
Name: _____ Date: _____

Checkpoint

Number Line:



MY OWN:



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