

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_ : \_\_\_\_ - \_\_\_\_ : \_\_\_\_

Fill in the blanks with “at”, “on” or “in”.

1. We open ..... 9 o'clock.
2. Let's meet ..... 12:30 pm.
3. I will see you ..... an hour.
4. My apartment is ..... the seventh floor of this building.
5. I am not very good ..... dancing.
6. I saw Sam ..... a concert last Saturday.
7. How many chairs are there ..... the room?
8. My house is ..... the corner of the street.
9. I live ..... the top floor.