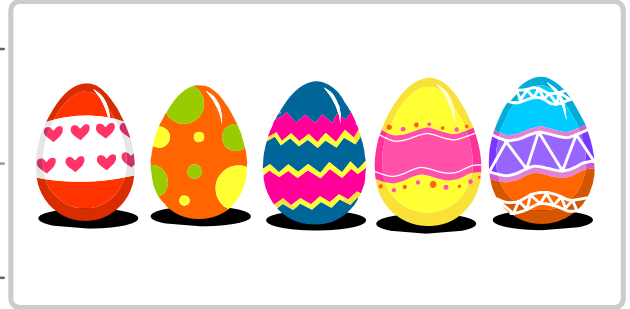
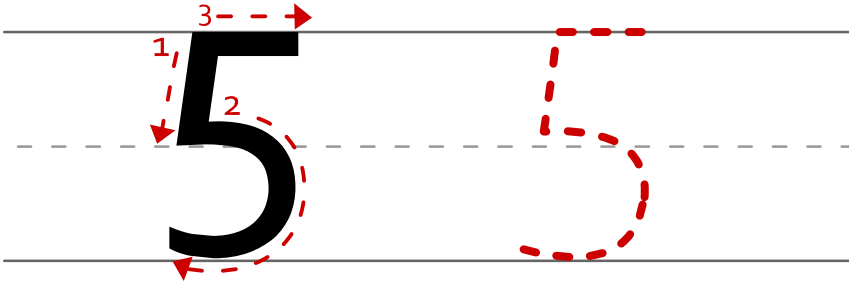


Name: \_\_\_\_\_

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

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

Write the number 5.



Four sets of handwriting lines for practice, each consisting of a solid top line, a dashed middle line, and a solid bottom line.