

Name: _____

Date: _____

SKIP COUNTING

Count by the number shown. Fill in the missing numbers.

Count by 5s

5		15	20		30
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Count by 2s

14		18	20	22	
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Count by 5s

25		35	40		50
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Count by 10s

70		90	100		120
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Count by 5s

20		30	35	40	
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