

Name: _____

Date: _____

SKIP COUNTING

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

Count by 5s

45		55		65	70
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Count by 10s

60		80	90	100	
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Count by 10s

90	100		120		140
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Count by 5s

20	25		35		45
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Count by 10s

40	50		70	80	
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