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

**4 times!**

Write your spelling words in each of the 4 different ways.

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| **Writing Pencil** | **Coloured Pencil** | **Felt-tip Pen** | **Green Editing Pen** |
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