

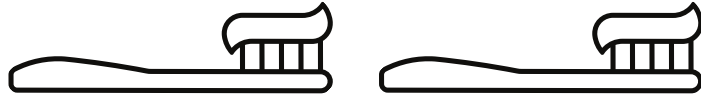
Name: _____

Date: _____

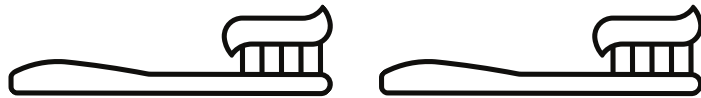
I BRUSH MY TEETH

I brush my teeth every day, in the morning and the evening.
So, I color a toothbrush twice a day.

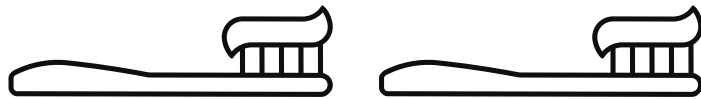
MONDAY



TUESDAY



WEDNESDAY



THURSDAY



FRIDAY



SATURDAY



SUNDAY

