Name: _____ Test: _____ Date: _____

ID Number

mark only one bubble in each digit group

1st digit	0 5	1 6	2 7	3 8	4 9	
2nd digit	0 5	1 6	2 7	3 8	4 9	
3rd digit	0 5	1 6	2 7	3 8	4 9	
4th digit	0 5	1 6	2 7	3 8	4 9	
5th digit	0 5	1 6	2 7	3 8	4 9	
6th digit	0 5	1 6	2 7	3 8	4 9	
7th digit	0 5	1 6	2 7	3 8	4 9	

1	A	B	C	D	E	F
2	A	B	C	D	E	F
3	A	B	C	D	E	F
4	A	B	C	D	E	F
5	A	B	C	D	E	F
6	A	B	C	D	E	F
7	A	B	C	D	E	F
8	A	B	C	D	E	F
9	A	B	C	D	E	F
10	A	B	C	D	E	F
11	A	B	C	D	E	F
12	A	B	C	D	E	F
13	A	B	C	D	E	F
14	A	B	C	D	E	F
15	A	B	C	D	E	F
16	A	B	C	D	E	F
17	A	B	C	D	E	F
18	A	B	C	D	E	F
19	A	B	C	D	E	F
20	A	B	C	D	E	F
21	A	B	C	D	E	F
22	A	B	C	D	E	F
23	A	B	C	D	E	F
24	A	B	C	D	E	F
25	A	B	C	D	E	F
26	A	B	C	D	E	F
27	A	B	C	D	E	F
28	A	B	C	D	E	F
29	A	B	C	D	E	F
30	A	B	C	D	E	F
31	A	B	C	D	E	F
32	A	B	C	D	E	F
33	A	B	C	D	E	F
34	A	B	C	D	E	F
35	A	B	C	D	E	F
36	A	B	C	D	E	F
37	A	B	C	D	E	F
38	A	B	C	D	E	F
39	A	B	C	D	E	F
40	A	B	C	D	E	F
41	A	B	C	D	E	F
42	A	B	C	D	E	F
43	A	B	C	D	E	F
44	A	B	C	D	E	F
45	A	B	C	D	E	F
46	A	B	C	D	E	F
47	A	B	C	D	E	F
48	A	B	C	D	E	F

Form number 48070100

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Feed this end into scanner slot with printed side facing collection tray.

Name: _____ Test: _____ Date: _____

ID Number

mark only one bubble in each digit group

1st digit	0 5	1 6	2 7	3 8	4 9	
2nd digit	0 5	1 6	2 7	3 8	4 9	
3rd digit	0 5	1 6	2 7	3 8	4 9	
4th digit	0 5	1 6	2 7	3 8	4 9	
5th digit	0 5	1 6	2 7	3 8	4 9	
6th digit	0 5	1 6	2 7	3 8	4 9	
7th digit	0 5	1 6	2 7	3 8	4 9	

1	A	B	C	D	E	F
2	A	B	C	D	E	F
3	A	B	C	D	E	F
4	A	B	C	D	E	F
5	A	B	C	D	E	F
6	A	B	C	D	E	F
7	A	B	C	D	E	F
8	A	B	C	D	E	F
9	A	B	C	D	E	F
10	A	B	C	D	E	F
11	A	B	C	D	E	F
12	A	B	C	D	E	F
13	A	B	C	D	E	F
14	A	B	C	D	E	F
15	A	B	C	D	E	F
16	A	B	C	D	E	F
17	A	B	C	D	E	F
18	A	B	C	D	E	F
19	A	B	C	D	E	F
20	A	B	C	D	E	F
21	A	B	C	D	E	F
22	A	B	C	D	E	F
23	A	B	C	D	E	F
24	A	B	C	D	E	F
25	A	B	C	D	E	F
26	A	B	C	D	E	F
27	A	B	C	D	E	F
28	A	B	C	D	E	F
29	A	B	C	D	E	F
30	A	B	C	D	E	F
31	A	B	C	D	E	F
32	A	B	C	D	E	F
33	A	B	C	D	E	F
34	A	B	C	D	E	F
35	A	B	C	D	E	F
36	A	B	C	D	E	F
37	A	B	C	D	E	F
38	A	B	C	D	E	F
39	A	B	C	D	E	F
40	A	B	C	D	E	F
41	A	B	C	D	E	F
42	A	B	C	D	E	F
43	A	B	C	D	E	F
44	A	B	C	D	E	F
45	A	B	C	D	E	F
46	A	B	C	D	E	F
47	A	B	C	D	E	F
48	A	B	C	D	E	F

Form number 48070100

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Feed this end into scanner slot with printed side facing collection tray.