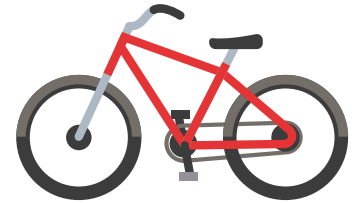
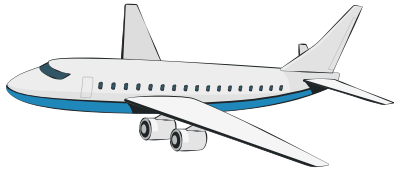


Name : _____

Date : _____

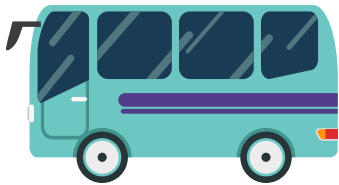
Name the Transportation



a. _____

b. _____

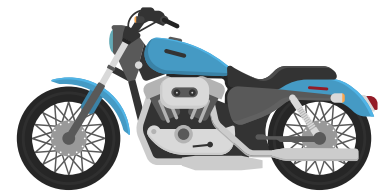
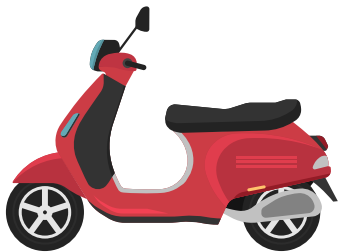
c. _____



d. _____

e. _____

f. _____



g. _____

h. _____

i. _____