Name: _____

Date: _____ Score: _____

7 -4

10 - 4 7 <u>-1</u>

5 -3 10 <u>-10</u>

6 -6

10 - 7

8 <u>-3</u>

7 -4

4 <u>-1</u>

9 -4

6 -5