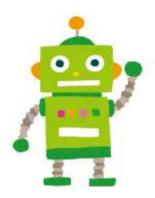


Name: _____

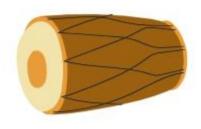
Date:

Can you sense it?

Circle the items you can smell.





















Name: _____

Date:

Answers





