

Bottom-Up 0 to 99 Chart Partially Filled (D)

Name: _____

Date: _____

Score: _____

Fill in the blanks.

| | | | | | | | | | |
|----|----|----|----|----|----|----|----|----|----|
| | | | | | 95 | 96 | 97 | 98 | |
| | | | | | | 86 | | | |
| 70 | | | 73 | 74 | | | | | |
| | | | 63 | 64 | | | | | |
| 50 | | | | | | | | | |
| | | 42 | | | | | 47 | | |
| | | | | | 35 | 36 | | | |
| | 21 | | | | | | | 28 | |
| 10 | | | | | | | | | 19 |
| 0 | 1 | | | | 5 | | | | |