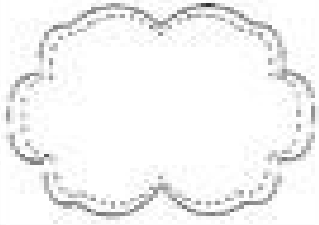


Name: \_\_\_\_\_ Date: \_\_\_\_\_

Drew had 20 dollars. He spent 7 dollars on a toy. How many dollars does he have left?

<p>Addition or subtraction?</p> <p>+</p> <p>-</p>	<p>Use a tens frame:</p> <table border="1" data-bbox="917 604 1364 840"><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr></table>																					
<p>Draw a picture:</p>	<p>I can solve using my fingers</p> <table border="1" data-bbox="845 996 1045 1108"><tr><td>Yes</td><td><input type="checkbox"/></td></tr><tr><td>No</td><td><input type="checkbox"/></td></tr></table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<p>I can solve with objects</p> <table border="1" data-bbox="1157 996 1356 1108"><tr><td>Yes</td><td><input type="checkbox"/></td></tr><tr><td>No</td><td><input type="checkbox"/></td></tr></table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>												
Yes	<input type="checkbox"/>																					
No	<input type="checkbox"/>																					
Yes	<input type="checkbox"/>																					
No	<input type="checkbox"/>																					
<p>Write an equation:</p>																						
<p>Use a number line:</p> <table border="1" data-bbox="207 1388 1013 1489"><tr><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr></table>	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	<p>ANSWER</p> 
0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20		