

Name : _____ Score : _____

Teacher : _____ Date : _____

Fill in the Missing Elements in the Table

Integer	One Less Than	One More Than
0	-1	1
8	7	9
4	3	5
7	6	8
2	1	3
-9	-10	-8
5	4	6
6	5	7
-8	-9	-7
1	0	2
9	8	10
3	2	4
-5	-6	-4
6	5	7
-6	-7	-5
-3	-4	-2
-7	-8	-6
-1	-2	0
-2	-3	-1
-4	-5	-3

