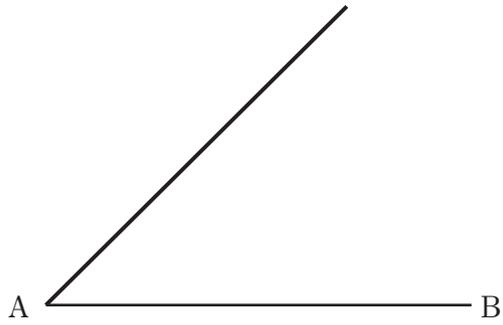


<b>1</b>	(1)	871
	(2)	5032
	(3)	280
	(4)	893
	(5)	9
	(6)	32
	(7)	12
	(8)	27
	(9)	5.12
	(10)	2.78

<b>1</b>	(11)	$\frac{4}{5}$
	(12)	$\frac{7}{8}$
<b>2</b>	(13)	435 (seconds)
	(14)	6000 (kg)
	(15)	34 (m <sup>2</sup> )
<b>3</b>	(16)	1 (hours) 45 (minutes)
	(17)	1 (hours) 10 (minutes)
	(18)	4 : 45 pm
<b>4</b>	(19)	18 (cm)
	(20)	12 (cm)

Please fill in the box below.

<p>Put your sticker with the bar code here.</p>	Name		Examinee Number	
	Gender (Check the appropriate box)		Age	
	Male <input type="checkbox"/>		Female <input type="checkbox"/>	
	Date of Birth (year)		(month)	(day)
	Address			
	30			

5	(21)	G	
	(22)	$2\frac{1}{7}\left(\frac{15}{7}\right)$ m	
	(23)	$\frac{3}{7}$ (m)	
6	(24)	7	
	(25)	19	
	(26)	①	
7	(27)	$115^\circ$	
	(28)		
8	(29)	<sup>A</sup> $1 + 3 + 5 + 7 + 9$	<sup>B</sup> $5 \times 5$
	(30)	9	