

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

# Personal Hygiene

1. OAPS \_\_\_\_\_
2. OTUBSHOVRT \_\_\_\_\_
3. HHTOCWALS \_\_\_\_\_
4. SFOSL \_\_\_\_\_
5. CAHEGN UYOR HEOTCLS \_\_\_\_\_
6. HSWA ROUY RHIA \_\_\_\_\_
7. OTTAOESPHT \_\_\_\_\_
8. ETICVIAS \_\_\_\_\_
9. NAORODTED \_\_\_\_\_
10. OLTINO \_\_\_\_\_
11. WSEORH LEG \_\_\_\_\_
12. ESHWOR \_\_\_\_\_
13. WAHS OYRU FACE \_\_\_\_\_
14. RROMRI \_\_\_\_\_
15. OTHBRMOA \_\_\_\_\_