

Name: _____

Date: _____

SPELLING ABBR.

- | | |
|------------|-----------------------------|
| 1. P.O. | A. MONTANA |
| 2. R.F.D. | B. SENIOR |
| 3. CO. | C. RURAL FREE DELIVERY |
| 4. DEPT. | D. POST OFFICE |
| 5. BLDG. | E. ALASKA |
| 6. JR. | F. COLORADO |
| 7. SR. | G. MAINE |
| 8. GOVT. | H. TEXAS |
| 9. M.D. | I. JUNIOR |
| 10. D.D.S. | J. DOCTOR OF DENTAL SURGERY |
| 11. ME | K. MEDICAL DOCTOR |
| 12. AK | L. CALIFORNIA |
| 13. CA | M. DEPARTMENT |
| 14. CO | N. MASSACHUSETTS |
| 15. NV | O. DISTRICT OF COLUMBIA |
| 16. MD | P. COMPANY |
| 17. MA | Q. NEVADA |
| 18. TX | R. GOVERNMENT |
| 19. MT | S. MARYLAND |
| 20. D.C. | T. BUILDING |