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

Write a number on the line that makes the statement in the box true.

66 > \_\_\_\_\_\_\_

49 < \_\_\_\_\_\_\_

\_\_\_\_\_\_\_ > 74

\_\_\_\_\_\_\_ > 74

49 < \_\_\_\_\_\_\_

66 > \_\_\_\_\_\_\_

Choose **one** box. Use pictures or words to show how you know the box is correct.