

Name: _____ Date: _____

Elements Practice 1 – 10

Complete the following:

	ELEMENT NAME	ELEMENT SYMBOL
1	Helium	
2	Beryllium	
3	Carbon	
4	Oxygen	
5	Neon	

	ELEMENT NAME	ELEMENT SYMBOL
6		H
7		Li
8		B
9		N
10		F

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