

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

Elements Practice 11 – 20

Complete the following:

	ELEMENT NAME	ELEMENT SYMBOL
1	Magnesium	
2	Silicon	
3	Sulfur	
4	Argon	
5	Calcium	

	ELEMENT NAME	ELEMENT SYMBOL
6		Na
7		Al
8		P
9		Cl
10		K

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