

Name - _____

Start time - ___ : ___

End time - ___ : ___

Fill in the blanks with an appropriate article.

1. _____ car

11. _____ pot

2. _____ table

12. _____ donut

3. _____ house

13. _____ note

4. _____ dog

14. _____ kite

5. _____ hat

15. _____ nose

6. _____ ear

16. _____ ship

7. _____ sun

17. _____ cake

8. _____ book

18. _____ orange

9. _____ bible

19. _____ tree

10. _____ umbrella

20. _____ candy

a b c d e f g h i j k l m n o p q r s t u v w x y z