Name:

Date: _____

Subtraction

Add the numbers that are signed below and write the answer in the answer box.

Question

Answer

1.





1

2.





2

3.





3

4.





4

5.





1

6.





3

7.





Name:

Date: _____

Subtraction

Add the numbers that are signed below and write the answer in the answer box.

Question

Answer

1.





0

2.





5

3.





2

4.





8

5.





10

6.





1

7.





Add the numbers that are signed below and write the answer in the answer box.

Question

































Add the numbers that are signed below and write the answer in the answer box.

Question

Answer

_



4

2.





0

3.





3

4.





1

5.





0

6.





1

7.





Add the numbers that are signed below and write the answer in the answer box.

Question























Add the numbers that are signed below and write the answer in the answer box.

Question

Answer

1.



9

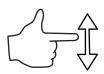
2.





9

3.





8

4.





7

5.





9

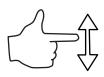
6.





17

7.





Add the numbers that are signed below and write the answer in the answer box.

Question





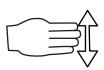








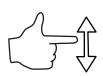














Add the numbers that are signed below and write the answer in the answer box.

Question



























