

Name _____

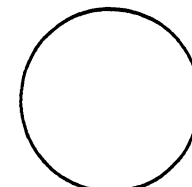
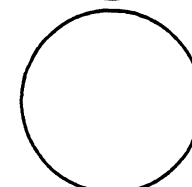
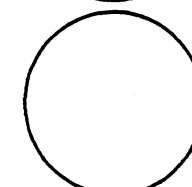
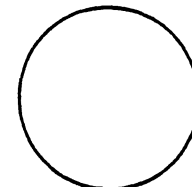
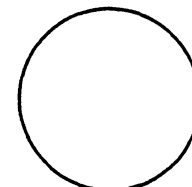
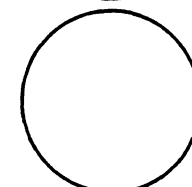
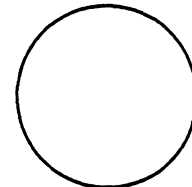
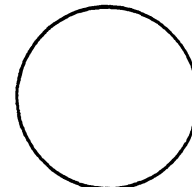
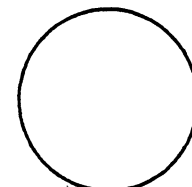
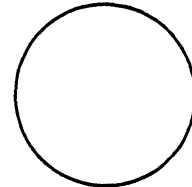
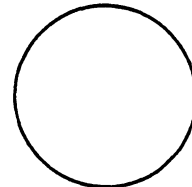
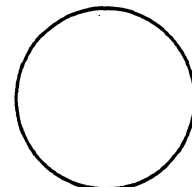
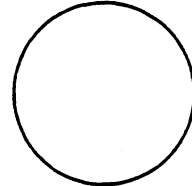
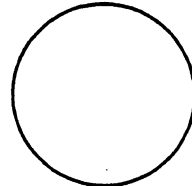
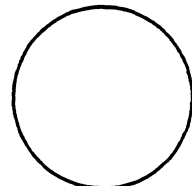
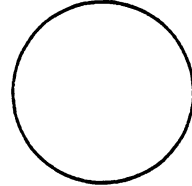
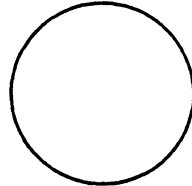
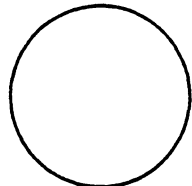
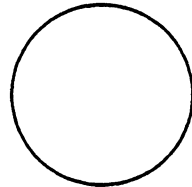
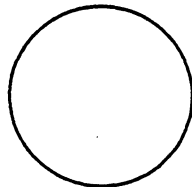
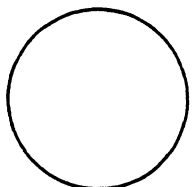
Hour _____

GRADATIONS OF INTENSITY

Green

Purple

Orange



Red

Yellow

Blue