

Name: _____

Date: _____

Skip Counting

Fill in the squares by counting by 3 starting from 3.

| | | | | | | | |
|-----|--|-----|----|----|----|----|-----|
| 3 | | | 12 | | | | |
| | | | | 39 | | | |
| | | 57 | | | | | |
| | | | | | 90 | 93 | |
| | | | | | | | |
| 123 | | | | | | | |
| | | 153 | | | | | |
| | | | | | | | 192 |

