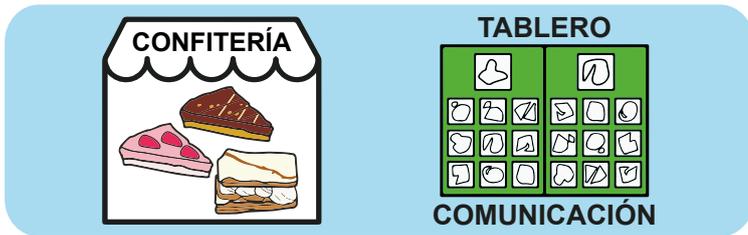
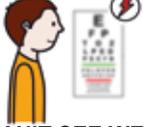
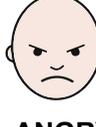
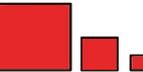
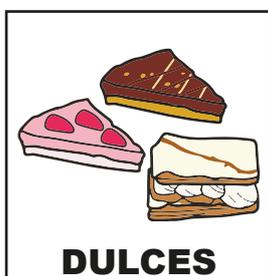
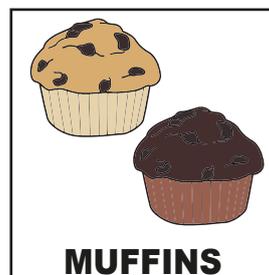
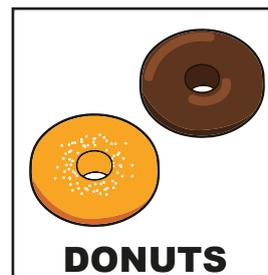
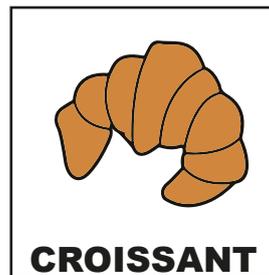
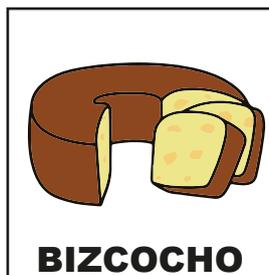


NOS COMUNICAMOS



<p>SÍ / BIEN</p>  <p>YES / GOOD</p>	<p>NO / MAL</p>  <p>NO / WRONG</p>	<p>NO LO ENTIENDO</p>  <p>I DON'T UNDERSTAND</p>	<p>HÁBLEME DESPACIO</p>  <p>SPEAK SLOWLY</p>	<p>GRACIAS</p>  <p>THANK YOU</p>	<p>PERDÓN</p>  <p>I AM SORRY</p>
<p>NO VEO BIEN</p>  <p>I CAN'T SEE WELL</p>	<p>SOY SORDO/A</p>  <p>I AM DEAF</p>	<p>ME CUESTA ANDAR</p>  <p>I CAN'T WALK WELL</p>	<p>NO SÉ LEER</p>  <p>I CAN'T READ</p>	<p>CONTENTO/A</p>  <p>HAPPY</p>	<p>ENFADADO/A</p>  <p>ANGRY</p>
<p>MÁS</p>  <p>MORE</p>	<p>MENOS</p>  <p>LESS</p>	<p>TAMAÑOS</p>  <p>SIZES</p>	<p>QUIERO OTRA COSA</p>  <p>I WANT ANOTHER THING</p>	<p>ESTÁ EN MAL ESTADO</p>  <p>THE FOOD IS EXPIRED</p>	



¿CUANTO ES? HOW MUCH IS IT?	QUIERO PAGAR I WANT TO PAY	EFFECTIVO CASH	TARJETA DE CRÉDITO CREDIT CARD	FACTURA INVOICE	RECLAMACIÓN COMPLAINT
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DINERO MONEY

1	2	3	4	5	6	7	8	9	0
A	B	C	D	E	F	G	H	I	J
K	L	M	N	Ñ	O	P	Q	R	S
T	U	V	W	X	Y	Z	¿?	ESPACIO	

LUNES L T X J V S D MONDAY	MARTES L M X J V S D TUESDAY	MIÉRCOLES L M X J V S D WEDNESDAY	JUEVES L M X J V S D THURSDAY	VIERNES L M X J V S D FRIDAY	SÁBADO L M X J V S D SATURDAY	DOMINGO L M X J V S D SUNDAY
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TENGO ALERGIA A: I'M ALLERGIC TO: 	 CONTIENE GLUTEN	 CRUSTÁCEOS	 HUEVOS	 PESCADO	 CACAHUETES	 SOJA	 LÁCTEOS
	 FRUTOS DE CÁSCARA	 APIO	 MOSTAZA	 GRANOS DE SÉSAMO	 DIOXIDO DE AZUFRE Y SULFITOS	 ALTRAMUCES	 MOLUSCOS
							SOY VEGETARIANO I AM VEGETARIAN