



Name: _____

Date: _____

Fill in the blanks with a or an

1. She has ____ apple.



2. I see ____ cat.



3. He is eating ____ orange.



4. This is ____ pencil.



5. I have ____ umbrella.



6. That is ____ dog.



7. She wants ____ ice-cream.



8. He sees ____ elephant.



9. I bought ____ book.



10. It is ____ egg.

