

FOR OFFICIAL USE



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National  
Qualifications

Mark

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**X842/77/01**

# Italian Reading and Translation Answer Booklet



\* X 8 4 2 7 7 0 1 \*

Fill in these boxes and read what is printed below.

Full name of centre

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Town

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Forename(s)

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Surname

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Number of seat

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Date of birth

Day

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Month

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Year

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Scottish candidate number

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Write your answers clearly in this answer booklet. You must clearly identify in the margin the question number you are attempting.

Use **blue** or **black** ink.

Before leaving the examination room you must give this booklet to the Invigilator; if you do not you may lose all the marks for this paper.

























