



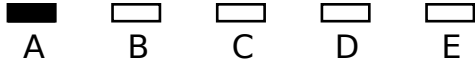
# Answer Sheet

Paper Name: NVR-Block Counting  
Paper ID: CUSTOM-NVR-B959864DAD  
Full Name:



**YOU MUST ANSWER ON THIS SHEET. TAKE A PICTURE USING THE EXAM HAPPY APP  
AFTERWARDS TO MARK YOUR WORK.**

## How to answer:



## How not to answer:



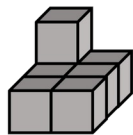
Use the **free Exam Happy app** to **view the average** for this paper and learn from **video solutions**

|    |                          |                          |                          |                          |                          |
|----|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 2  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 3  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 4  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 5  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 6  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 7  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 8  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 9  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |

|    |                          |                          |                          |                          |                          |
|----|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 11 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 13 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 14 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 15 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 16 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 17 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 18 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 19 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |
| 20 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|    | A                        | B                        | C                        | D                        | E                        |

Examine the 3D figure made from identical blocks. There are some blocks that are hidden from view. Work out **how many individual blocks** make up the 3D figure and mark the correct option on your answer sheet.

Example



- |    |   |    |   |   |
|----|---|----|---|---|
| 10 | 7 | 12 | 5 | 9 |
| A  | B | C  | D | E |

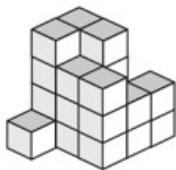
**Answer B** (There are six blocks on the bottom and one block on the top)

- 1.
- 
- |    |    |    |    |    |
|----|----|----|----|----|
| 26 | 30 | 27 | 28 | 29 |
| A  | B  | C  | D  | E  |

- 2.
- 
- |    |    |    |    |    |
|----|----|----|----|----|
| 29 | 27 | 28 | 30 | 26 |
| A  | B  | C  | D  | E  |

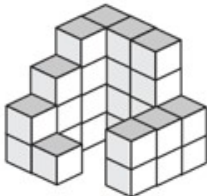
- 3.
- 
- |    |    |    |    |    |
|----|----|----|----|----|
| 31 | 27 | 28 | 29 | 30 |
| A  | B  | C  | D  | E  |

4.



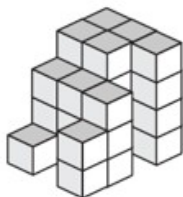
- 26
- 23
- 24
- 27
- 25
- A
- B
- C
- D
- E

5.



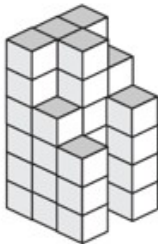
- 31
- 29
- 27
- 30
- 28
- A
- B
- C
- D
- E

6.



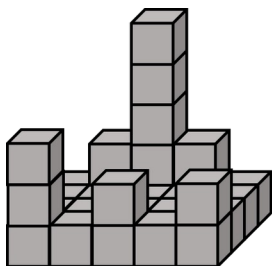
- 32
- 33
- 31
- 30
- 29
- A
- B
- C
- D
- E

7.



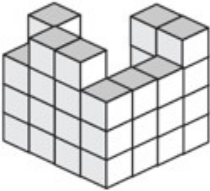
- 41
- 40
- 39
- 38
- 42
- A
- B
- C
- D
- E

8.



- 28
- 30
- 29
- 31
- 27
- A
- B
- C
- D
- E

9.



30

32

31

33

29

A

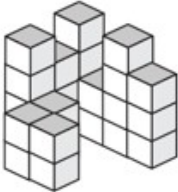
B

C

D

E

10.



25

24

23

26

27

A

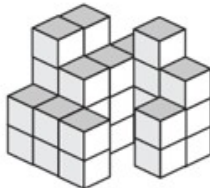
B

C

D

E

11.



33

32

31

29

28

A

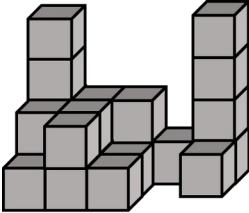
B

C

D

E

12.



23

20

18

24

22

A

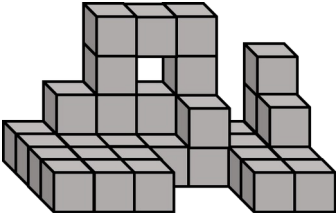
B

C

D

E

13.



30

33

40

39

37

A

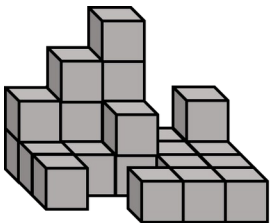
B

C

D

E

14.



21

23

26

22

24

A

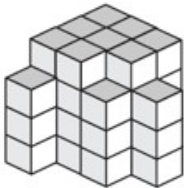
B

C

D

E

15.



40

35

41

42

39

A

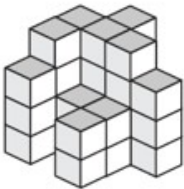
B

C

D

E

16.



31

32

30

33

29

A

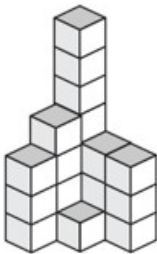
B

C

D

E

17.



20

18

19

22

21

A

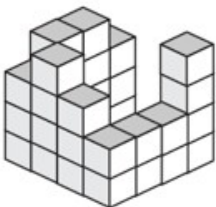
B

C

D

E

18.



31

33

30

32

29

A

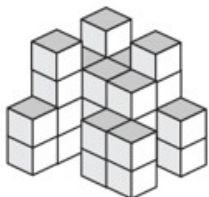
B

C

D

E

19.



33

34

32

31

28

A<sub>4</sub>

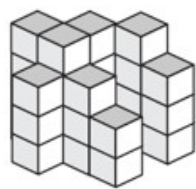
B

C

D

E

20.



- |    |    |    |    |    |
|----|----|----|----|----|
| 25 | 16 | 27 | 28 | 26 |
| A  | B  | C  | D  | E  |