Name: _____ Date: _____

Affordable Care Act

E N U C I T I Z E N S H I P H P Q J W D N V Q V
V O X K T E P L N I A X Q W F N Y E B E N L B W
I I C K N N T E O E Y X R O G A D Y Q P O R F J
T T V T E I G V I S C G E E D D U O M J I P I R
A A L I M L F E T G I M P M U T U O U N T O R A
T N L D L D S L A Q L U N T I M E L Y I A E R G
N I E E L A O E C Q O Z L S C F C N N A R V S S
E M V R O E W M I Y P Y Z C G B Y S A L E V M E
S R E C R D G O F Q K Q B H A A C T S N C Q I D
E E L X N N R C I R S X A E N H A I S O R N X O
R T Y A E G P N R R E E D D T A X P E N A L T Y
P E T T L U V I E K D A G U U D V X P T C E G L
E D R N A X R L V N N O E L T A O A L X N K M F
R Y E R I Y H A G H A K N E K X H Y J Y I O X U
D T V O C E O U G D E T W A I F E X S V A O E S
E I O V E E P N A A L J Q D Q X Q Z J S Z J G Z
Z L P O P N H N J Y C F X H I R Y C Y J H P P J
I I L A S Q I A S O T A L E U W Q W M M U I I R
R B A D H S D X L S U P E R V I S O R M V Z P D
O I R K A F F O R D A B L E C A R E A C T A T W
H G E O X Z J Z P Q J O V N J R Z G E C N D B K
T I D A X A P E U Y I T C C L A P T C F Z F C W
U L E E F I P Y F I K V A E Y P J I U D G Y M F
A E F T Y C T S U L M F C J K H M Z I U Y M Q Z

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