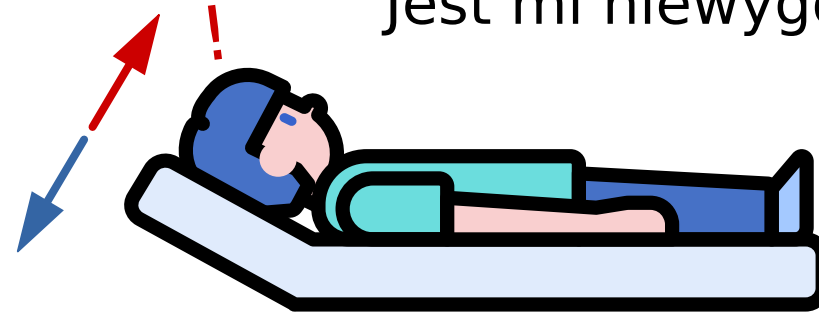
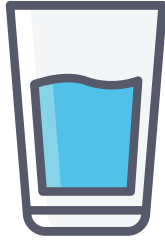
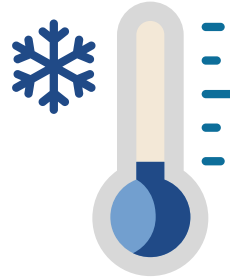


Chce mi się pić

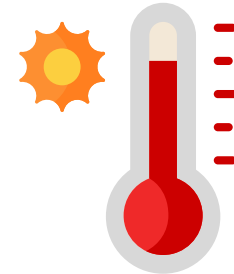


Jest mi niewygodnie

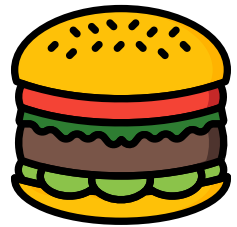
Jest mi zimno



Jest mi gorąco

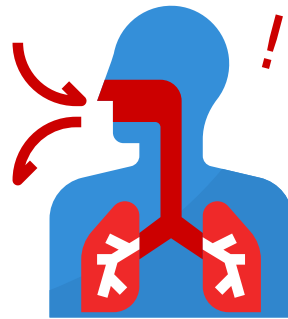


Czuję się dobrze



Jestem głodny/-a

Nie mogę złapać oddechu



Jest mi niedobrze



Boli!



Muszę skorzystać z toalety



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