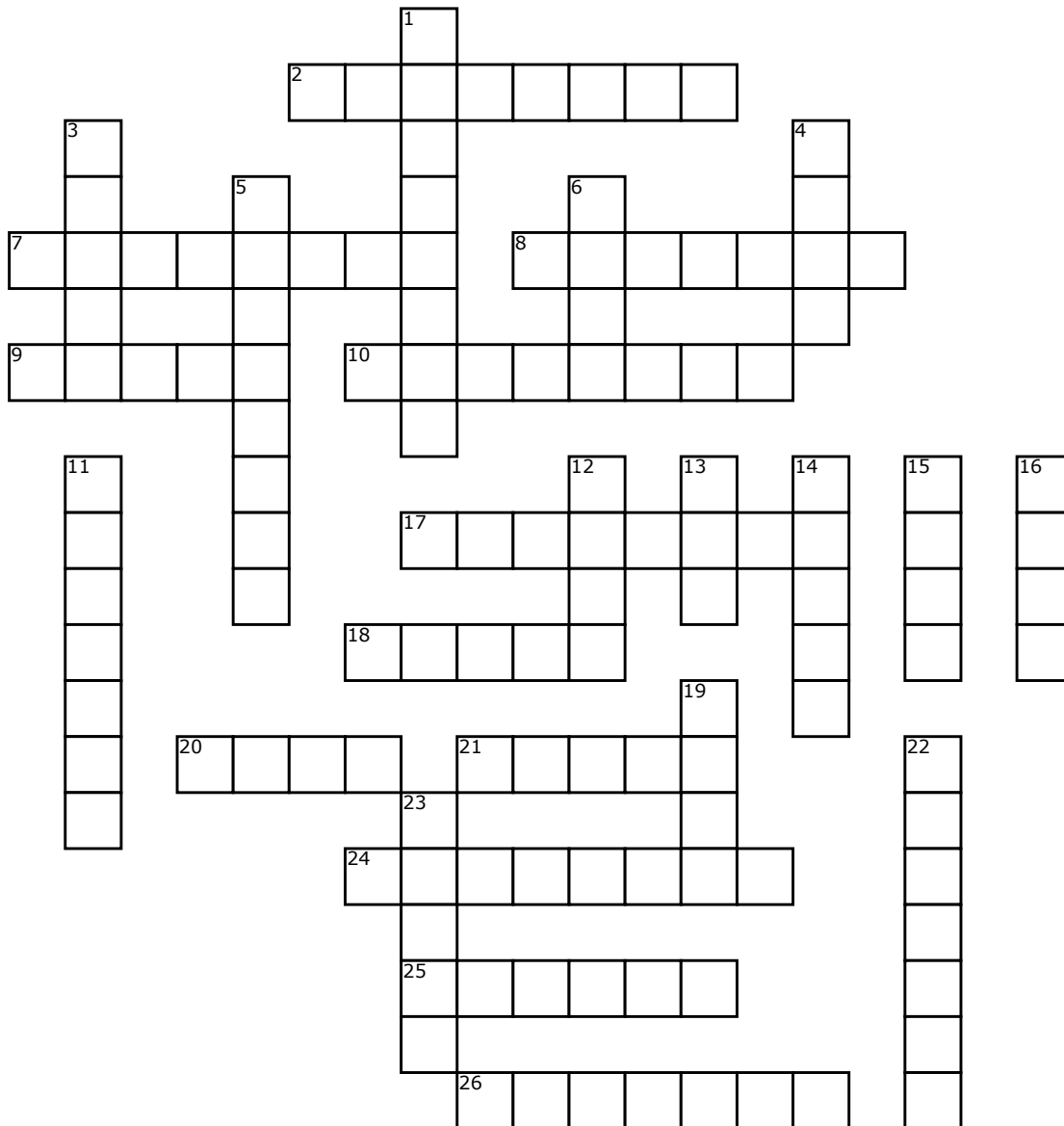


Name: _____

Date: _____

Yay



Across

- 2.** Passion fruit
- 7.** Lunch
- 8.** Apple
- 9.** Cake
- 10.** Soda
- 17.** Salad
- 18.** Rice
- 20.** Juice
- 21.** Eggs

24. Vegetables

- 25.** Ice cream
- 26.** Banana
- Down**
- 1.** Beans
- 3.** Chicken
- 4.** Dinner
- 5.** Breakfast
- 6.** Coffe
- 11.** Fish

12. Corn

- 13.** Bread
- 14.** Meat
- 15.** Water
- 16.** Potato
- 19.** Soup
- 22.** Orange
- 23.** Milk