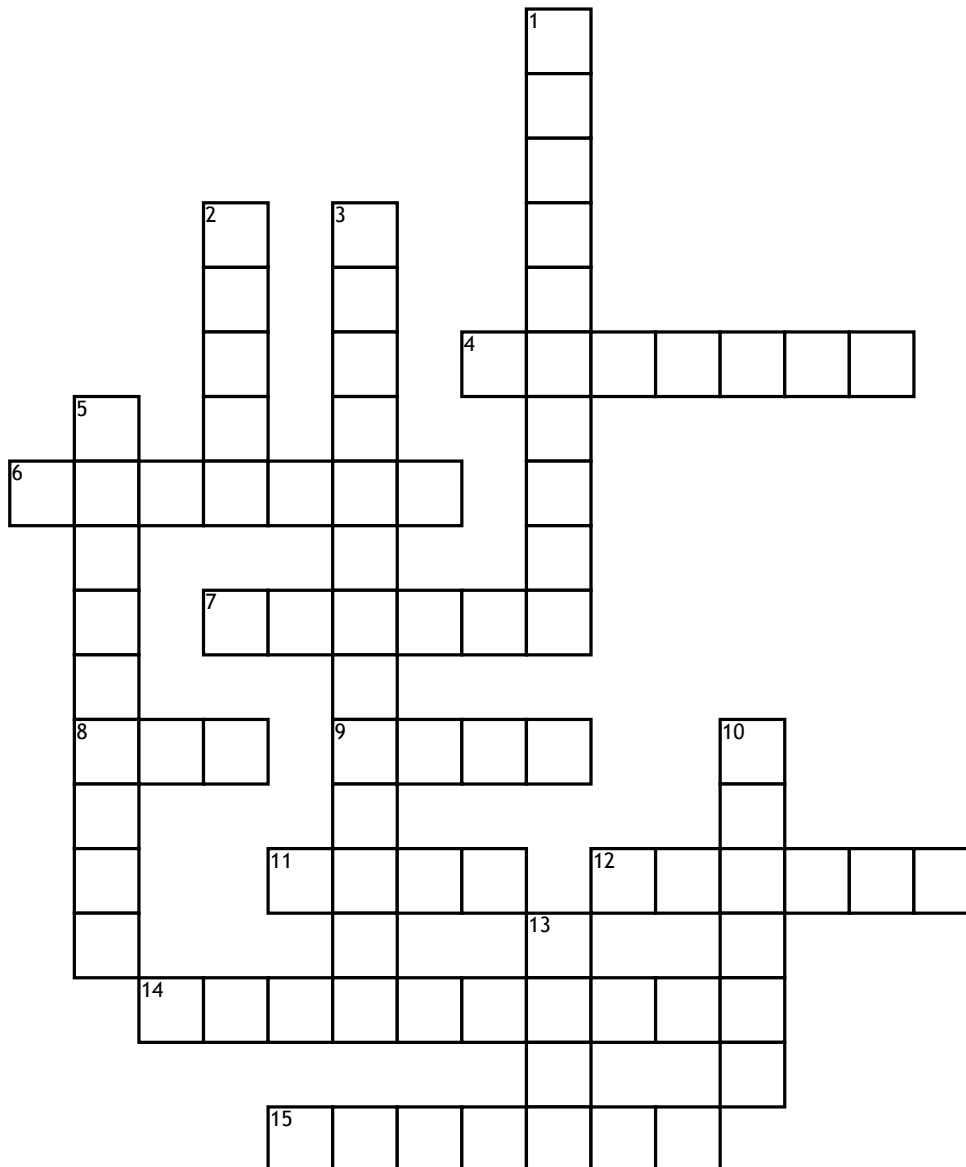


Name: _____

Date: _____

la nourriture



Across

- 4. cheese
- 6. fish
- 7. meat
- 8. tea
- 9. coffee
- 11. milk

12. butter

14. orange juice

15. i eat

Down

1. toast

2. eggs

3. hot
chocolate

5. jam

10. chicken

13. bread