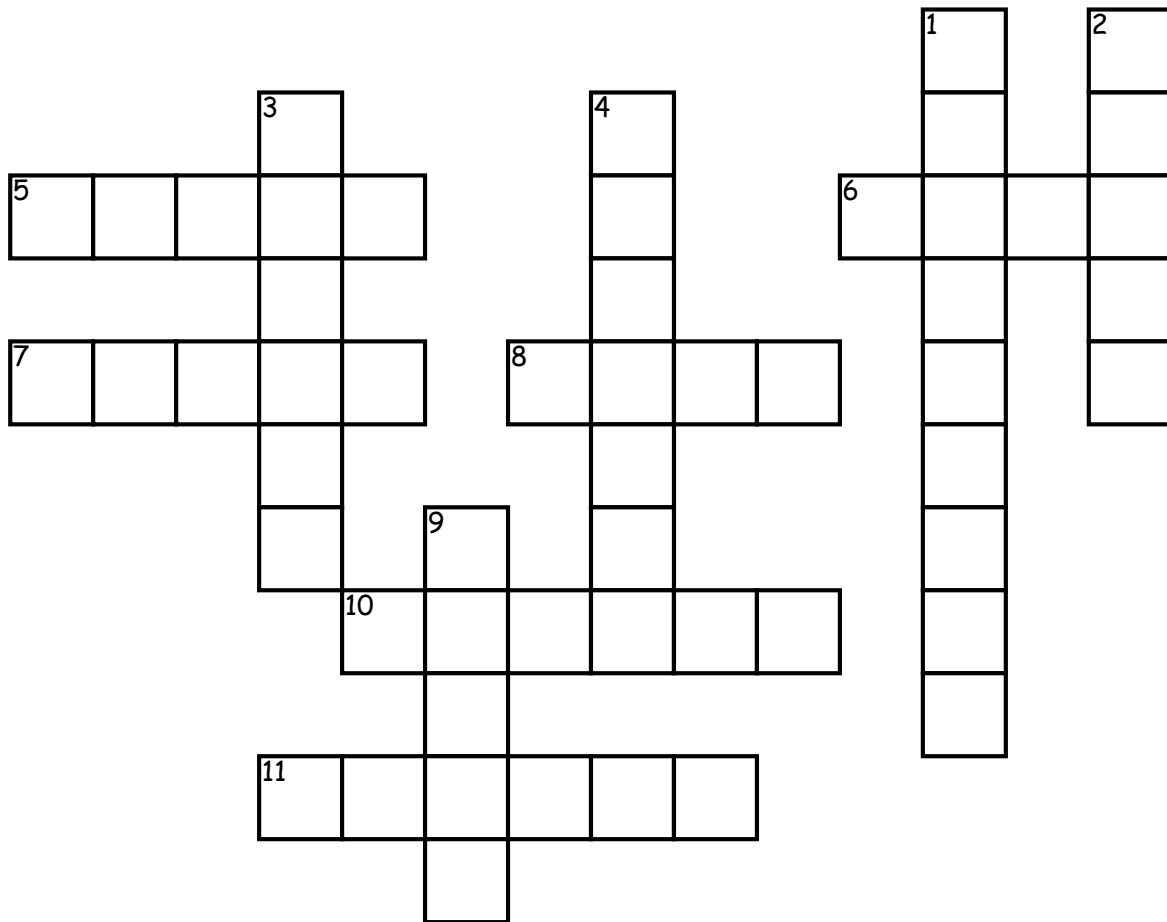


Name: _____

Date: _____

Food



Across

- 5. vegetables in a _____.
- 6. A moist chocolate
- 7. _____ with lentil
- 8. pop-_____
- 10. toast and _____

- 11. milk with _____

Down

- 1. Eat with dhal
- 2. a loaf of _____
- 3. yellow fruit
- 4. hard shell fruit
- 9. rice with _____ fish