

Name: _____

Date: _____

Je mange

X Q T O M A T E S R

F R O M A G E F S M

U V J F P O M M E B

P B Z C E R I S E I

O Q P R O G B X T S

I W L B R A A V P C

R U E L A T N H R U

E M V V N E A P Q I

K I W I G A N C T T

Y K Q N E U E V V B

fromage biscuit orange cerise

tomate gateau banane poire

pomme kiwi