

NAME \_\_\_\_\_

DATE \_\_\_\_\_

CLASS \_\_\_\_\_

# FOOD

## NAME 3

**Can you name 3...**

1. Fruits that are not yellow or orange \_\_\_\_\_
2. Different kinds of meat \_\_\_\_\_
3. Green vegetables \_\_\_\_\_
4. Dairy products \_\_\_\_\_
5. Breakfast foods \_\_\_\_\_
6. Yellow & orange fruit \_\_\_\_\_
7. Yellow & orange vegetables \_\_\_\_\_
8. Kinds of bread \_\_\_\_\_
9. Sweet things \_\_\_\_\_
10. Healthy drinks \_\_\_\_\_
11. Fast foods \_\_\_\_\_
12. Things that we can put on bread \_\_\_\_\_

