

## LISTENING TABLE

1. Listen to the other group and complete this table.  
Write or tick the correct food group.

GROUP NUMBER:  .....	DRAW A PICTURE OF THE PLATE:          Name of this plate: .....						
1.	THIS IS ..... PLATE						
2.	THIS PLATE IS .....						
3.	THIS PLATE IS .....						
4.	<p><b>BECAUSE (perchè):</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px; vertical-align: top;"> THERE ARE:  <input type="checkbox"/> GRAINS  <input type="checkbox"/> PROTEINS OR DAIRY PRODUCTS  <input type="checkbox"/> VEGETABLES  <input type="checkbox"/> FEW FATS </td><td style="width: 50%; padding: 5px; vertical-align: top;"> THERE ARE <b><u>NO</u>:</b>  <input type="checkbox"/> GRAINS  <input type="checkbox"/> PROTEINS OR DAIRY PRODUCTS  <input type="checkbox"/> VEGETABLES </td></tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><b>BUT (ma) or AND (e)</b></td></tr> <tr> <td style="padding: 5px; vertical-align: top;"> THERE IS:  <input type="checkbox"/> FRUIT </td><td style="padding: 5px; vertical-align: top;"> THERE IS <b><u>NO</u>:</b>  <input type="checkbox"/> FRUIT </td></tr> </table>	THERE ARE: <input type="checkbox"/> GRAINS <input type="checkbox"/> PROTEINS OR DAIRY PRODUCTS <input type="checkbox"/> VEGETABLES <input type="checkbox"/> FEW FATS	THERE ARE <b><u>NO</u>:</b> <input type="checkbox"/> GRAINS <input type="checkbox"/> PROTEINS OR DAIRY PRODUCTS <input type="checkbox"/> VEGETABLES	<b>BUT (ma) or AND (e)</b>		THERE IS: <input type="checkbox"/> FRUIT	THERE IS <b><u>NO</u>:</b> <input type="checkbox"/> FRUIT
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