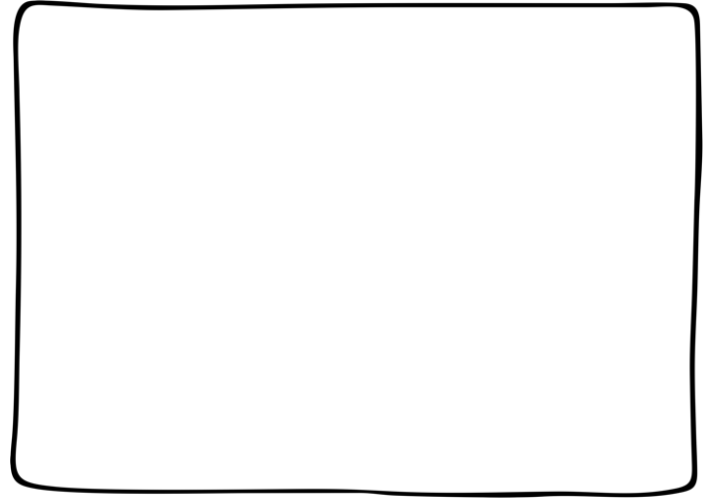
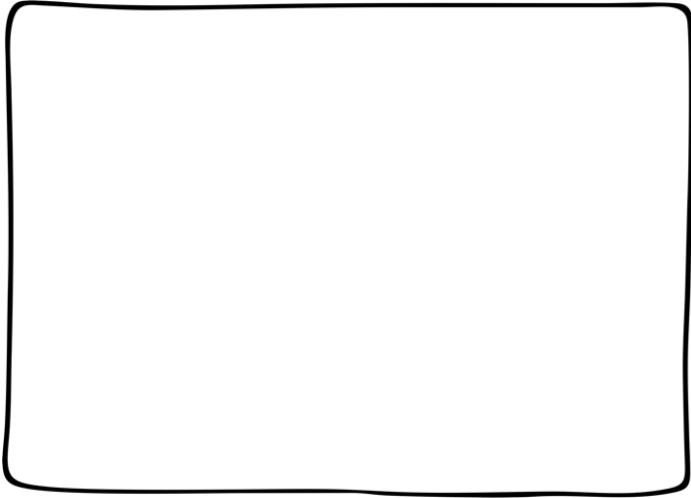


Name: _____

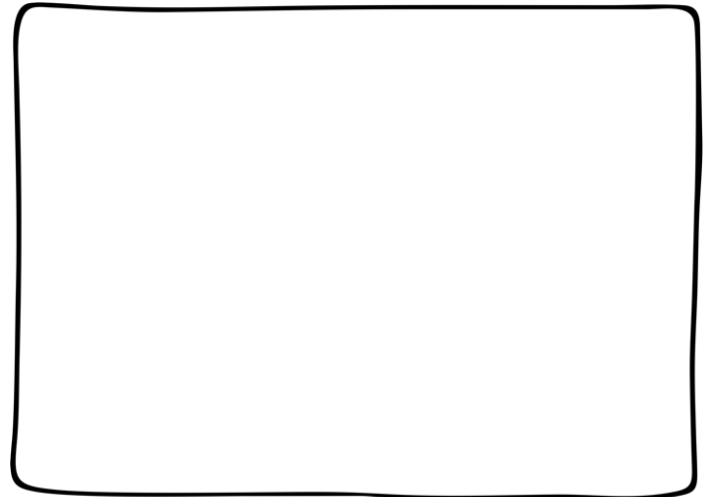
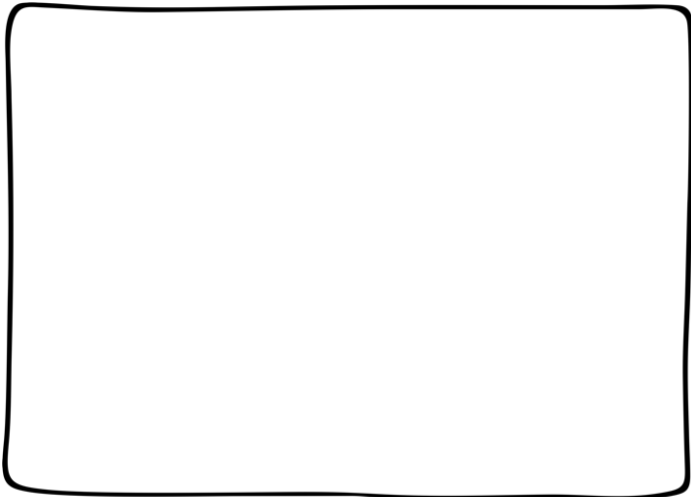
Section: _____

My Pinggang Pinoy® Story



1. _____ did not like to eat healthy food such as 2. _____, 3. _____ and 4. _____.

5. _____'s body was weak.



6. _____ often got sick and did not have energy to play with friends.

7. _____ decided to follow Pinggang Pinoy® to be healthy and strong.