Name;		
Marrie:	 	
1 W0.———	 	

Week of: _____



Day	Title of What I Read:	Genre	Number of Minutes	Parent Initials
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Name;		
Marrie:	 	
1 W0.———	 	

Week of:



Day	Title of What I Read:	Number of Minutes	Parent Initials
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Name:				
Name:——	 	 	 	



Week of: _____

Day	Title of What I Read:	Number of Minutes	Parent Initials
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
	Total Number of Minutes Read:		

Name:			
Mama.			
IND TELE	 	 	



Week of:

Day	Title of What I Read:	Number of Minutes	Genre	Parent Initials
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
	Total Number of Minutes Read:			