

Name: \_\_\_\_\_

Reading Log - \_\_\_\_\_ - \_\_\_\_\_

Date	Title of Book	Beginning Page	Ending Page	Total Pages Read	Two sentences about what is happening in pages you read today	Parent/Guardian Signature
Monday					<hr/> <hr/> <hr/>	
Tuesday					<hr/> <hr/> <hr/>	
Wednesday					<hr/> <hr/> <hr/>	
Thursday					<hr/> <hr/> <hr/>	
Friday					<hr/> <hr/> <hr/>	

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