

READING LOG

WEEK 1	WEEK 2
TITLE: AUTHOR: FICTION OR NON-FICTION:	TITLE: AUTHOR: FICTION OR NON-FICTION:
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TITLE: AUTHOR: FICTION OR NON-FICTION:	TITLE: AUTHOR: FICTION OR NON-FICTION:
TOTAL NUMBER OF MINUTES READ: PARENT/GUARDIAN SIGNATURE:	TOTAL NUMBER OF MINUTES READ: PARENT/GUARDIAN SIGNATURE:

READING LOG

WEEK 3	WEEK 4
TITLE: AUTHOR: FICTION OR NON-FICTION:	TITLE: AUTHOR: FICTION OR NON-FICTION:
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TOTAL NUMBER OF MINUTES READ: PARENT/GUARDIAN SIGNATURE:	TOTAL NUMBER OF MINUTES READ: PARENT/GUARDIAN SIGNATURE: