# Monthly Reading Log 

Select a book to read. Enter the date, title of the book and number of minutes read each day. Parents, please initial daily! Remember to read 5 nights a week for 10 minutes! Return your reading log back to school on Wednesday, May 31, 2017.

Name:

| Date | Title Of Book | \# of min. <br> read | RAZ <br> Kids? <br> Yes/No | Parent <br> Initials |
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| Date | Title Of Book | \# of min. <br> read | RAZ <br> Kids? <br> Yes/No | Parent <br> Initials |
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TOTAL number of minutes read this month:

