

Name \_\_\_\_\_ Reading Logs



# What Are You Reading?

Read for 20 minutes each night. Record the title and number of pages read. Your parents should initial each entry.

Title	Author	# of Pages
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parents Signature: \_\_\_\_\_