Name: \_\_\_\_\_\_\_\_\_ Weekly Reading Log *\*goal: \_\_\_\_min* Grade 3

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| Day | Date | Home/school | Title of Book | Level | Genre | Pagestarted | Pageended | Fiction BooksFinished | Minutes read | Daily total |
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| Day | Date | Home/school | Title of Book | Level | Genre | Pagestarted | Pageended | Fiction BooksFinished | Minutes read | Daily total |

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| Sat. |  | H |  |  |  |  |  |  |  |  |
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| Sun. |  | H |  |  |  |  |  |  |  |  |
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| Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number TOTAL of books read: \_\_\_\_ MINUTES\_\_\_\_\_  |