

# October Reading 2016

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

**ALL TOGETHER THIS MONTH I READ \_\_\_\_\_ MINUTES!**

**PARENT SIGNATURE: \_\_\_\_\_**

STUDENT NAME: \_\_\_\_\_

Record the number of minutes you read each day. Total your minutes, have your parent sign, and turn this calendar in for a treat ☺