Name $\qquad$ Date: $\qquad$
Look Cover Write Check

|  | Monday | Tuesday | Wednesday | Thursday |
| :--- | :--- | :--- | :--- | :--- |
| here |  |  |  |  |
| there |  |  |  |  |
| where |  |  |  |  |
| put |  |  |  |  |
| your |  |  |  |  |
| once |  |  |  |  |
| school |  |  |  |  |
| our |  |  |  |  |

