

Name: _____
 Date: _____

WEEKEND

NEWS

SU	MO	TU	WE	TH	FR	SA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

This weekend I felt...

mad tired happy sad excited

silly nervous sick bored

because...

Who I saw

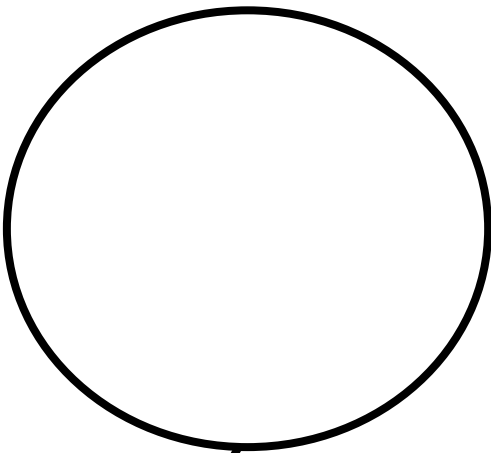
What I did

The best part

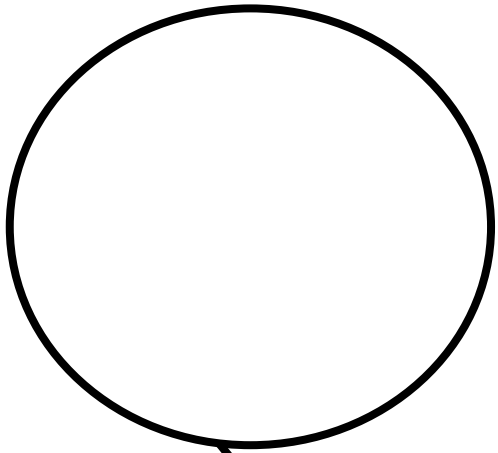
The worst part

My Weekend

Who I saw

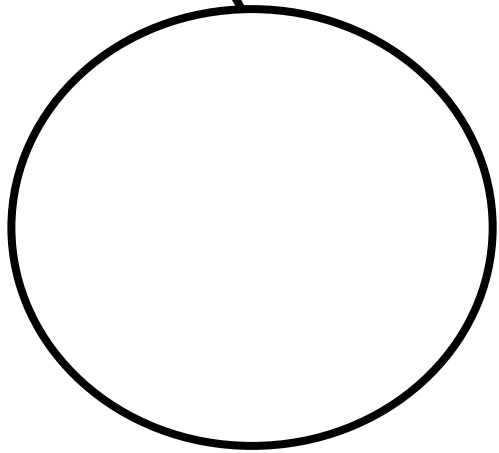


The best part

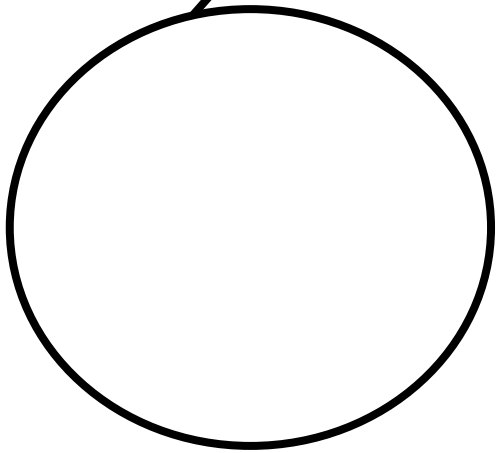


**My
Weekend**

What I did



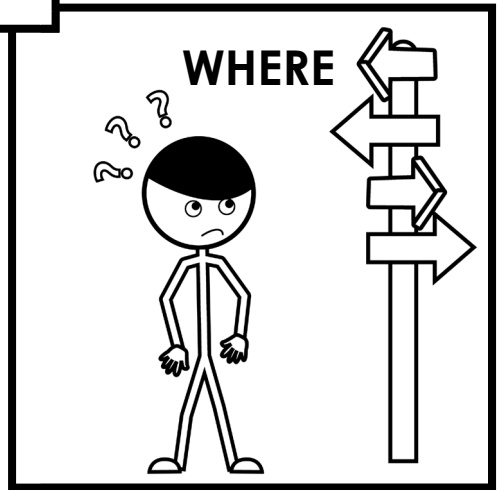
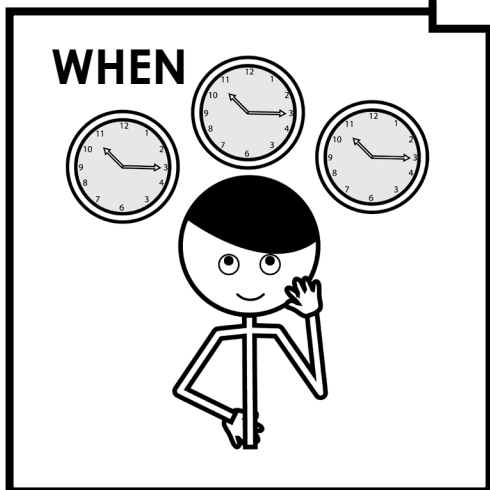
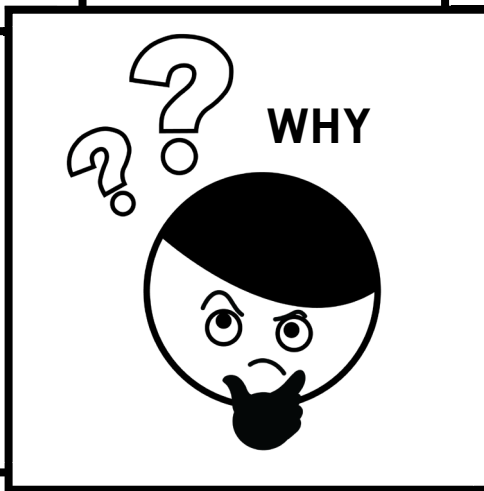
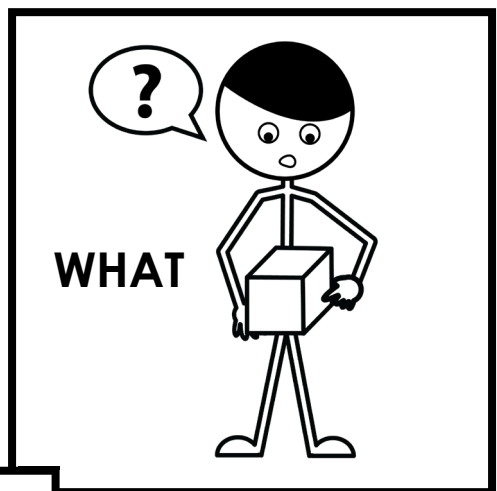
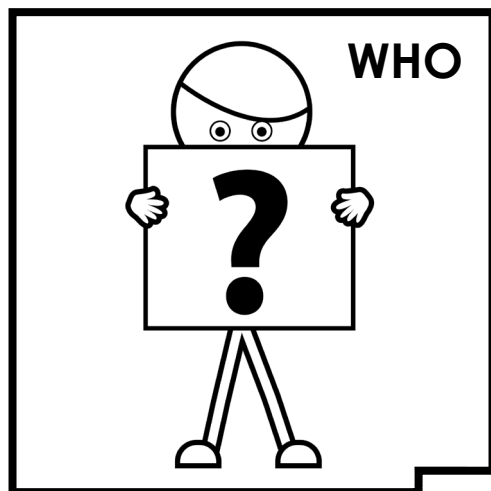
The worst part



WEEKEND

NEWS


WH QUESTIONS



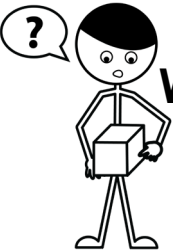
Name: _____

SU	MO	TU	WE	TH	FR	SA
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>


WEEKEND NEWS



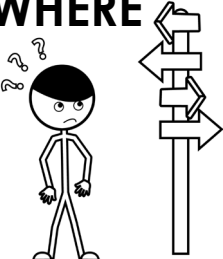
WHO




WHAT



WHEN



WHERE



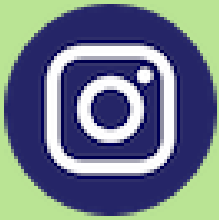
WHY

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