

OCTOBER

NAME _____

BRING YOUR COMPLETED CHART TO OUR OFFICE FOR A PRIZE!

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM PM				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