

State Senator  
**Doris Turner**  
Stratton Office Building  
Section F, Room B  
Springfield, IL 62706

PLACE  
STAMP  
HERE

LOCAL LIBRARIES

**Decatur Public Library**

130 N. Franklin St., Decatur, IL  
(217) 424-2900

**Chatham Area Public Library**

600 E. Spruce St., Chatham, IL  
(217) 483-2713

**Rochester Public Library District**

1 Community Dr., Rochester, IL  
(217) 498-8455

**Lincoln Library**

326 S. Seventh St., Springfield, IL  
(217) 753-4900

**Sherman Public Library District**

2100 E. Andrew Rd., Sherman, IL  
(217) 496-2357

**Stonington Township Library**

500 E North St., Stonington, IL  
(217) 325-3512

State Senator  
**Doris Turner**

**SPRINGFIELD OFFICE:**

725 North Grand Ave E.  
Springfield, IL 62702  
(217) 670-1828

**DECATUR OFFICE:**

1210 S. Jasper St.  
Decatur, IL 62321  
(217) 706-5311

**CAPITOL OFFICE:**

Stratton Office Building  
Section F, Room B  
Springfield, IL 62706  
(217) 782-0228

[www.SenatorDorisTurner.com](http://www.SenatorDorisTurner.com)

Recycled Paper • Soybean Inks • Printed by Authority of the State of Illinois  
LPU Order 100434 • May 2024 • 500 copies

State Senator  
**Doris Turner**  
48<sup>TH</sup> Senate District

SUMMER  
BOOK  
CLUB



# SUMMER BOOK CLUB



**State Senator Doris Turner**



1

**Read**

Read 8 books of your choice during the summer break.

*Reading is the best way for children to explore their imaginations!*

2

**Submit**

Once you've completed reading the books, fill out the attached form and have your parent, guardian, or family member confirm that you have read the books listed and return it by **FRIDAY, AUGUST 16.**

3

**Party**

The best part!

Senator Doris Turner will reward every participant who completed the program with a free ice cream sundae.

**For questions or more information please call:  
(217) 782-0228**

**I WAS A SUMMER BOOK CLUB READER!**

\_\_\_\_\_  
(Print your name)

\_\_\_\_\_  
(Print your phone number)

\_\_\_\_\_  
(Print your address)

**I READ THE FOLLOWING 8 BOOKS:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

.....  
**SECTION FOR YOUR PARENT, GUARDIAN OR FAMILY MEMBER.**

\_\_\_\_\_  
(Child's name)

**HAS READ ALL THE  
BOOKS LISTED ABOVE!**

\_\_\_\_\_  
(Print your name)

\_\_\_\_\_  
(Relation to participant)