

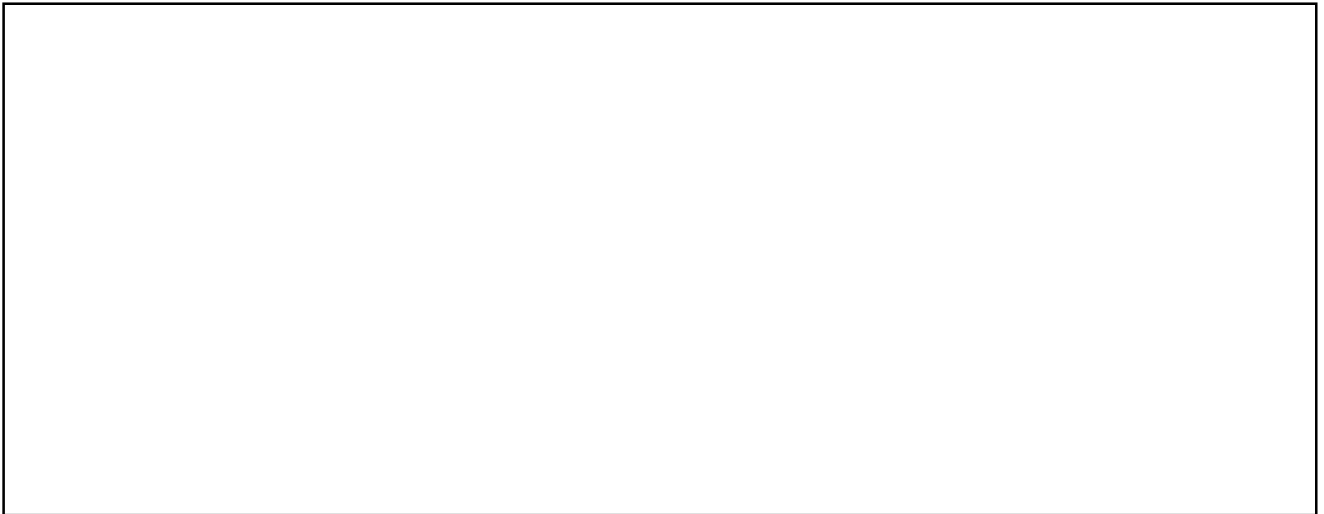
Building Record Sheet

Your Name: _____ Today's Date: _____

Name of the Building: _____

It was built in : _____

Draw the building below:



Was the building a home or a place to work? _____

Who lived or worked here? _____

How was the building kept warm? _____

How did they light the building at night? _____

Draw something from inside the building below:

