



Event Reporting Form

Date _____ Event Code: _____

Location _____

GM Org Play #:	GM Name:	GM Faction:
Adventure #:	Adventure Name:	
Reporting Codes: (check when instructed, line through all if no conditions to report)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
Bonus Faction Goal Achieved:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Scenario-based Infamy earned? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Fame Earned:		

Faction:	
Player Name:	Org Play #:
Character Name:	Class:
Level	
<input type="checkbox"/> Acquisitives	<input type="checkbox"/> Dataphiles
<input type="checkbox"/> Exo-Guardians	<input type="checkbox"/> Wayfinders
<input type="checkbox"/> Second Seekers ()	
<input type="checkbox"/>	
<input type="checkbox"/> Dead	
<input type="checkbox"/> Infamy	

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