



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 #: - 2	<input type="checkbox"/> Grand Archive <input type="checkbox"/> Envoy's Alliance <input type="checkbox"/> Slow Track	
Character Name:	Class	Level	
			<input type="checkbox"/> Radiant Oath <input type="checkbox"/> Horizon Hunters <input type="checkbox"/> Dead
			<input type="checkbox"/> Vigilant Seal <input type="checkbox"/> Verdant Wheel <input type="checkbox"/> Infamy

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