



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	Fame Earned:		
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

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

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