



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 <input type="checkbox"/> N/A	
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		<input type="checkbox"/> Radiant Oath	<input type="checkbox"/> Horizon Hunters	<input type="checkbox"/> Dead
		Level		<input type="checkbox"/> Vigilant Seal	<input type="checkbox"/> Verdant Wheel	<input type="checkbox"/> Infamy
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