



Warband Name: Orks

Warband Type: chaotic

Treasury

Gold Crowns: 3

Treasure:

Warband Rating

Grand Total Experience: 75+5+3

Members (17) x 5: 85

Large Creatures (0) x 20: 0

Hired Swords: 0

Dramatis Personae: + 0

Rating: 168

Stored Equipment

Name: Grumlok & Gazbag

Type: Ork Leader

☒ Combat ☒ Shooting ☐ Academic ☒ Strength ☒ Speed ☒ Special

M WS BS S T W I A Ld Sv

4 4 4 4 4 1 3 1 8

4 6 6 4 5 3 5 4 9

HERO

▲ Racial Maximums ▲

Experience ▶

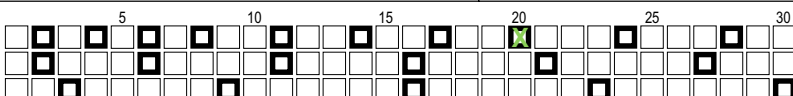
Equipment:
2x dagger

Skills & Spells:

Leader

+5 wb raring

Injuries:

Total
Experience
20

Name: Grommok

Type: Big'Un

☒ Combat ☒ Shooting ☐ Academic ☒ Strength ☐ Speed ☒ Special

M WS BS S T W I A Ld Sv

4 4 3 3 4 1 3 1 7

4 6 6 4 5 3 5 4 9

HERO

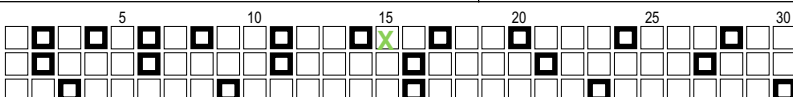
▲ Racial Maximums ▲

Experience ▶

Equipment:
hand weapon
dagger (off hand)

Skills & Spells:

Injuries:

Total
Experience
15

Name: Ug'Lash

Type: Big'Un

☒ Combat ☒ Shooting ☐ Academic ☒ Strength ☐ Speed ☒ Special

M WS BS S T W I A Ld Sv

4 4 3 3 4 1 3 1 7 5

4 6 6 4 5 3 5 4 9

HERO

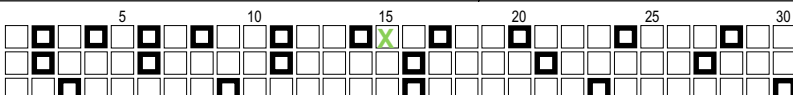
▲ Racial Maximums ▲

Experience ▶

Equipment:
hand weapon
dagger (off hand)

Skills & Spells:

Injuries:

Total
Experience
15

Name: Karhag

Type: Big'Un

☒ Combat ☒ Shooting ☐ Academic ☒ Strength ☐ Speed ☒ Special

M WS BS S T W I A Ld Sv

4 4 3 3 4 1 3 1 7 5

4 6 6 4 5 3 5 4 9

HERO

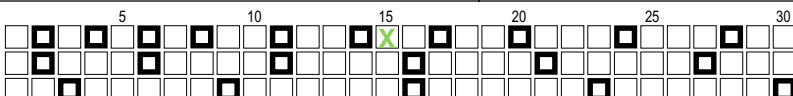
▲ Racial Maximums ▲

Experience ▶

Equipment:
hand weapon
dagger (off hand)

Skills & Spells:

Injuries:

Total
Experience
15

Name: Wogga

Type: Shaman

☐ Combat ☐ Shooting ☐ Academic ☒ Strength ☐ Speed ☒ Special

M WS BS S T W I A Ld Sv

4 3 3 3 4 1 3 1 7

4 6 6 4 5 3 5 4 9

HERO

▲ Racial Maximums ▲

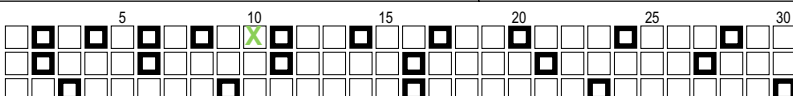
Experience ▶

Equipment:
2x dagger

Skills & Spells:

Magic: Clubba (diff 7)

Injuries:

Total
Experience
10

Name:

Type:

☐ Combat ☐ Shooting ☐ Academic ☐ Strength ☐ Speed ☐ Special

M WS BS S T W I A Ld Sv

HERO

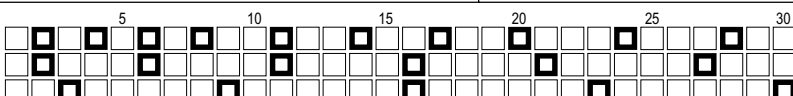
▲ Racial Maximums ▲

Experience ▶

Equipment:

Skills & Spells:

Injuries:

Total
Experience

Name: Goblins											Equipment: 2x dagger											Special Rules & Skills: animosity not orks runts										
Type: Goblin Warrior Number: 3																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
4	2	3	3	3	1	3	1	5																								
											Experience 5 10											Group Experience: 0										

Name: Squig herder											Equipment: squig prodger dagger short bow											Special Rules & Skills: animosity not orks runts										
Type: Goblin Warrior Number: 1																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
4	2	3	3	3	1	3	1	5																								
											Experience 5 10											Group Experience: 0										

Name: Norog											Equipment: 2x dagger											Special Rules & Skills: animosity										
Type: Ork Boy Number: 1																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
4	3	3	3	4	1	2	1	7																								
											Experience 5 10											Group Experience: 0										

Name: Granak											Equipment: 2x dagger											Special Rules & Skills: animosity										
Type: Ork Boy Number: 1																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
4	3	3	3	4	1	2	1	7																								
											Experience 5 10											Group Experience: 0										

Name: Gmorkor											Equipment: 2x dagger											Special Rules & Skills: animosity										
Type: Ork Boy Number: 1																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
4	3	3	3	4	1	2	1	7																								
											Experience 5 10											Group Experience: 0										

Name: Squigs											Equipment:											Special Rules & Skills: Movement Animals Minderz Not Orcs										
Type: Squig Number: 4																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
2D6	4	0	4	3	1	4	1	6																								
											Experience 5 10											Group Experience:										

Name:											Equipment:											Special Rules & Skills:										
Type: Number:																																
M	WS	BS	S	T	W	I	A	Ld	Sv																							
											Experience 5 10											Group Experience:										

► Henchmen Total Experience: 0

Warband Objective										
Objective: The Scourge of the Realm										
Achievements:										
Campaign Points: 5 10 15 20										

Name: Stinkender alter Ron Type: Beggar Hired Sword <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input checked="" type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv 4 1 1 2 2 1 3 1 5 <div style="text-align: right;"> Experience ▶ </div>	Equipment: club (free dagger) Injuries:	Skills & Spells: Scrounge Not a Thread <div style="text-align: right;"> Total Experience 3 </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>
Name: Type: <input type="checkbox"/> Combat <input type="checkbox"/> Shooting <input type="checkbox"/> Academic <input type="checkbox"/> Strength <input type="checkbox"/> Speed <input type="checkbox"/> Special M WS BS S T W I A Ld Sv <div style="text-align: right;"> Experience ▶ </div>	Equipment: Injuries:	Skills & Spells: <div style="text-align: right;"> Total Experience </div>

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

Name:		Equipment:		Special Rules & Skills:																					
Type: <input style="width: 100px;" type="text"/>		Number: <input style="width: 100px;" type="text"/>																							
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>M</td><td>WS</td><td>BS</td><td>S</td><td>T</td><td>W</td><td>I</td><td>A</td><td>Ld</td><td>Sv</td> </tr> <tr> <td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td><td><input style="width: 20px; height: 20px;" type="text"/></td> </tr> </table>		M	WS			BS	S	T	W	I	A	Ld	Sv	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	Experience 5 10 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
M	WS	BS	S			T	W	I	A	Ld	Sv														
<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>																
		Group Experience:																							

▶ **Henchmen Total Experience:**

Notes (Skill Descriptions, Spell Descriptions, etc.):