Quabbin Valley Paranormal Investigator Personal Report

Case Number	Date	Investigator Name

Narrative

Equipment Used

- ☐ Audio Recorder
- ☐ Camera
- ☐ Thermometer
- ☐ EMF Meter
- ☐ Video Camera
- ☐ Other

Rolls of Film Used: _____ **Type:** _____

Video Cassettes Used: _____ **Type:** _____

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Event Log	
Time	**Event**

Additional Comments

Member Completing Narrative (Printed Name)	Member Completing Narrative (Signature)	Date Completed