

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |

| | | | | | |
|---------------|--|---|---|---------------------------------------|--------------------------------------|
| ROUND: | NAME: <input type="text"/> | HP (TOTAL): <input type="text"/> | HP (CURRENT): <input type="text"/> | | |
| | <input type="checkbox"/> Ability Damaged | <input type="checkbox"/> Dazzled | <input type="checkbox"/> Fascinated | <input type="checkbox"/> Invisible | <input type="checkbox"/> Prone |
| | <input type="checkbox"/> Ability Drained | <input type="checkbox"/> Deafened | <input type="checkbox"/> Fatigued | <input type="checkbox"/> Knocked Down | <input type="checkbox"/> Shaken |
| | <input type="checkbox"/> Blinded | <input type="checkbox"/> Disabled | <input type="checkbox"/> Flat-Footed | <input type="checkbox"/> Nauseated | <input type="checkbox"/> Sickened |
| | <input type="checkbox"/> Blown Away | <input type="checkbox"/> Dying | <input type="checkbox"/> Frightened | <input type="checkbox"/> Panicked | <input type="checkbox"/> Stable |
| | <input type="checkbox"/> Confused | <input type="checkbox"/> Energy Drained | <input type="checkbox"/> Grappling | <input type="checkbox"/> Paralyzed | <input type="checkbox"/> Staggered |
| | <input type="checkbox"/> Cowering | <input type="checkbox"/> Entangled | <input type="checkbox"/> Helpless | <input type="checkbox"/> Petrified | <input type="checkbox"/> Stunned |
| | <input type="checkbox"/> Dazed | <input type="checkbox"/> Exhausted | <input type="checkbox"/> Incorporeal | <input type="checkbox"/> Pinned | <input type="checkbox"/> Unconscious |