Quick Spell Sheet

Spell Name:_____ **Total Strain:** _____ **Min. STAM:** _____ **Difficulty:** _____
Drain: _____ **Surge:** ____ strain per _____ **Notes:**
EPOT: _____ **# Targets:** _____ **AOE:** _____ **Range:** _____
Damage: ____ **Staging:** _____ **Resist:** _____

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