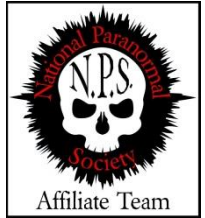


Video Review Log



DATE: _____ MEMBER NAME: _____

LOCATION: _____

WEATHER CONDITIONS (including temperature): _____

MOON PHASE: _____

SOLAR ACTIVITY: _____

PROGRAM USED: _____

EQUIPMENT USED: _____

TIME STAMP

TAGGING
