

Original-QRP-Contest

organized by QRP-Contest-Community

Date: _____

Call: Category:

e-mail address: Phone

OP Name:

Street:

Place/Town:

ZIP-Code: Country:

Absolutely to be filled in by operator/Unbedingt vom Operator auszufuellen (Bonus points!):

Band	TX/TRX (type or description)	INP	OUT	HB	KIT	OTHERs
80						
40						
20						

(INP=Input; OUT=Output; HB=Homebrew by OP; KIT=assembled by OP; OTHERs=commercial, bought and all others)

Please mark the correct column per band!/Bitte die richtige Spalte pro Band ankreuzen! (HB, KIT, OTHERs)

To be filled in by OP:

Band	QSO	Multi	Antenna	RX	Rest periode	time (start-end)	hours
80					1		
40					2		
20							
Total						Total	

Other Station Details, Remarks, Comments:

Date:

Signature:

Page: 2

[illegible]

Page: 3

[illegible]

Page: 4

[illegible]