



TITLE: \_\_\_\_\_  
 PLAYER: \_\_\_\_\_  
 CASTE: \_\_\_\_\_

CONCEPT: \_\_\_\_\_  
 NATURE: \_\_\_\_\_  
 ANIMA: \_\_\_\_\_

**ATTRIBUTES**

STRENGTH \_\_\_\_\_ OOOOO CHARISMA \_\_\_\_\_ OOOOO PERCEPTION \_\_\_\_\_ OOOOO  
 DEXTERITY \_\_\_\_\_ OOOOO MANIPULATION \_\_\_\_\_ OOOOO INTELLIGENCE \_\_\_\_\_ OOOOO  
 STAMINA \_\_\_\_\_ OOOOO APPEARANCE \_\_\_\_\_ OOOOO WITS \_\_\_\_\_ OOOOO

**ABILITIES**

**DUSK**

ARCHERY \_\_\_\_\_ OOOOO  
 BRAWL \_\_\_\_\_ OOOOO  
 MARTIAL ARTS \_\_\_\_\_ OOOOO  
 MELEE \_\_\_\_\_ OOOOO  
 THROWN \_\_\_\_\_ OOOOO

**MIDNIGHT**

ENDURANCE \_\_\_\_\_ OOOOO  
 PERFORMANCE \_\_\_\_\_ OOOOO  
 PRESENCE \_\_\_\_\_ OOOOO  
 RESISTANCE \_\_\_\_\_ OOOOO  
 SURVIVAL \_\_\_\_\_ OOOOO

**DAYBREAK**

CRAFT \_\_\_\_\_ OOOOO  
 INVESTIGATION \_\_\_\_\_ OOOOO  
 LORE \_\_\_\_\_ OOOOO  
 MEDICINE \_\_\_\_\_ OOOOO  
 OCCULT \_\_\_\_\_ OOOOO

**DAY**

ATHLETICS \_\_\_\_\_ OOOOO  
 AWARENESS \_\_\_\_\_ OOOOO  
 DODGE \_\_\_\_\_ OOOOO  
 LARCENY \_\_\_\_\_ OOOOO  
 STEALTH \_\_\_\_\_ OOOOO

**MOONSHADOW**

BUREAUCRACY \_\_\_\_\_ OOOOO  
 LINGUISTICS \_\_\_\_\_ OOOOO  
 RIDE \_\_\_\_\_ OOOOO  
 SAIL \_\_\_\_\_ OOOOO  
 SOCIALIZE \_\_\_\_\_ OOOOO

**SPECIALTIES**

\_\_\_\_\_ OOOOO  
 \_\_\_\_\_ OOOOO  
 \_\_\_\_\_ OOOOO  
 \_\_\_\_\_ OOOOO  
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**ADVANTAGES**

**BACKGROUNDS**

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 \_\_\_\_\_ OOOOO  
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NAME COST NAME COST  
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**CHARMS**

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**WEAPONS**

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**WILLPOWER**

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**VIRTUES**

COMPASSION TEMPERANCE  
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CONVICTION VALOR  
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**ANIMA**

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**HEALTH**

**SOAK**

B \_\_\_\_\_ L \_\_\_\_\_ A \_\_\_\_\_

-0	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
-1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
-2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
-4	<input type="checkbox"/>
INCAPACITATED	<input type="checkbox"/>

**RESONANCE**

**RESONANCE EFFECTS**

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**ESSENCE**

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PERSONAL \_\_\_\_\_ | \_\_\_\_\_  
 PERIPHERAL \_\_\_\_\_ | \_\_\_\_\_  
 BLOOD FEAST \_\_\_\_\_ | \_\_\_\_\_  
 COMMITTED \_\_\_\_\_

**EXPERIENCE**

\_\_\_\_\_