



NAME: _____
 PLAYER: _____
 CASTE: _____

CONCEPT: _____
 MOTIVATION: _____
 ANIMA: _____

ATTRIBUTES

STRENGTH _____ 00000 CHARISMA _____ 00000 PERCEPTION _____ 00000
 DEXTERITY _____ 00000 MANIPULATION _____ 00000 INTELLIGENCE _____ 00000
 STAMINA _____ 00000 APPEARANCE _____ 00000 WITS _____ 00000

ABILITIES

DAWN

ARCHERY _____ 00000
 MARTIAL ARTS _____ 00000
 MELEE _____ 00000
 THROWN _____ 00000
 WAR _____ 00000

ZENITH

INTEGRITY _____ 00000
 PERFORMANCE _____ 00000
 PRESENCE _____ 00000
 RESISTANCE _____ 00000
 SURVIVAL _____ 00000

TWILIGHT

CRAFT _____ 00000
 INVESTIGATION _____ 00000
 LORE _____ 00000
 MEDICINE _____ 00000
 OCCULT _____ 00000

NIGHT

ATHLETICS _____ 00000
 AWARENESS _____ 00000
 DODGE _____ 00000
 LARCENY _____ 00000
 STEALTH _____ 00000

ECLIPSE

BUREAUCRACY _____ 00000
 LINGUISTICS _____ 00000
 RIDE _____ 00000
 SAIL _____ 00000
 SOCIALIZE _____ 00000

SPECIALTIES

_____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000

ADVANTAGES

BACKGROUNDS

_____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000
 _____ 00000

CHARMS

NAME	COST	NAME	COST
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WEAPONS

WILLPOWER

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

VIRTUES

COMPASSION _____ TEMPERANCE _____
 ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

CONVICTION _____ VALOR _____
 ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

ANIMA

HEALTH

SOAK
 B _____ L _____ A _____

LIMIT BREAK

VIRTUE FLAW

-0	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	D.V. EVADE
-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"/>	PARRY
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
-4	<input type="checkbox"/>	MENTAL
INCAPACITATED	<input type="checkbox"/>	

ESSENCE

○ ○ ○ ○ ○ ○ ○ ○
 PERSONAL _____ | _____
 PERIPHERAL _____ | _____
 COMMITTED _____

EXPERIENCE
