



NAME: _____
 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

DAWN

ARCHERY _____ OOOOO
 BRAWL _____ OOOOO
 MARTIAL ARTS _____ OOOOO
 MELEE _____ OOOOO
 THROWN _____ OOOOO

ZENITH

ENDURANCE _____ OOOOO
 PERFORMANCE _____ OOOOO
 PRESENCE _____ OOOOO
 RESISTANCE _____ OOOOO
 SURVIVAL _____ OOOOO

TWILIGHT

CRAFT _____ OOOOO
 INVESTIGATION _____ OOOOO
 LORE _____ OOOOO
 MEDICINE _____ OOOOO
 OCCULT _____ OOOOO

NIGHT

ATHLETICS _____ OOOOO
 AWARENESS _____ OOOOO
 DODGE _____ OOOOO
 LARCENY _____ OOOOO
 STEALTH _____ OOOOO

ECLIPSE

BUREAUCRACY _____ OOOOO
 LINGUISTICS _____ OOOOO
 RIDE _____ OOOOO
 SAIL _____ OOOOO
 SOCIALIZE _____ OOOOO

SPECIALTIES

_____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO

ADVANTAGES

BACKGROUNDS

_____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO

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

CHARMS

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

WEAPONS

WILLPOWER

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

VIRTUES

COMPASSION OOOOO □□□□□	TEMPERANCE OOOOO □□□□□
CONVICTION OOOOO □□□□□	VALOR OOOOO □□□□□

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"/>
-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"/>

ESSENCE

○ ○ ○ ○ ○ ○ ○ ○

PERSONAL _____ | _____
 PERIPHERAL _____ | _____
 COMMITTED _____

EXPERIENCE



EXPANDED BACKGROUNDS

ALLIES

ARTIFACT

BACKING

CONTACTS

FAMILIAR

FOLLOWERS

INFLUENCE

MANSE

MENTOR

RESOURCES

POSSESSIONS

GEAR(CARRIED)

EQUIPMENT(OWNED)

LANGUAGES

DERANGEMENTS

EXPERIENCE

TOTAL: _____
GAINED FROM:

EXPERIENCE

TOTAL SPENT: _____
SPENT ON:

