

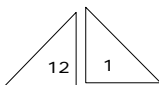


Spells of <input type="text"/> level (class: <input type="text"/>)			
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Character name: _____		Age: _____	
Player name: _____		Creation date: _____	
Check = 1d20		+ Charisma Modifier	
Result	..0	1-3	4-6
		7-9	10-12
		13-15	16-18
		19-21	22+
Max HD	Lev - 4	Lev - 3	Lev - 2
	Lev - 1	Level	Lev + 1
			Lev + 2
			Lev + 3
			Lev + 4
Influenced Hit Dice 2d6 +	CHA mod. <input type="text"/>	Level <input type="text"/>	Daily attempts <input type="text"/>
Total = 3 +		CHA mod. <input type="text"/>	Feat <input type="text"/>

Gods, Domains and Powers	
Divinity	
<input style="width: 100%; height: 100%;" type="text"/>	_____
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Spells						
Saving CR	Level	Daily Spells	Bonus Spells	Known Spells	Classes who uses spells	
	0	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	0		<input type="checkbox"/> Bard	<input type="checkbox"/> Sorcerer
	1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	12-13		<input type="checkbox"/> Cleric	<input type="checkbox"/> Wizard
	2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14-15		<input type="checkbox"/> Druid	<input type="checkbox"/> Prestige: _____
	3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	16-17		<input type="checkbox"/> Paladin	<input type="checkbox"/> _____
	4	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	18-19		<input type="checkbox"/> Ranger	<input type="checkbox"/> _____
	5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	20-21		Spells range Close <input type="text"/> Medium <input type="text"/> Long <input type="text"/> <small>25ft+5ft/2 lev 100ft+10ft / lev 400ft+40ft / lev</small>	
	6	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	22-23		Specializations – Notes	
	7	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	24-25		_____	
	8	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	26-27		_____	
	9	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	28-29		_____	



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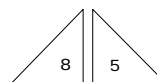
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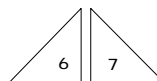


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