



NAME: _____
 PLAYER: _____
 CASTE: _____

CONCEPT: _____
 MOTIVATION: _____
 ANIMA: _____

ATTRIBUTES

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

ABILITIES

DAWN

ARCHERY _____ OOOOO
 MARTIAL ARTS _____ OOOOO
 MELEE _____ OOOOO
 THROWN _____ OOOOO
 WAR _____ OOOOO

ZENITH

INTEGRITY _____ 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

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
