



## INVESTIGATOR INFO

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Place of Birth \_\_\_\_\_

Residence \_\_\_\_\_

Gender \_\_\_\_\_ Age \_\_\_\_\_

Affluence \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

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## CHARACTERISTICS

**STR**ength \_\_\_\_\_ FULL / HALF

**CON**stitution \_\_\_\_\_ FULL / HALF

**DEX**terity \_\_\_\_\_ FULL / HALF

**INT**elligence \_\_\_\_\_ FULL / HALF

**POW**er \_\_\_\_\_ FULL / HALF

## SUPPLEMENTAL INFO

**MOV** \_\_\_\_\_

Luck \_\_\_\_\_ STARTING / CURRENT

Magic Pts \_\_\_\_\_ STARTING / CURRENT

## ADVANTAGES & DISADVANTAGES

\_\_\_\_\_

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## COMMON SKILLS

Athletics \_\_\_\_\_ FULL / HALF

Drive \_\_\_\_\_ FULL / HALF

Navigate \_\_\_\_\_ FULL / HALF

Observation \_\_\_\_\_ FULL / HALF

Read Person \_\_\_\_\_ FULL / HALF

Research \_\_\_\_\_ FULL / HALF

Sense Vestigia \_\_\_\_\_ FULL / HALF

Social \_\_\_\_\_ FULL / HALF

Stealth \_\_\_\_\_ FULL / HALF

## EXPERT SKILLS

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

\_\_\_\_\_ FULL / HALF

## COMBAT SKILLS

Fighting \_\_\_\_\_ FULL / HALF

Firearms \_\_\_\_\_ FULL / HALF

## DAMAGE

☐ Hurt

☐ Bloodied

☐ Down

☐ Impaired

## WEAPONS

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

\_\_\_\_\_ / FULL / HALF / DAMAGE / RANGE

## MAGIC SPELLS

☐ \_\_\_\_\_ ORDER / NAME

☐ \_\_\_\_\_ ORDER / NAME

☐ \_\_\_\_\_ ORDER / NAME

☐ \_\_\_\_\_ ORDER / NAME

☐ \_\_\_\_\_ ORDER / NAME

☐ \_\_\_\_\_ ORDER / NAME

NAME 

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OCCUPATION 

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## CONTACTS



_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR
_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR
_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR
_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR

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_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR
_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR
_____ NAME / RELATIONSHIP	<input type="checkbox"/> SECURE <input type="checkbox"/> SOUR

## SIGNARE

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## MAGIC SPELLS



<input type="checkbox"/>	_____ ORDER / NAME
<input type="checkbox"/>	_____ ORDER / NAME
<input type="checkbox"/>	_____ ORDER / NAME

## BACKSTORY



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## EQUIPMENT



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## CASE FILES



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