

Name: _____		
Race: _____	Sex: _____	Height: _____
Class: _____	Hair: _____	Weight: _____
Align: _____	Eyes: _____	Age: _____
Level: _____	Exp: _____	Next: _____

	Str	Mus Sta		Hit	Dmg	Max	Op Drs	BB/L G
				Wgt				
	Dex	Aim Bal		Miss				
				Rctn		Def Adj		
	Con	Hlth Fit		Sys Shk		Poison Save		
				HP		Res Sur		
	Int	Res Kno		SpII Lvl	Max SpII	SpII Imm		
				Lng		% Learn		
	Wis	Int Wil		SpII Fail		Bonus SpII		
				Mag Def		SpII Imm		
	Cha	Led App		Loyal		Hnch		
				Rctn				

Saving Throws	Base	Modifiers		
Paralyze/Poison Death Magic				
Rod/Staff Wand				
Petrification Polymorph				
Breath Weapon				
Spell				

Racial Abilities

Armor										
Base	+	Dex	+	Armor	+	Magic	+	Spe	=	Total AC
<div> <div></div> <div>Surprised AC _____</div> <div>Shieldless AC _____</div> <div>Rear AC _____</div> </div>										

Hit Die:	Death At:	Regen:	1	2	3	4	5	6	7	8	9	10	11	+
Max HP		Current HP												

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[illegible][illegible][illegible]

Priest Spells						
1st	2nd	3rd	4th	5th	6th	7th

		Other Currencies:	Supplies:		
Platinum :	_____ PP	_____	Rations	<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"/>
Gold :	_____ GP	_____		<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"/>
Electrum :	_____ EP	_____	Drinks	<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"/>
Silver :	_____ SP	_____	Feed:	<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"/>
Copper :	_____ CP	_____			