

# CALL OF CTHULHU

## INVESTIGATOR SHEET

Name: \_\_\_\_\_ Sex: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Age: \_\_\_\_\_  
 Income: \_\_\_\_\_ Savings: \_\_\_\_\_  
 Nationality: \_\_\_\_\_ Residence: \_\_\_\_\_

INVESTIGATOR STATISTICS					MAGIC POINTS					HIT POINTS				
STR <sub>3d6</sub> _____	DEX <sub>3d6</sub> _____	INT <sub>2d6+6</sub> _____	Idea <sub>INTx5</sub> _____		Unconscious = 0 1					Dead = 0 <sup>UNCONSCIOUS</sup> 1 2				
CON <sub>3d6</sub> _____	APP <sub>3d6</sub> _____	POW <sub>3d6</sub> _____	Luck <sub>POWx5</sub> _____		2	3	4	5	6	3	4	5	6	7
SIZ <sub>2d6+6</sub> _____	SAN <sub>99 - Cthulhu Mythos</sub> _____	EDU <sub>3d6+3</sub> _____	Know <sub>EDUx5</sub> _____		7	8	9	10	11	8	9	10	11	12
Schools _____					12	13	14	15	16	13	14	15	16	17
Degrees _____					17	18	19	20	21	18	19	20	21	22
Damage Bonus/Penalty _____					22	23	24	25	26	23	24	25	26	27

SANITY POINTS															INVESTIGATOR PORTRAIT					
(20% current SAN: _____) Permanent Insanity = 0 1 2 3																				
4	5	6	7	8	9	10	11	12	13	14	15	16	17	18						19
20	21	22	23	24	25	26	27	28	29	30	31	32	33	34						35
36	37	38	39	40	41	42	43	44	45	46	47	48	49	50						51
52	53	54	55	56	57	58	59	60	61	62	63	64	65	66						67
68	69	70	71	72	73	74	75	76	77	78	79	80	81	82						83
84	85	86	87	88	89	90	91	92	93	94	95	96	97	98						99

INVESTIGATOR SKILLS		
<input type="checkbox"/> Accounting (10) _____	<input type="checkbox"/> Hide (10) _____	<input type="checkbox"/> Read/Write English (EDUx5) _____
<input type="checkbox"/> Anthropology (00) _____	<input type="checkbox"/> History (20) _____	<input type="checkbox"/> Read/Write _____ (00) _____
<input type="checkbox"/> Archaeology (00) _____	<input type="checkbox"/> Jump (25) _____	<input type="checkbox"/> Read/Write _____ (00) _____
<input type="checkbox"/> Astronomy (00) _____	<input type="checkbox"/> Law (05) _____	<input type="checkbox"/> Read/Write _____ (00) _____
<input type="checkbox"/> Bargain (05) _____	<input type="checkbox"/> Library Use (25) _____	<input type="checkbox"/> Ride (05) _____
<input type="checkbox"/> Botany (00) _____	<input type="checkbox"/> Linguist (00) _____	<input type="checkbox"/> Sing (05) _____
<input type="checkbox"/> Camouflage (25) _____	<input type="checkbox"/> Listen (25) _____	<input type="checkbox"/> Sneak (10) _____
<input type="checkbox"/> Chemistry (00) _____	<input type="checkbox"/> Make Maps (10) _____	<input type="checkbox"/> Speak _____ (00) _____
<input type="checkbox"/> Climb (40) _____	<input type="checkbox"/> Mechanical Repair (20) _____	<input type="checkbox"/> Speak _____ (00) _____
<input type="checkbox"/> Credit Rating (15) _____	<input type="checkbox"/> Occult (05) _____	<input type="checkbox"/> Spot Hidden (25) _____
<input type="checkbox"/> Cthulhu Mythos (00) _____	<input type="checkbox"/> Operate Hvy. Machinery (00) _____	<input type="checkbox"/> Swim (25) _____
<input type="checkbox"/> Debate (10) _____	<input type="checkbox"/> Oratory (05) _____	<input type="checkbox"/> Throw (25) _____
<input type="checkbox"/> Diagnose Disease (05) _____	<input type="checkbox"/> Pharmacy (00) _____	<input type="checkbox"/> Track (10) _____
<input type="checkbox"/> Dodge (DEX x 2) _____	<input type="checkbox"/> Photography (10) _____	<input type="checkbox"/> Treat Disease (05) _____
<input type="checkbox"/> Drive Automobile (20) _____	<input type="checkbox"/> Physics (00) _____	<input type="checkbox"/> Treat Poison (05) _____
<input type="checkbox"/> Drive _____ (____) _____	<input type="checkbox"/> Pick Pocket (05) _____	<input type="checkbox"/> Zoology (00) _____
<input type="checkbox"/> Electrical Repair (10) _____	<input type="checkbox"/> Pilot Aircraft (00) _____	<input type="checkbox"/> _____ (____) _____
<input type="checkbox"/> Fast Talk (05) _____	<input type="checkbox"/> Pilot _____ (____) _____	<input type="checkbox"/> _____ (____) _____
<input type="checkbox"/> First Aid (30) _____	<input type="checkbox"/> Psychoanalysis (00) _____	<input type="checkbox"/> _____ (____) _____
<input type="checkbox"/> Geology (00) _____	<input type="checkbox"/> Psychology (05) _____	<input type="checkbox"/> _____ (____) _____

WEAPONS						CASH, PHOBIAS, SPELLS & NOTES		
<b>Weapon</b>	<b>Shots</b>	<b>Attack</b>	<b>Parry</b>	<b>Damage</b>	<b>Range</b>	<b>Hp.</b>	<b>Ammo</b>	Cash on hand: _____
Fist/Punch		50%		1D3				Phobias: _____
Kick		25%		1D6				_____
Grapple		25%		Special				Other Notes: _____
_____								_____
_____								_____
_____								_____