

Name: _____		Date: _____		Event: _____	
City: _____		State: _____		Track: _____	
Track Conditions	<input type="checkbox"/> Indoor	<input type="checkbox"/> Tight	<input type="checkbox"/> Smooth	<input type="checkbox"/> Hard Packed	<input type="checkbox"/> Blue Groove
	<input type="checkbox"/> Outdoor	<input type="checkbox"/> Open	<input type="checkbox"/> Rough	<input type="checkbox"/> Loose/Loamy	<input type="checkbox"/> Dry
		<input type="checkbox"/> Wet	<input type="checkbox"/> Grass	<input type="checkbox"/> Low Bite	<input type="checkbox"/> High Bite
		<input type="checkbox"/> Dusty	<input type="checkbox"/> Astro Turf	<input type="checkbox"/> Med Bite	<input type="checkbox"/> Other _____

**Front Suspension**

Toe: \_\_\_\_\_

Ride Height: \_\_\_\_\_

Camber: \_\_\_\_\_

Steering Ackerman: \_\_\_\_\_

Sway Bar: \_\_\_\_\_

Shock Type:  Bladder  Emulsion Oil: \_\_\_\_\_

Piston: \_\_\_\_\_

Spring: \_\_\_\_\_

Limiters/Droop: \_\_\_\_\_

Overall Shock Length: \_\_\_\_\_

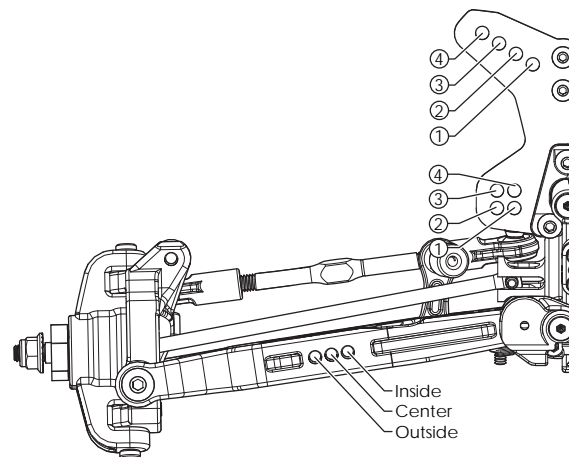
Shock Location: \_\_\_\_\_

Bump Steer: \_\_\_\_\_

Camber Link: \_\_\_\_\_

Front Diff Fluid: \_\_\_\_\_

Center Diff Fluid: \_\_\_\_\_



Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Rear Suspension**

Toe: \_\_\_\_\_

Anti-Squat: \_\_\_\_\_

Ride Height: \_\_\_\_\_

Camber: \_\_\_\_\_

Rear Hub Spacing: \_\_\_\_\_

Sway Bar: \_\_\_\_\_

Shock Type:  Bladder  Emulsion Oil: \_\_\_\_\_

Piston: \_\_\_\_\_

Spring: \_\_\_\_\_

Limiters/Droop: \_\_\_\_\_

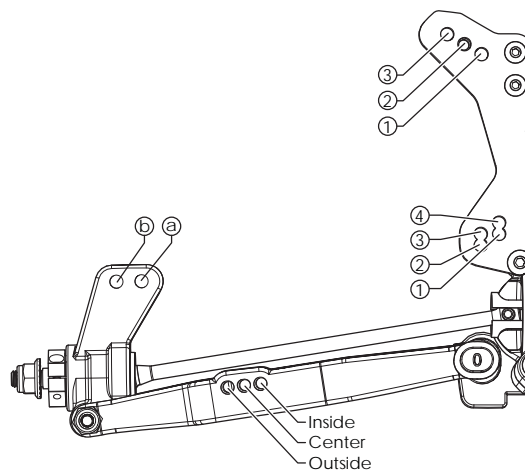
Camber Link: \_\_\_\_\_

Shock Locations: \_\_\_\_\_

Overall Shock Length: \_\_\_\_\_

Rear Diff Fluid: \_\_\_\_\_

Battery Position: \_\_\_\_\_



**Electronics**

Radio: \_\_\_\_\_

Servo: \_\_\_\_\_

ESC: \_\_\_\_\_

Initial Brake: \_\_\_\_\_

Drag Brake: \_\_\_\_\_

Throttle Profile: \_\_\_\_\_

Timing Advance: \_\_\_\_\_

Throttle/Brake Expo: \_\_\_\_\_

Servo Expo: \_\_\_\_\_

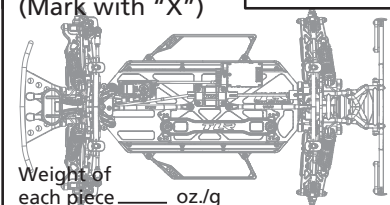
Throttle/Brake EPA: \_\_\_\_\_

Motor: \_\_\_\_\_

Pinion: \_\_\_\_\_ Spur: \_\_\_\_\_

Battery: \_\_\_\_\_

**Weight Placement**  
(Mark with "X")



Weight of each piece \_\_\_\_\_ oz./g

	Compound	Insert	Additive
Tires Front: _____	_____	_____	_____
Tires Rear: _____	_____	_____	_____
Notes: _____	_____		