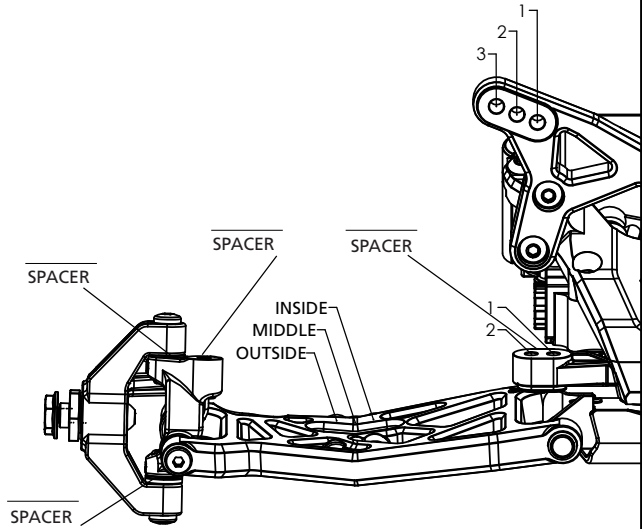


Name: _____	Date: _____
City: _____	Event: _____
State: _____	Track: _____
Track Conditions: <input type="checkbox"/> Indoor <input type="checkbox"/> Tight <input type="checkbox"/> Smooth <input type="checkbox"/> Hard Packed <input type="checkbox"/> Blue Groove <input type="checkbox"/> Wet <input type="checkbox"/>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

**Front Suspension**

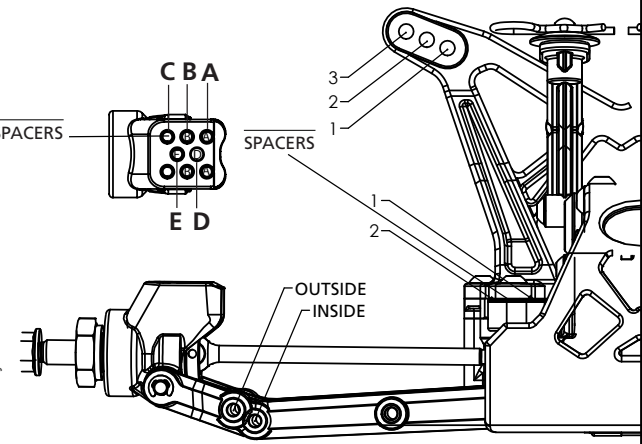
Toe: \_\_\_\_\_  
 Ride Height: \_\_\_\_\_  
 Camber: \_\_\_\_\_  
 Caster:  0°  3°  5°  10°  
 Kick Angle:  20°  25°  30°  
 Sway Bar: \_\_\_\_\_  
 Oil: \_\_\_\_\_  
 Piston: \_\_\_\_\_  
 Spring: \_\_\_\_\_  
 Spindle Type:  Inline  Trailing  
 Shock Limiters: \_\_\_\_\_  
 Shock Location: \_\_\_\_\_  
 Bump Steer: \_\_\_\_\_  
 Camber Link: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



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

**Rear Suspension**

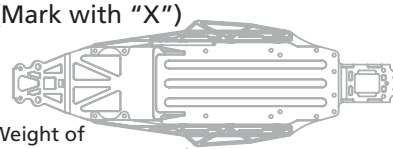
Chassis Configuration:  Rear Motor  Mid Motor  
 Toe: \_\_\_\_\_  
 Anti-Squat: \_\_\_\_\_  
 Roll Center:  Low Roll Center (LRC)  High Roll Center (HRC)  
 Ride Height: \_\_\_\_\_  
 Camber: \_\_\_\_\_  
 Rear Hub Spacing: \_\_\_\_\_  
 Hex Width: \_\_\_\_\_  
 Sway Bar: \_\_\_\_\_  
 Oil: \_\_\_\_\_  
 Piston: \_\_\_\_\_  
 Spring: \_\_\_\_\_  
 Shock Limiters: \_\_\_\_\_  
 Camber Link: \_\_\_\_\_  
 Shock Locations: \_\_\_\_\_  
 Wing/Wickerbill: \_\_\_\_\_  
 Battery Position: \_\_\_\_\_



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