

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"/> Dusty	<input type="checkbox"/> Astro Turf
				<input type="checkbox"/> Low Bite	<input type="checkbox"/> High Bite
				<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: _____

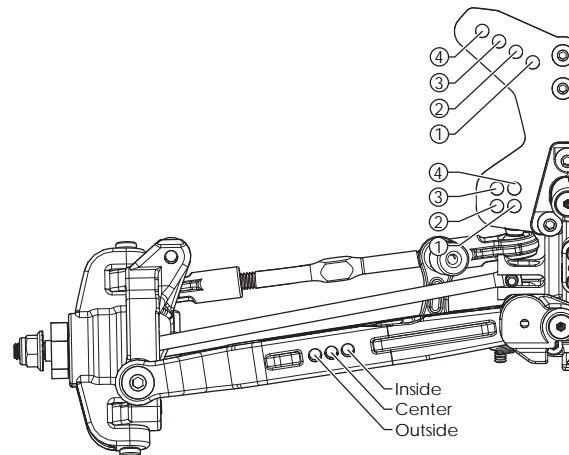
Shock Location: _____

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: _____

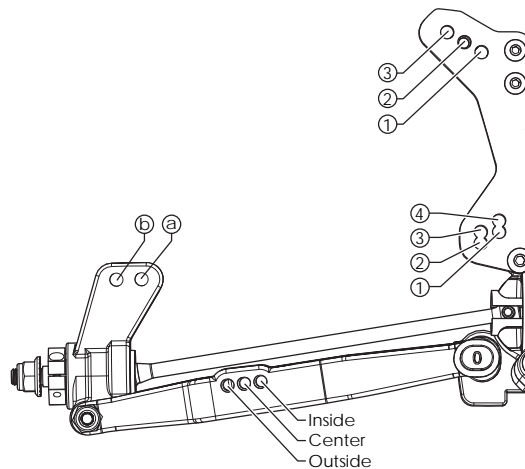
Camber Link: _____

Shock Locations: _____

Overall Shock Length: _____

Rear Diff Fluid: _____

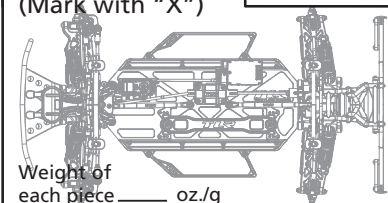
Battery Position: _____



Electronics

Radio: _____	Timing Advance: _____
Servo: _____	Throttle/Brake Expo: _____
ESC: _____	Servo Expo: _____
Initial Brake: _____	Throttle/Brake EPA: _____
Drag Brake: _____	Motor: _____
Throttle Profile: _____	Pinion: _____ Spur: _____
	Battery: _____

Weight Placement
(Mark with "X")



Weight of each piece _____ oz./g

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