

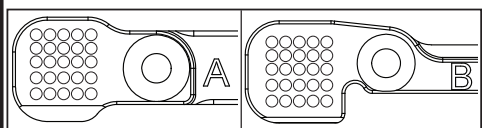
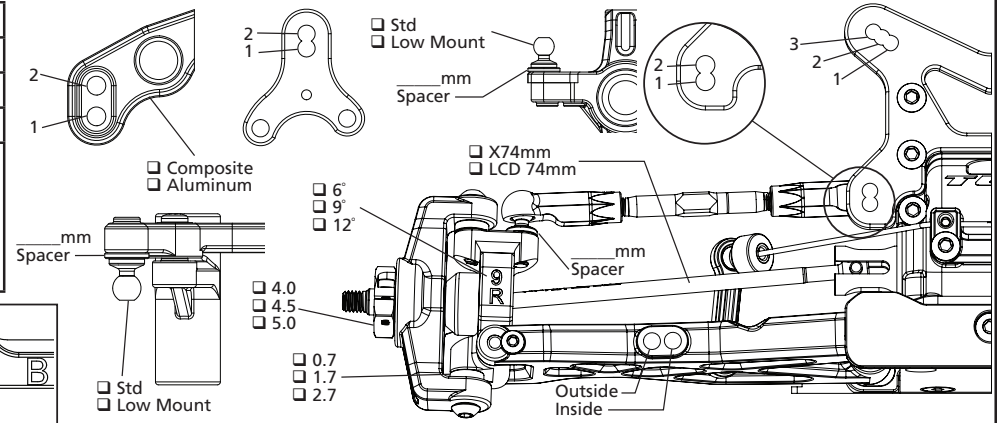
Name: _____ Date: _____ Event: _____ Track: _____

Track Conditions

<input type="checkbox"/> Indoor	<input type="checkbox"/> Clay	<input type="checkbox"/> Carpet	<input type="checkbox"/> Tight	<input type="checkbox"/> Smooth	<input type="checkbox"/> Hard Packed	<input type="checkbox"/> Blue Groove	<input type="checkbox"/> Wet	Bite: <input type="checkbox"/> Low <input type="checkbox"/> Med <input type="checkbox"/> High	Other: _____
<input type="checkbox"/> Outdoor	<input type="checkbox"/> Dirt	<input type="checkbox"/> Astro	<input type="checkbox"/> Open	<input type="checkbox"/> Rough	<input type="checkbox"/> Loose/Loamy	<input type="checkbox"/> Dry	<input type="checkbox"/> Dusty	Tread: <input type="checkbox"/> Pin <input type="checkbox"/> Ghost <input type="checkbox"/> Slicks	_____

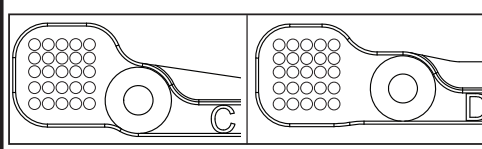
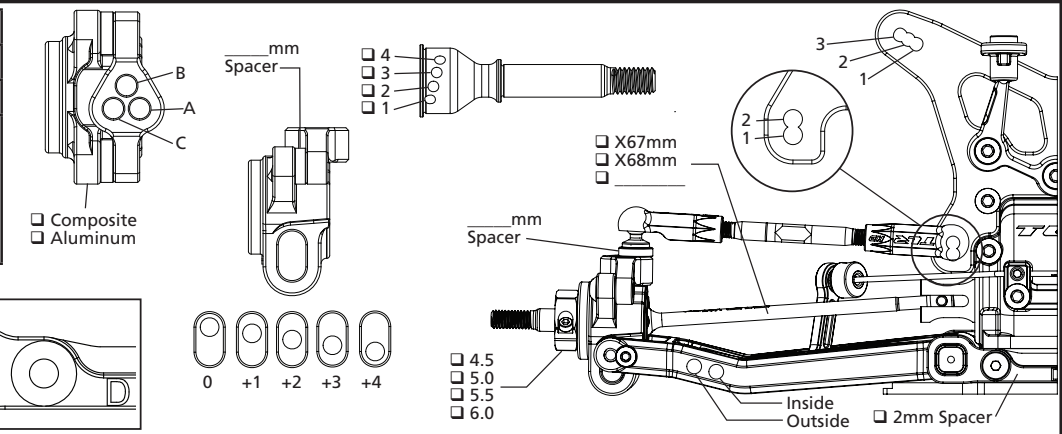
Front Suspension

Ride Height	_____ mm
Camber	_____ °
Toe	_____ °
Sway Bar	_____ mm
Notes:	_____



Rear Suspension

Ride Height	_____ mm
Camber	_____ °
Sway Bar	_____ mm
Notes:	_____



Chassis

Differentials	Front	Center	Rear
Fluid			
Int Gears	<input type="checkbox"/> Stl <input type="checkbox"/> Comp	<input type="checkbox"/> Stl <input type="checkbox"/> Comp	<input type="checkbox"/> Stl <input type="checkbox"/> Comp
Weight	_____ g	_____ g	_____ g
Ring/Pin	<input type="checkbox"/> Stl <input type="checkbox"/> Comp	<input type="checkbox"/> Stl <input type="checkbox"/> Comp	<input type="checkbox"/> Stl <input type="checkbox"/> Comp
Center Diff Cover	<input type="checkbox"/> Composite <input type="checkbox"/> Aluminum		
Slipper Pads	<input type="checkbox"/> Torque/Yellow <input type="checkbox"/> Drive/Orange		

Aerodynamics

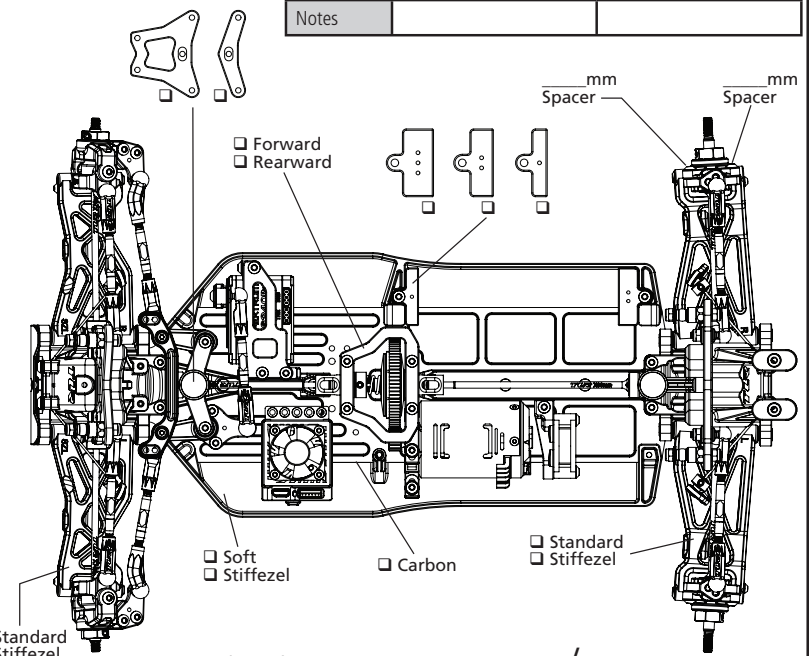
Body	_____
Fr Scoop	_____
Rr Wing	_____
Wicker	_____
Angle	_____ °
Notes	_____

Tires

	Front	Rear
Brand	_____	_____
Tread	_____	_____
Compound	_____	_____
Insert	_____	_____
Sauce	_____	_____
Wheel	_____	_____
Notes	_____	_____

Shocks

	Front	Rear
Shock Caps	_____	_____
Oil	_____	_____
Piston	<input type="checkbox"/> Thin	<input type="checkbox"/> Thin
Limiter, Int	_____ mm	_____ mm
Shaft Dia	<input type="checkbox"/> 3.0mm <input type="checkbox"/> 3.5mm	<input type="checkbox"/> 3.0mm <input type="checkbox"/> 3.5mm
Limiter, Ext	_____ mm	_____ mm
Stroke	_____ mm	_____ mm
Eyelet	<input type="checkbox"/> Std <input type="checkbox"/> +2mm	<input type="checkbox"/> Std <input type="checkbox"/> +2mm
Spring	_____	_____
Spring Cup	<input type="checkbox"/> Low <input type="checkbox"/> Mid <input type="checkbox"/> High	<input type="checkbox"/> Low <input type="checkbox"/> Mid <input type="checkbox"/> High



Electronics

Radio	_____	ESC	_____
Servo	_____	Thro Prof	_____
Battery	_____	Timing Adv	_____
Battery Wt	_____ g	Initial Brake	_____
Motor	_____	Drag Brake	_____
Gearing	/	Thr/Bra EPA	/

Total Weight: _____ g Fr/Rr _____ % / _____ %