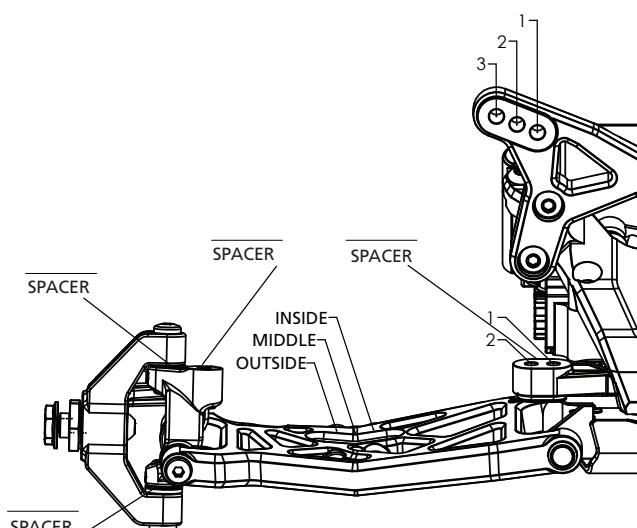
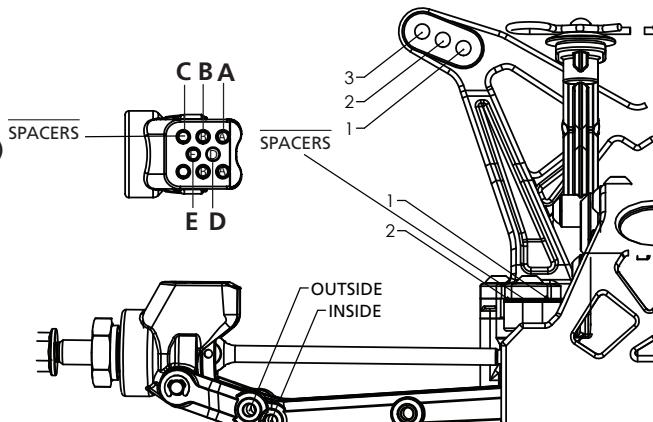
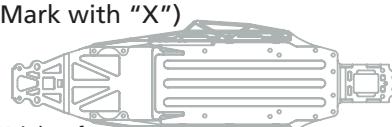


Name: _____	Date: _____	Event: _____
City: _____	State: _____	Track: _____
Track <input type="checkbox"/> Indoor <input type="checkbox"/> Tight <input type="checkbox"/> Smooth <input type="checkbox"/> Hard Packed <input type="checkbox"/> Blue Groove <input type="checkbox"/> Wet <input type="checkbox"/> Grass <input type="checkbox"/> Low Bite <input type="checkbox"/> High Bite Conditions <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: <input type="checkbox"/> 0° <input type="checkbox"/> 3° <input type="checkbox"/> 5° <input type="checkbox"/> 10° Kick Angle: <input type="checkbox"/> 20° <input type="checkbox"/> 25° <input type="checkbox"/> 30° Sway Bar: _____ Oil: _____ Piston: _____ Spring: _____ Spindle Type: <input type="checkbox"/> Inline <input type="checkbox"/> Trailing Shock Limiters: _____ Shock Location: _____ Bump Steer: _____ Camber Link: _____ Rear Suspension Chassis Configuration: <input type="checkbox"/> Rear Motor <input type="checkbox"/> Mid Motor Toe: _____ Anti-Squat: _____ Roll Center: <input type="checkbox"/> Low Roll Center (LRC) <input type="checkbox"/> 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: _____		
 Notes: _____  Electronics Timing Advance: _____ Radio: _____ Throttle/Brake Expo: _____ Servo: _____ Servo Expo: _____ ESC: _____ Throttle/Brake EPA: _____ Initial Brake: _____ Motor: _____ Drag Brake: _____ Pinion: _____ Spur: _____ Throttle Profile: _____ Battery: _____		
Weight Placement (Mark with "X") 	Tires Front: _____ Rear: _____ Notes: _____	Compound Insert Additive
Weight of each piece _____ oz./g		