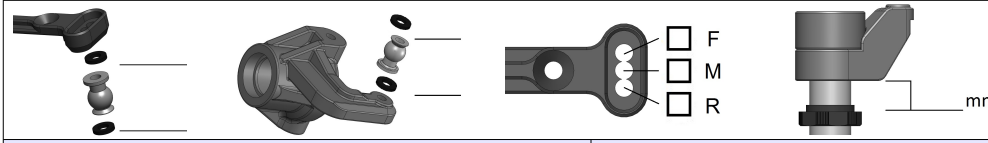


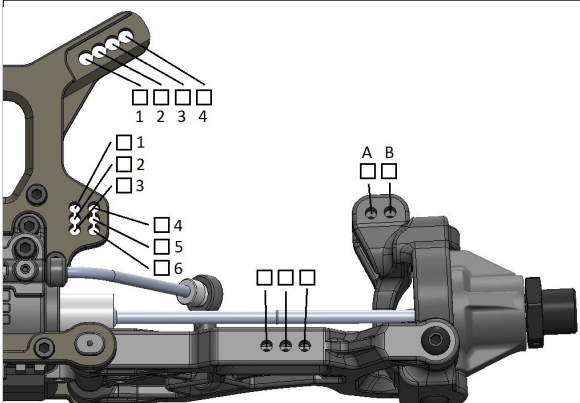
SETUP SHEET

Name:	Date:	Event:
Track Conditions:	Outdoor Open Loose/Loamy Dusty High Bite	Low Bite Rough
Indoor Tight Smooth Hard Packed Wet Dry Med Bite		Blue Groove

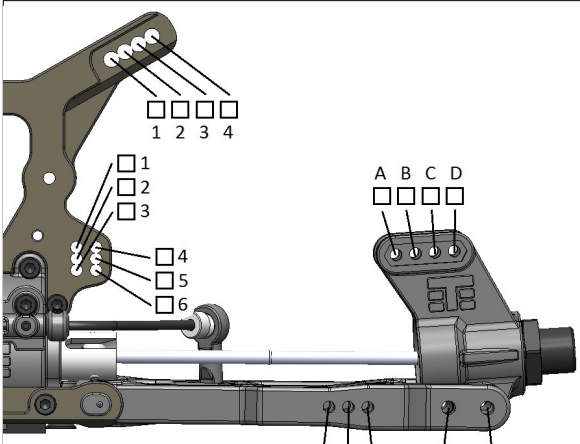
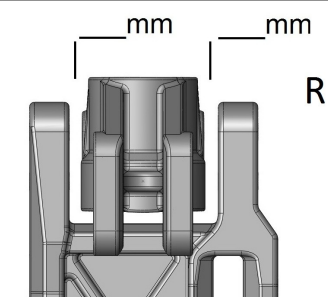
BUMPSTEER/ACKERMANN/SERVO SAVER SHOCKS

 <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> R </div> <div style="text-align: center;"> <input type="checkbox"/> mm </div> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th></th> <th>Front</th> <th>Rear</th> </tr> <tr> <td>Piston</td> <td></td> <td></td> </tr> <tr> <td>Oil</td> <td></td> <td></td> </tr> <tr> <td>Bladder</td> <td></td> <td></td> </tr> <tr> <td>Spring</td> <td></td> <td></td> </tr> <tr> <td>Length/ Droop</td> <td></td> <td></td> </tr> </table>		Front	Rear	Piston			Oil			Bladder			Spring			Length/ Droop		
	Front	Rear																	
Piston																			
Oil																			
Bladder																			
Spring																			
Length/ Droop																			

FRONT SUSPENSION

 <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 </div> <div style="text-align: center;"> <input type="checkbox"/> A <input type="checkbox"/> B </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <input type="checkbox"/> 12 <input type="checkbox"/> 11 <input type="checkbox"/> 10 FR INNER </div> <div style="text-align: center;"> <input type="checkbox"/> 1FRWD <input type="checkbox"/> 0 <input type="checkbox"/> 1BACK FR OUTER </div> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th></th> <th>Front</th> <th>Rear</th> </tr> <tr> <td>Ride Height</td> <td></td> <td></td> </tr> <tr> <td>Camber</td> <td></td> <td></td> </tr> <tr> <td>Toe</td> <td></td> <td></td> </tr> <tr> <td>Sway Bar</td> <td></td> <td></td> </tr> </table>		Front	Rear	Ride Height			Camber			Toe			Sway Bar			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3">TIRES</th> </tr> <tr> <th></th> <th>Front</th> <th>Rear</th> </tr> <tr> <td>Brand</td> <td></td> <td></td> </tr> <tr> <td>Compound</td> <td></td> <td></td> </tr> <tr> <td>Insert</td> <td></td> <td></td> </tr> <tr> <td>Wheel</td> <td></td> <td></td> </tr> </table>	TIRES				Front	Rear	Brand			Compound			Insert			Wheel		
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<h3>WING</h3> <p>Brand: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>Type: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>																																			

REAR BRACES

 <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 </div> <div style="text-align: center;"> <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 R INNER </div> <div style="text-align: center;"> <input type="checkbox"/> 1.5 <input type="checkbox"/> 2.5 <input type="checkbox"/> 3.5 R OUTER </div> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3">DIFFS</th> </tr> <tr> <th></th> <th>Front</th> <th>Center</th> <th>Rear</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	DIFFS				Front	Center	Rear					<p>Notes:</p> <p><input type="checkbox"/> Front <input type="checkbox"/> Middle <input type="checkbox"/> Rear (Front is always recommended)</p> <h3>WHEELBASE</h3> <div style="text-align: center;">  </div> <h3>DRIVETRAIN</h3> <p>Gear Ratio: _____ / _____</p> <p> <input type="checkbox"/> Pinion <input type="checkbox"/> Long Shank <input type="checkbox"/> Traktion <input type="checkbox"/> Clutch </p> <p> <input type="checkbox"/> Mech. Brake <input type="checkbox"/> Motor Brake </p>
DIFFS													
	Front	Center	Rear										
<h3>ELECTRONICS</h3> <p>ESC: _____</p> <p>Battery: _____</p> <p>Servo(s): _____</p> <p>Radio: _____</p> <p>Motor: _____</p>													
<p>Spur: <input type="checkbox"/> Metal <input type="checkbox"/> Plastic</p> <p>Shoes: _____</p> <p>Springs: _____</p> <p>Radio Notes: _____</p>													

NOTES: