

# SET-UP SHEET

# XRAY T4'15

RACE			
TRACK			
NAME			
CITY / COUNTRY			
CONTACT			

DATE	TEMPERATURE / °F or °C	AIR	TRACK
------	------------------------	-----	-------

QUALIFYING POSITION	BEST LAP TIME /sec	FINAL POSITION	RACE LENGTH /minutes
---------------------	--------------------	----------------	----------------------

TRACK CONDITION	<input type="checkbox"/> CARPET	<input type="checkbox"/> ASPHALT	
<input type="checkbox"/> TECHNICAL	<input type="checkbox"/> MIXED	<input type="checkbox"/> FAST	
TRACTION	<input type="checkbox"/> LOW	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> HIGH

FRONT	REAR
<b>TRANSMISSION</b>	

SOLID AXLE <input type="checkbox"/> YES	BALL DIFFERENTIAL <input type="checkbox"/> YES
SOLID ONE WAY DIFFERENTIAL <input type="checkbox"/> YES	
ONE WAY DIFFERENTIAL <input type="checkbox"/> YES	

GEAR DIFFERENTIAL <input type="checkbox"/> YES	GEAR DIFFERENTIAL <input type="checkbox"/> YES
OIL /Cst	OIL /Cst

PINION / T	SPUR GEAR / T
FINAL DRIVE RATIO	ROLLOUT

FRONT	REAR
-------	------

	SHOCK TYPE	
	XRAY SPRINGS	
	OIL /Cst	
	REBOUND %	

<input type="checkbox"/> YES <input type="checkbox"/> NO	FOAM INSERTS	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> YES <input type="checkbox"/> NO	O-RING ON SHAFT	<input type="checkbox"/> YES <input type="checkbox"/> NO

<input type="checkbox"/> 3 HOLES	PISTONS	<input type="checkbox"/> 3 HOLES
<input type="checkbox"/> 4 HOLES	1.0mm	<input type="checkbox"/> 4 HOLES
	1.1mm	
	1.2mm	
	OTHERS	

THICKNESS/mm	ANTI-ROLL BAR	THICKNESS/mm
--------------	---------------	--------------

	TIRES	
	INSERTS	
	ADDITIVE	
	ADDITIVE TIMING	

FRONT LEFT	FRONT RIGHT	REAR LEFT	REAR RIGHT
TREATED AREA			

ECCENTRIC BUSHINGS	ROLL CENTER	ECCENTRIC BUSHINGS
FF	1 <input type="checkbox"/> 0.5 <input type="checkbox"/>	RR
FR	1 <input type="checkbox"/> 0.5 <input type="checkbox"/>	RF

MOTOR	TIMING
-------	--------

ESC	BATTERIES
-----	-----------

BODY	WING
------	------

COMMENTS

