

## DRIVER, TRACK AND RESULTS

**DRIVER** \_\_\_\_\_ **COUNTRY** \_\_\_\_\_ **WEATHER** AIR TEMP \_\_\_\_\_ TRACK TEMP \_\_\_\_\_  DRY  INTERMEDIATE  WET  
**RACE** \_\_\_\_\_ **DATE** \_\_\_\_\_ **QUALY POS.** \_\_\_\_\_ **STARTING POS.** \_\_\_\_\_ **FINAL POS.** \_\_\_\_\_ **FASTEST LAP** \_\_\_\_\_  
**TRACK** \_\_\_\_\_ **TYPE**  TIGHT  MEDIUM  OPEN  **GRIP**  LOW  MEDIUM  HIGH   
**SURFACE CONDITION**  SMOOTH  ROUGH   
**TYPE**  HARD PACKED  CLAY  MULTI/SURFACE  GRASS  BLUE GROOVE  DIRT  ASTRO-TURF

FRONT SHOCK ABSORBERS		REAR	
cst	OIL		cst
SPRINGS			
mm	REBOUND		mm
N° HOLES	Ø mm	PISTONS	N° HOLES Ø mm
<input type="checkbox"/> STRAIGHT <input type="checkbox"/> ANGLED	HOLES TYPE	<input type="checkbox"/> STRAIGHT <input type="checkbox"/> ANGLED	
<input type="checkbox"/> BLADDER	SEAL TYPE	<input type="checkbox"/> BLADDER	
<input type="checkbox"/> EMULSION		<input type="checkbox"/> EMULSION	

ANTI-ROLL BARS	
FRONT ANTI-ROLL BAR _____ mm	REAR ANTI-ROLL BAR _____ mm

DIFFERENTIALS		
FRONT DIFF <input type="checkbox"/> HTD <input type="checkbox"/> STD	CENTER DIFF <input type="checkbox"/> HTD <input type="checkbox"/> STD	REAR DIFF <input type="checkbox"/> HTD <input type="checkbox"/> STD
_____ cst	_____ cst	_____ cst

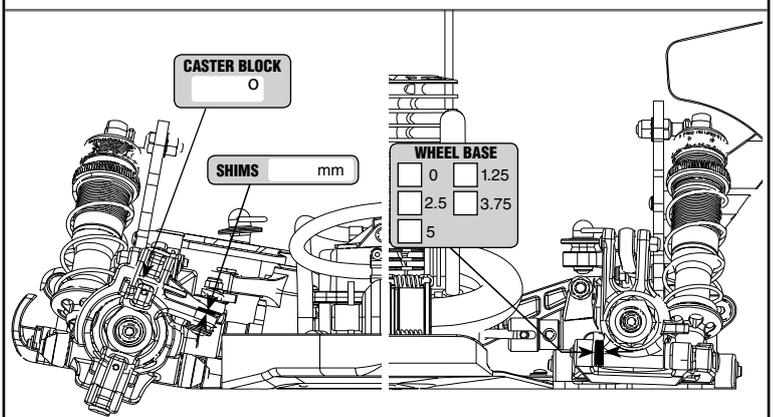
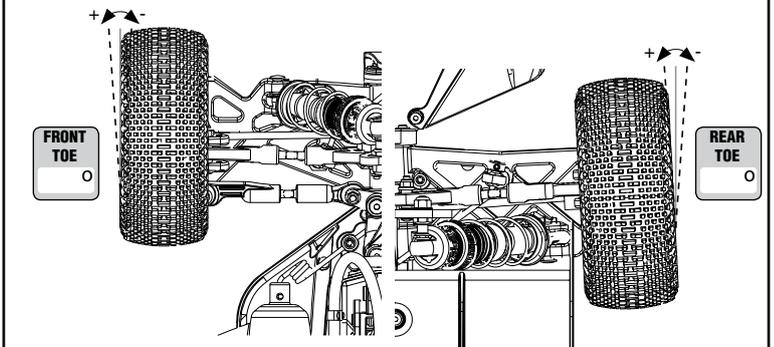
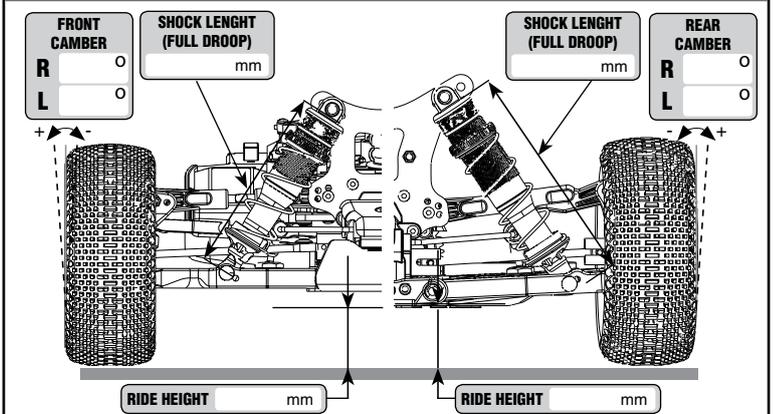
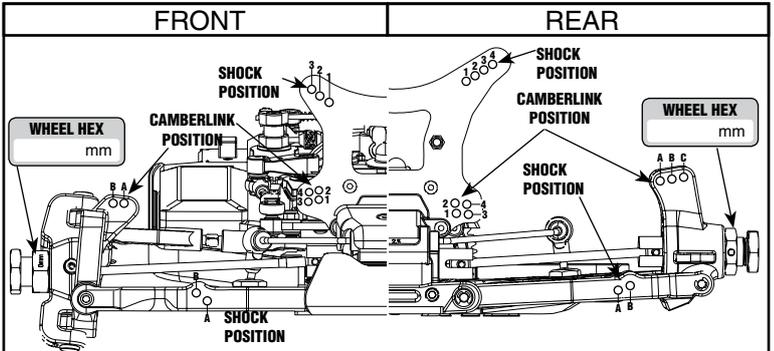
GEARING	
CLUTCH BELL _____ Teeth	SPUR GEAR _____ Teeth

CLUTCH	
CLUTCH BELL <input type="checkbox"/> STANDARD <input type="checkbox"/> VENTED	FLYWHEEL <input type="checkbox"/> STEEL <input type="checkbox"/> ALU
CLUTCH SHOES _____ x _____ with	CLUTCH SPRINGS _____ mm
SHOE TYPE _____	SPRINGS TYPE _____
SHOE TYPE _____ x _____ with	SPRINGS TYPE _____ mm
SHOE TYPE _____	SPRINGS TYPE _____

ENGINE, PIPE AND FUEL	
ENGINE BRAND _____ TYPE _____	
HEADSHIMS _____ mm	GLOWPLUG _____ CARB Ø _____ mm
EXHAUST PIPE _____	MANIFOLD _____
FUEL BRAND _____	NITRO _____ %

AERODYNAMIC CONFIGURATION	
BODY <input type="checkbox"/> STANDARD <input type="checkbox"/> HIGH DOWNFORCE <input type="checkbox"/> OTHER _____	
WING	
TYPE _____	WING PLATES <input type="checkbox"/> 2° <input type="checkbox"/> 4° <input type="checkbox"/> 6°
GURNEY STRIP <input type="checkbox"/> YES <input type="checkbox"/> NO	CENTER FOIL <input type="checkbox"/> YES <input type="checkbox"/> NO

FRONT TIRES	Controlled Tire <input type="checkbox"/>	REAR
MAKE _____		
TYPE _____		
INSERTS _____		
WHEELS _____		



## REMARKS

REMARKS