

PROJECT 10073 RECORD CARD

1. DATE TIME GROUP 12 Sep 52		2. LOCATION FAIRFAX, VIRGINIA		3. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input checked="" type="checkbox"/> Possibly Astronomical (METEOR)	
4. DATE TIME GROUP LOCAL 12/0003 EDT GMT 13/0003 Z		4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar			
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		6. SOURCE Naval Aviator (Lt Cdr)			
7. LENGTH OF OBSERVATION 3 sec		8. NUMBER OF OBJECTS 1		9. COURSE <input type="checkbox"/> Other <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown	
10. BRIEF SUMMARY OF SIGHTING Slightly oblong, solid mass with soft incadescent outline, moved horizontally across field of vision of observer, who saw object through his dining room window, while at dinner.			11. COMMENTS 1. Local newspapers reported object as meteor. 2. Duration of sighting was only 3 sec and observer was in a poor position.		

Line 2

[REDACTED]

30. Please add here any further comments which you believe are important.
Use additional sheets of the same size paper, if necessary.

[REDACTED]

PROJECT 10073 RECORD CARD

1. DATE 22 Sep 52	2. LOCATION Fairfax, Virginia		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local 0115 GMT	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar		<input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE 2 policemen		<input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION 3 1/2 hours	8. NUMBER OF OBJECTS 2 - 4	9. COURSE <input type="checkbox"/> Other <input checked="" type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown	
10. BRIEF SUMMARY OF SIGHTING white.		11. COMMENTS Appeared in groups.	

PROJECT 10073 WORKSHEET

FAIRFAX, VIRGINIA

22 SEPT 52

I. GENERAL

1. DATE 22 Sep 52	2. LOCATION Fairfax, Va.	3. TIME Local: 2115 Zebra: 2515
4. WAS OBJECT OBSERVED FROM THE GROUND?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Naked Eye <input type="checkbox"/> Binoculars <input type="checkbox"/> Telescope <input type="checkbox"/> Theodolite
5. WAS OBJECT OBSERVED BY GROUND RADAR?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		<input type="checkbox"/> By One Set <input type="checkbox"/> By Two Sets <input type="checkbox"/> By Three Sets
6. WAS OBJECT OBSERVED FROM THE AIR?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		<input type="checkbox"/> A/C Observed Object <input type="checkbox"/> Interception Attempted <input type="checkbox"/> No Intercept Attempted
7. WERE AIRCRAFT SCRAMBLED TO INTERCEPT?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		<input type="checkbox"/> A/C Scrambled <input type="checkbox"/> Visual Contact Made <input type="checkbox"/> A/I Contact Made <input type="checkbox"/> No Contact Made
8. DID OBJECT CHANGE DIRECTION AT ANY TIME?		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Normal <input type="checkbox"/> Violent
9. IF OBJECT WAS A "LIGHT", WAS IT:		<input type="checkbox"/> Blinking <input type="checkbox"/> Steady
10. LENGTH OF TIME IN SIGHT:		<input type="checkbox"/> 1-15 Seconds <input type="checkbox"/> 1-5 Minutes <input type="checkbox"/> Over 10 Minutes
11. REPORTING AGENCY (Unit Number and Mailing Address)		
HQ USAF		

II. ASTRONOMICAL DATA

12. WHAT ASTRONOMICAL ACTIVITY WAS NOTED?		
—		
13. DID OBJECT APPEAR TO ARCH DOWNWARD?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. DID OBJECT HAVE A TAIL?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15. DID OBJECT APPEAR TO DISINTEGRATE?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16. TIME OF SIGHTING RELATIVE TO SUNRISE OR SUNSET (Data From Air Almanac)		
<input type="checkbox"/> Night		
<input type="checkbox"/> Day		
<input type="checkbox"/> Sunrise		
<input type="checkbox"/> Sunset		

III. AIRCRAFT DATA

17. WERE AIRCRAFT NOTED IN AREA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> One Aircraft <input type="checkbox"/> More Than One Aircraft	
18. WAS ANY SOUND HEARD?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19. WERE THERE INDICATIONS OF HIGH BACKGROUND NOISE?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20. WAS THE OBJECT VIEWED ABOVE 45° ELEVATION?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

7-5719-18

IV. BALLOON DATA

21. WERE BALLOONS RELEASED IN AREA? Yes No

22. TIME SINCE SCHEDULED BALLOON RELEASE: _____ Minutes

23. POSSIBLE BALLOON LAUNCH SITES DOWNWIND OF SIGHTING:

	Location	Type	Launching Agency	Lighted?		Describe Lighting
				Yes	No	
a.						
b.						
c.						
d.						

(attach overlay)

V. EVALUATION

<p>21. EVALUATION OF SOURCE:</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Fair</p> <p><input type="checkbox"/> Poor</p> <p><input type="checkbox"/> Unreliable</p> <p><input type="checkbox"/> Extremely Doubtful</p> <p><input type="checkbox"/> Hoax</p>	<p>22. DETAILS OF REPORT:</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Fair</p> <p><input checked="" type="checkbox"/> Poor</p> <p><input type="checkbox"/> Insufficient to Evaluate</p>
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23. FINAL EVALUATION:

<p><input type="checkbox"/> Was Balloon</p> <p><input type="checkbox"/> Probably Balloon</p> <p><input type="checkbox"/> Possibly Balloon</p> <p><input type="checkbox"/> Was Aircraft</p> <p><input type="checkbox"/> Probably Aircraft</p> <p><input type="checkbox"/> Possibly Aircraft</p>	<p><input type="checkbox"/> Was Astronomical</p> <p><input type="checkbox"/> Probably Astronomical</p> <p><input type="checkbox"/> Possibly Astronomical</p> <p><input type="checkbox"/> Other: _____</p> <p><input checked="" type="checkbox"/> Insufficient Data For Evaluation</p> <p><input type="checkbox"/> Unknown</p>
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24. COMMENTS:

Journal following - up. RAOS would be valuable re: light refraction, inv. layer theory

PROJECT 10073 WEATHER DATA SH

1. DATE OF OBSERVATION	2. TIME OF OBSERVATION	3. STATION OBSERVING
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4. WINDS ALOFT:					
ALTITUDE (feet)	VELOCITY (knots)	DIRECTION (degrees)	ALTITUDE (feet)	VELOCITY (knots)	DIRECTION (degrees)
0			25,000		
1,000			30,000		
2,000			35,000		
3,000			40,000		
4,000			45,000		
5,000			50,000		
6,000			55,000		
7,000			60,000		
8,000			65,000		
9,000			70,000		
10,000			75,000		
12,000			80,000		
14,000			85,000		
16,000			90,000		
18,000			95,000		
20,000			100,000		

5. WAS AN INVERSION LAYER NOTED? Yes No
 (If yes, at what altitude? _____)

6. WERE ANY THUNDERSTORMS NOTED IN AREA? Yes No
 (If yes, at what quadrant? _____)

7. CLOUD COVER: _____ tenths at _____ feet. _____ tenths at _____ feet. _____ tenths at _____ feet. _____ tenths at _____ feet.	8. VISIBILITY WAS _____ MILES.
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9. COMMENTS:

1-1 853. ,Y

CSAF ITEM NBR 3 / [REDACTED] 01

SECURITY INFORMATION

TO ATIAA-5 RUPPELT FR AFOIN-2A2 FOURNET

REF TUX AFOIN 58311 DTD 22 SEP 52 FROM THIS HQ

PERTAINING TO SIGHTING FAIRFAX AND CENTREVILLE

VA MORNING 22 SEP. I AM INVESTIGATING

THOROUGHLY SO NO FOLLOW-UP REQUIRED BY YOU.

END CSAF ITEM NBR 3 [REDACTED]

TT 207
23 Sep 52

ACTION

LMC
[REDACTED]
[REDACTED] 15

(Unclassified) Material for Project Blue Book

Chief, Air Technical
Intelligence Center
Wright-Patterson AFB
Ohio

Dept of the Air Force
Hq USAF - AFOSI

OCT 1952
Maj Fournet/cmb/71016

12 Sept 52
[Handwritten notes]

1. Inclosures are for your information and retention.
2. Following receipt of Miss [REDACTED] memo (Incl. 1) by this office, she was requested to complete a standard questionnaire which was supplied. Completed questionnaire is attached as Incl. 2.
3. Inclosure 3 is questionnaire completed by LCDR [REDACTED] USN, following his telephonic report of a sighting to this office.

3 Incls:

1. Memo from [REDACTED] dtd 11 Aug 52
2. Questionnaire completed by Miss [REDACTED]
3. Questionnaire completed by LCDR Blair

WILLIAM A. ADAMS
Colonel, USAF
Chief, Topical Division
Deputy Director for Estimates
Directorate of Intelligence, DCS/O

When included in 2 / 3
[REDACTED]
Restricted
[REDACTED]
Unclassified
[REDACTED]

7-3719-10
21-6165-4

Wind
~~_____~~
~~_____~~

TENTATIVE
OBSERVERS QUESTIONNAIRE

SECTION A

1. When did you see the object:

1.1 Date: 12 Sept. 1952
Day Month Year

1.2 Time of Day: 20 03 A.M. or P.M. (Circle One)
Hrs. Min.

1.3 Time Zone: (Circle One):

- a. Eastern Daylight d. Pacific
b. Central e. Other _____
c. Mountain

(Circle One): a. Daylight Saving
b. Standard

1.4 Circle one of the following to indicate how certain you are of your answer to the above question 1.2:

- a. Certain c. Not very sure
b. Fairly certain d. Just a guess

2. Where were you when you saw the object:

~~_____~~ FAIRFAX Va. FAIRFAX
Postal Address City or Town State Country

Additional Remarks: ~~_____~~ SUBDIVISION

3. Where were you located when you saw the object:

(Circle One): a. Inside a building d. In an airplane
b. In a car e. At sea
c. Outdoors f. Other _____

3.1 Were you:

- (Circle One): a. In the business section of a city?
b. In the residential section of a city?
c. In open countryside?
d. Flying near an airfield?
e. Flying over a city?
f. Flying over open country?
g. Other _____
- ~~_____~~

DMR

4. How did you happen to notice the object? I was sitting at the dinner table facing the window when the object flashed by the window.

5. When did you report to some official that you had seen the object?
15 Sept 1952
Day Month Year

SECTION B

6. What were you doing at the time you saw the object? Sitting at dinner table with 3 other adults.

6.1 What had you been doing for the 30 minutes before you saw the object? Try to list the activity or activities and the approximate amount of time spent on each.

Normal social conversation with Mr and Mrs [redacted], Mr [redacted] is [redacted] Church of Christ. We had been at dinner about 20 minutes

7. Were you moving at any time while you saw the object? (Circle One):
Yes or No

IF you answered YES, then complete the following questions:

7.1 What direction were you moving? (Circle One):
a. North e. South
b. Northeast f. Southwest
c. East g. West
d. Southeast h. Northwest

7.2 How fast were you moving? _____ miles per hour.

7.3 Did you stop at any time while you were looking at the object? (Circle One): Yes or No

8. What direction were you looking when you first saw the object? (Circle One):
a. North e. South
b. Northeast f. Southwest
c. East g. West
d. Southeast h. Northwest

[Handwritten signature and redacted area]

Umel

~~Page 3~~

8.1 What direction were you looking when the object disappeared?

- (Circle One):
- | | |
|--------------|---------------------|
| a. North | e. South |
| b. Northeast | <u>f. Southwest</u> |
| c. East | g. West |
| d. Southeast | h. Northwest |

8.2 Circle one of the following to indicate how certain you are of your answer to the above question and preceding question (8 and 8.1).

- | | |
|-------------------|------------------|
| <u>a. Certain</u> | c. Not very sure |
| b. Fairly certain | d. Just a guess |

9. Were you wearing eye glasses when you saw the object? (Circle One):

Yes or No

10. How was the object seen?

- (Circle One):
- | | |
|-------------------------|--|
| a. Through window glass | e. Through theodolite |
| b. Through windshield | f. Through sunglasses |
| c. Through binoculars | g. Through open space |
| d. Through telescope | h. Other <u>Through Open Window (screened)</u> |

11. What do you remember about the weather conditions at the time you saw the object?

11.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

11.3 WEATHER (Circle One)

- a. Dry
- b. Fog, Mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

11.2 WIND (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

11.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember
- windows were open*

SECTION C

12. Estimate how long you saw the object?

Hours Minutes 3 Seconds

18.2 Move in front of something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved in front of.

18.3 Blend with the background? (Circle One) Yes No Don't know

19. Which of the following objects is about the same actual size as the object you saw? (Circle One):

- a. Pea
- b. Baseball
- c. Basketball
- d. Bicycle wheel
- e. Office desk
- f. Automobile
- g. Small airplane
- h. Large airplane
- i. Dirigible
- j. Other _____

19.1 Circle one of the following to indicate how certain you are of your answer to Question 19.

- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Uncertain

20. Try to tell the following things about the object:

- 20.1 How high above the earth was it? 2000 feet.
- 20.2 How far was it from you? _____ feet or 5 miles.
- 20.3 How fast was it going? 300 miles per hour.
- 20.4 Circle one of the following to indicate how certain you are of your answer to the above questions:

- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Just a guess

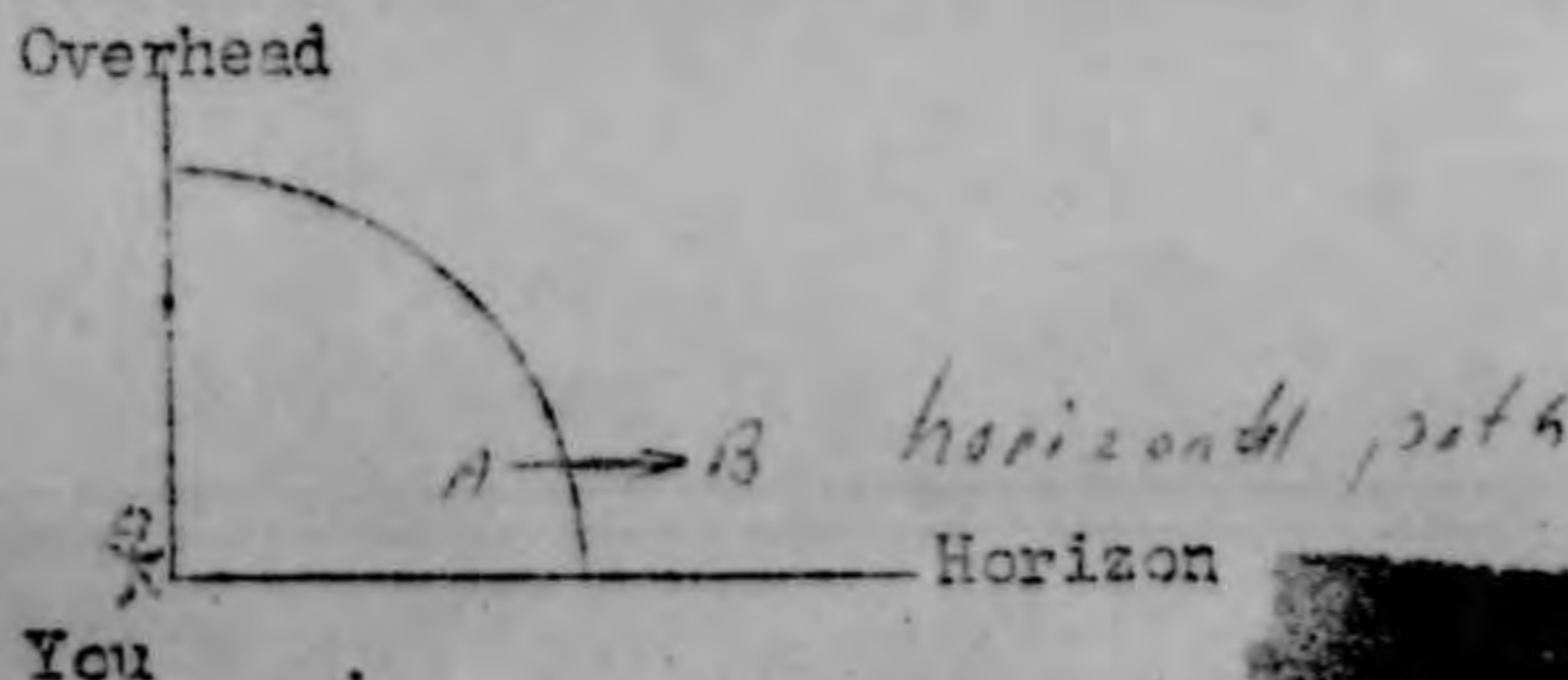
my perspective, using the size of the window and the height of the trees as guides.

21. How did the object disappear from view?

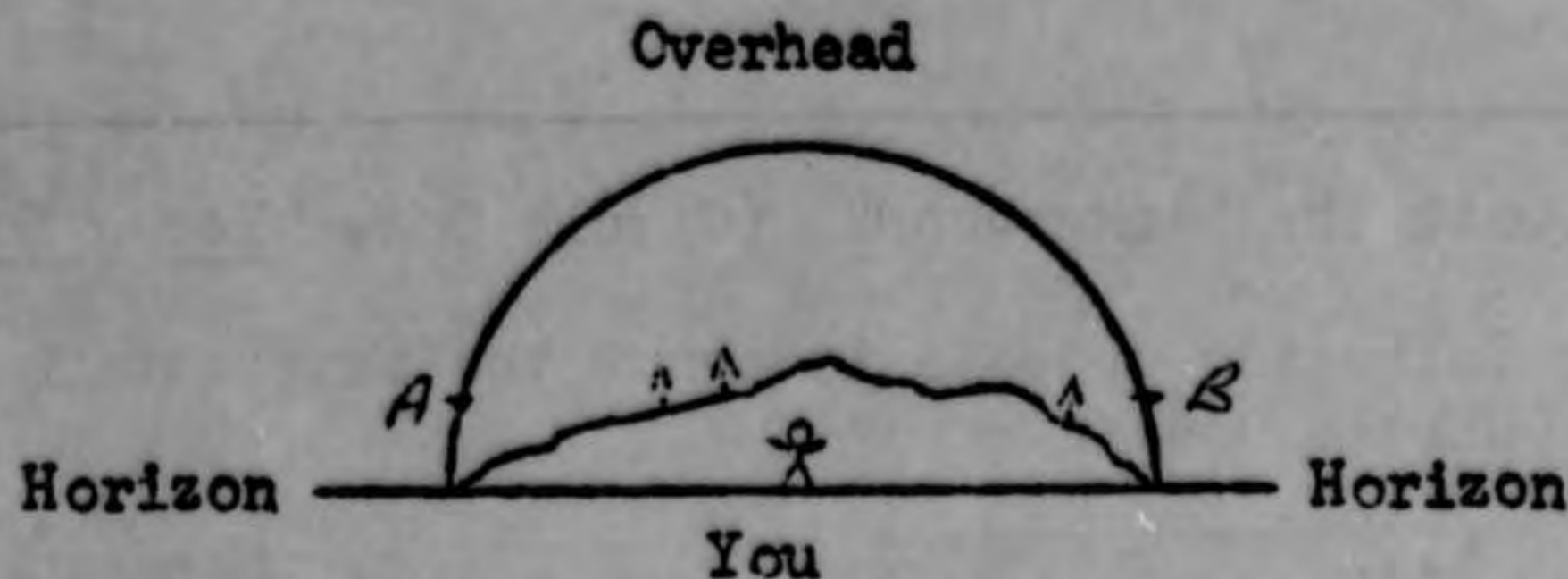
- (Circle One): a. Suddenly
- b. Gradually
- c. Other Passed in front of window
- d. Don't remember

SECTION D

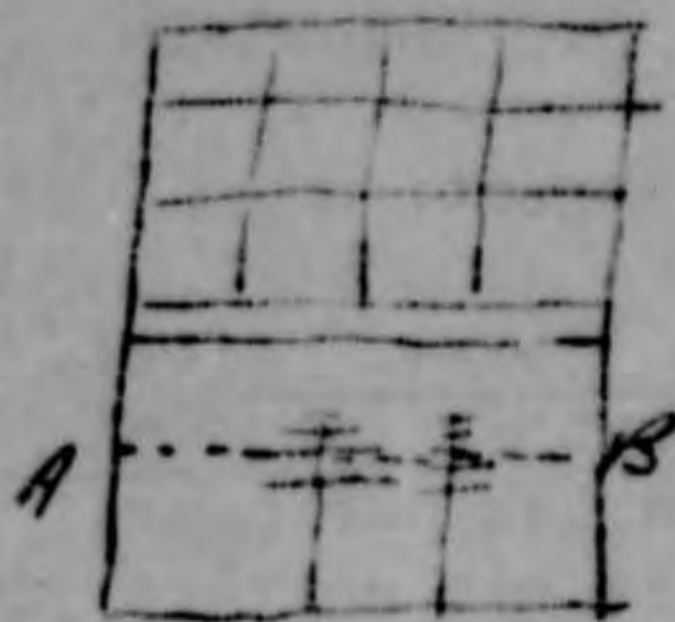
22. In the following sketch, imagine your eye at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" to show where it was when you last saw it.



23. In the following sketch place an "A" at the position the object was when you first saw it, and a "B" at its position when you last saw it.



24. Draw a picture that will show the motion that the object made. Place an "A" at the beginning of its path and a "B" at the end of its path.



Normal window about 20 inches from floor. I was seated. 40' pine trees, about 20' from me (2 of them)

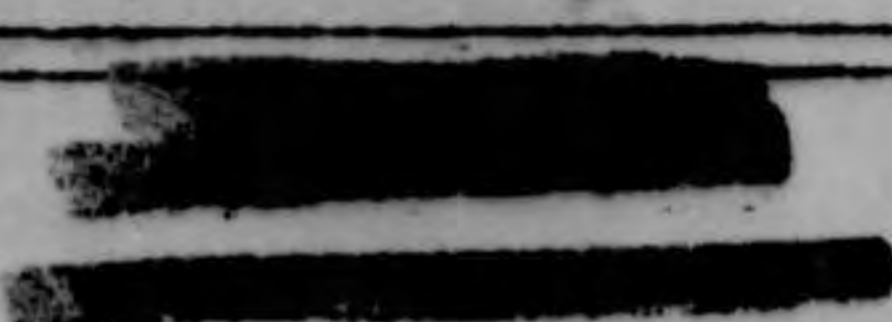


25. Draw a picture that will show the shape of the object. Label and include in your sketch any details of the object that you saw and place an arrow beside the drawing to show the direction the object was moving.



slightly oblong, moving in a horizontal path over ground; no tail, or sparks, a solid

mass with soft inconspicuous outline.



Uncl

SECTION E

26. Was this the first time that you have seen an object like this?

(Circle One): Yes or No

26.1 IF you answered NO, then when, where, and under what conditions did you see other ones? _____

27. In your opinion, what do you think the object was and what might have caused it?

I don't know. The newspaper said it was a meteor, but it had no tail and was not falling, and was larger than any meteor that I ever saw.

28. Give the following information about yourself:

NAME _____
Last Name First Name Middle Name

ADDRESS _____
Street City Zone State

TELEPHONE NUMBER LIBERTY _____
Extension (office)

What is your present job? LCDR, USN

Age 35

Sex M

29. Was anyone else with you at the time you saw the object?

(Circle One): Yes or No

29.1 IF you answered YES, did they see the object too?

* (Circle One): Yes or No *By the time they turned, it was gone.*

29.2 Please list their names and addresses:

Mr and Mrs _____
_____ WASHINGTON, D.C.