

<b>1. DATE - TIME GROUP</b> 19 March 53 19/2330Z	<b>2. LOCATION</b> Crystal Lake, Ohio
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> AIRCRAFT  Objects could have been aircraft at high altitude.
<b>4. NUMBER OF OBJECTS</b> Two	<b>11. BRIEF SUMMARY AND ANALYSIS</b>  Two saucer shaped objects traveled at a slow rate of speed at high altitude.
<b>5. LENGTH OF OBSERVATION</b> Not Reported	
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> SW	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Multiple

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From - ID O's report 2  
19 Mar 53

Form 1 April

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

19/1830  
CRYSTAL LAKE  
OHIO

This questionnaire has been prepared so that you can give the U. S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

19      March      1953  
Day      Month      Year

2. Time of day: 1830 approximately  
Hour      Minutes

(Circle One):      A.M.      or      P.M.

3. Time zone:

(Circle One):  Eastern  
                           Central  
                           Mountain  
                           Pacific  
                           Other \_\_\_\_\_

(Circle One):      a. Daylight Saving  
                           Standard

4. Where were you when you saw the object?

Eln Street      Crystal Lake      Ohio  
Nearest Postal Address      City or Town      State or Country

Additional remarks: \_\_\_\_\_

5. Estimate how long you saw the object.      \_\_\_\_\_      X      \_\_\_\_\_  
Hours      Minutes      Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

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

6. What was the condition of the sky?

(Circle One):      a. Bright daylight      d. Just a trace of daylight  
                           b. Dull daylight      e. No trace of daylight  
                           c. Bright twilight      f. Don't remember

7. IF you saw the object during DAYLIGHT, TWILIGHT, or DAWN, where was the SUN located as you looked at the object?

(Circle One):      a. In front of you      d. To your left  
                           b. In back of you      e. Overhead  
                           c. To your right      f. Don't remember

8. IF you saw the object at NIGHT, TWILIGHT, or DAWN, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight — pitch dark
- d. Don't remember

9. Was the object brighter than the background of the sky?

- (Circle One):      a. Yes                      b. No                      c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?:

- (Circle One) a. A mile or more away (a distant car)?  
 b. Several blocks away?  
 c. A block away?  
 d. Several yards away?  
 e. Other \_\_\_\_\_

11. Did the object:

(Circle One for each question)

- |   |     |                                     |            |
|---|-----|-------------------------------------|------------|
| a. Appear to stand still at any time?           | Yes | <input checked="" type="radio"/> No | Don't Know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't Know |
| c. Break up into parts or explode?              | Yes | <input checked="" type="radio"/> No | Don't Know |
| d. Give off smoke?                              | Yes | <input checked="" type="radio"/> No | Don't Know |
| e. Change brightness?                           | Yes | <input checked="" type="radio"/> No | Don't Know |
| f. Change shape?                                | Yes | <input checked="" type="radio"/> No | Don't Know |
| g. Flicker, throb, or pulsate?                  | Yes | <input checked="" type="radio"/> No | Don't Know |

12. Did the object move behind something at anytime, particularly a cloud?

- (Circle One):      Yes      No      Don't Know.      IF you answered YES, then tell what it moved behind: \_\_\_\_\_

13. Did the object move in front of something at anytime, particularly a cloud?

- (Circle One):      Yes      No      Don't Know.      IF you answered YES, than tell what it moved in front of: \_\_\_\_\_

14. Did the object appear: (Circle One):      a. Solid?                      b. Transparent?                      c. Don't Know.

15. Did you observe the object through any of the following?

- |                 |     |    |                |     |    |
|-----------------|-----|----|----------------|-----|----|
| a. Eyeglasses   | Yes | No | e. Binoculars  | Yes | No |
| b. Sun glasses  | Yes | No | f. Telescope   | Yes | No |
| c. Windshield   | Yes | No | g. Theodolite  | Yes | No |
| d. Window glass | Yes | No | h. Other _____ |     |    |

16. Tell in a few words the following things about the object.

- a. Sound None
- b. Color \_\_\_\_\_

17. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

18. The edges of the object were:

- (Circle One): a. Fuzzy or blurred  
 b. Like a bright star  
 c. Sharply outlined  
 d. Don't remember
- e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

19. IF there was MORE THAN ONE object, then how many were there? Two resembling saucers  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

Traveling at slow rate of speed <sup>seen</sup> from Crystal Lake <sup>over Medway area</sup> towards Dayton at about 35,000 feet--appeared to be about 1" apart as he saw them. No vapor trail.

20. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension.  
\_\_\_\_\_ feet.

22. How large did the object or objects appear as compared with one of the following objects *held in the hand* and at about arm's length?

(Circle One):

- a. Head of a pin
- b. Pea
- c. Dime
- d. Nickel
- e. Quarter
- f. Half dollar

- g. Silver dollar
- h. Baseball
- i. Grapefruit
- j. Basketball
- k. Other \_\_\_\_\_

22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.

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

23. How did the object or objects disappear from view? Passed from view towards Dayton

\_\_\_\_\_

\_\_\_\_\_

24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have? Describe in your own words a common object or objects which when placed up in the sky would give the same appearance as the object which you saw.

25. Where were you located when you saw the object?  
(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane
- e. At sea
- f. Other \_\_\_\_\_

26. 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 \_\_\_\_\_

27. What were you doing at the time you saw the object, and how did you happen to notice it?

Son called from out of doors to come and see objects

28. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

28.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

28.2 How fast were you moving? \_\_\_\_\_ miles per hour.

28.3 Did you stop at any time while you were looking at the object?

(Circle One)      Yes                  No

29. What direction were you looking when you first saw the object? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

30. What direction were you looking when you last saw the object? (Circle One) Towards Dayton from ~~Cross~~ Lake

- |                         |              |              |                            |
|-------------------------|--------------|--------------|----------------------------|
| a. North                | c. East      | e. South     | g. West                    |
| b. <del>Northeast</del> | d. Southeast | f. Southwest | h. Northwest <u>Midway</u> |

31. If you are familiar with bearing terms (angular direction), try to estimate the number of degrees the object was from true North and also the number of degrees it was upward from the horizon (elevation).

31.1 When it first appeared:

- a. From true North \_\_\_\_\_ degrees.
- b. From horizon \_\_\_\_\_ degrees.

31.2 When it disappeared:

- a. From true North \_\_\_\_\_ degrees.
- b. From horizon \_\_\_\_\_ degrees.

34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

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

34.2 WIND (Circle One)

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

34.3 WEATHER (Circle One)

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

34.4 TEMPERATURE (Circle One)

- a. Cold  
 b. Cool  
 c. Warm  
 d. Hot  
 e. Don't remember

35. When did you report to some official that you had seen the object?

19 March 1953  
 Day Month Year

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

(Circle One) Yes No

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

(Circle One) Yes No

36.2 Please list their names and addresses:

Family

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

Appeared like saucers from below.

39. Do you think you can estimate the speed of the object?

(Circle One) Yes No Slow rate of speed

IF you answered YES, then what speed would you estimate? \_\_\_\_\_ m.p.h.

40. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No 35000 ft alt. Lake.

Sighted object f on Crystal Lake. Object was over Medway area traveling towards Dayton.

IF you answered YES, then how far away would you say it was? \_\_\_\_\_ feet.

41. Please give the following information about yourself:

NAME \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

ADDRESS \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

What is your present job? \_\_\_\_\_

Age \_\_\_\_\_ Sex Male \_\_\_\_\_

Please indicate any special educational training that you have had.

- a. Grade school \_\_\_\_\_
- b. High school \_\_\_\_\_
- c. College \_\_\_\_\_
- d. Post graduate \_\_\_\_\_
- e. e. Technical school \_\_\_\_\_ (Type) \_\_\_\_\_
- f. Other special training \_\_\_\_\_

42. Date you completed this questionnaire:

19 March 1953 \_\_\_\_\_ Day \_\_\_\_\_ Month \_\_\_\_\_ Year