

PROJECT 10073 RECORD CARD

1. DATE 4 September 1956	2. LOCATION Vandalia, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local <u>2035 (N)</u> GMT <u>05/0135Z</u>	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 Civilian		<input checked="" type="checkbox"/> Was Astronomical Mars <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION 20 minutes	8. NUMBER OF OBJECTS one	9. COURSE	<input type="checkbox"/> Other _____ <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
10. BRIEF SUMMARY OF SIGHTING One object round, size of pea. Color reddish. Appeared to stand still.		11. COMMENTS Conclude sighting to be caused by astro (Mars in SE at 25 dgr elevation).	



De B...

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

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?

____ Day ____ Month ____ Year

2. Time of day:

2035 ^{Hour} _{Minutes}

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

3. Time zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

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

4. Where were you when you saw the object?

Wandellia _____ Via
Nearest Postal Address City or Town State or Country

Additional remarks: _____

5. Estimate how long you saw the object.

____ Hours 20 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

Witness 4-5/20352-? 13

DISPOSITION FORM

SECURITY CLASSIFICATION (If any)

FILE NO.

SUBJECT

Extract from SDO Report - UFO

TO AFOIN-4E4

FROM

AFOIN-4X2a

DATE

5 Sep 56

COMMENT NO. 1

Maj Connair/meg


59117/B263/P A37

Following are extracts from SDO Capt Martin's report 4-5 Aug 56 for your information and necessary action:

"2100 hrs Received report of UFOB (Report attached).

"2230 hrs Received report of UFO from Mrs. [redacted] Oxford Ave, Dayton, phone Randolph [redacted] Report stated same sighting as mailed to ATIC this date."

1 Incl
ATIC Form 164


T. J. CONNAIR, JR
Major, USAF
Adjutant

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

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

g. Silver dollar

b. Pea

h. Baseball

c. Dime

i. Grapefruit

d. Nickel

j. Basketball

e. Quarter

k. Other _____

f. Half dollar

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

a. Certain

c. Not very sure

b. Fairly certain

d. Uncertain

23. How did the object or objects disappear from view? _____

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.

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?

Day

Month

Year

36. 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:

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?

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?

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 | <u>d. Southeast</u> | f. Southwest | h. Northwest |

30. What direction were you looking when you last saw the object? (Circle One)

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

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.

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

(Circle One) Yes No

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

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: _____
Day Month Year

DUTY OFFICER BELIEVES OBJECT WAS LARGE RED STAR IN THE EAST.