

PROJECT 10073 RECORD CARD

1. DATE 9 Jan 61	2. LOCATION Miamisburg, Ohio	12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local 2005 GMT 100105Z Jan 61	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 type="checkbox"/> Was Astronomical <i>MARS</i> <input checked="" type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION 20 Min	8. NUMBER OF OBJECTS 1	9. COURSE up and down
10. BRIEF SUMMARY OF SIGHTING Object appeared as a star-like light. When it moved, a tail was apparent behind it. Moved diagonally, very slowly. Brilliant blue changing at times to bluish-green.		11. COMMENTS The planet Mars is very bright this time of year, and it is observed to change colors. The magnitude of Mars is -1.2. There was a temperature inversion over this area during the time of the sighting. It is very probable that atmospheric refraction was contributing factor to this sighting.

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.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>9</u> Day <u>JAN</u> Month <u>61</u> Year </p>	<p>2. Time of day: <u>2005</u> - <u>2025</u> Hour Minutes</p> <p>(Circle One): A.M. or P.M.</p>			
<p>3. Time Zone: (Circle One):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>a. Eastern b. Central c. Mountain d. Pacific e. Other _____</p> </td> <td style="width: 50%; vertical-align: top;"> <p>(Circle One): a. Daylight Saving b. Standard</p> </td> </tr> </table>		<p>a. Eastern b. Central c. Mountain d. Pacific e. Other _____</p>	<p>(Circle One): a. Daylight Saving b. Standard</p>	
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<p>4. Where were you when you saw the object?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>[REDACTED]</u> Nearest Postal Address</td> <td style="width: 33%;"><u>MIAMSBURG</u> City or Town</td> <td style="width: 33%;"><u>OHIO</u> State or Country</td> </tr> </table> <p>Additional remarks: _____</p>		<u>[REDACTED]</u> Nearest Postal Address	<u>MIAMSBURG</u> City or Town	<u>OHIO</u> State or Country
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<p>5. How long was object in sight? <u>AT LEAST 20 MINUTES</u></p> <p style="text-align: center;"> Hours Minutes Seconds </p> <p>5.1 How was time in sight determined?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><input checked="" type="radio"/> a. Certain b. Fairly certain</p> </td> <td style="width: 50%; vertical-align: top;"> <p>c. Not very sure d. Just a guess</p> </td> </tr> </table>		<p><input checked="" type="radio"/> a. Certain b. Fairly certain</p>	<p>c. Not very sure d. Just a guess</p>	
<p><input checked="" type="radio"/> a. Certain b. Fairly certain</p>	<p>c. Not very sure d. Just a guess</p>			
<p>6. What was the condition of the sky?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">DAY</p> <p>a. Bright b. Cloudy</p> </td> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">NIGHT</p> <p><input checked="" type="radio"/> a. Bright b. Cloudy</p> </td> </tr> </table>		<p style="text-align: center;">DAY</p> <p>a. Bright b. Cloudy</p>	<p style="text-align: center;">NIGHT</p> <p><input checked="" type="radio"/> a. Bright b. Cloudy</p>	
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<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>a. In front of you b. In back of you c. To your right</p> </td> <td style="width: 50%; vertical-align: top;"> <p>d. To your left e. Overhead f. Don't remember</p> </td> </tr> </table>		<p>a. In front of you b. In back of you c. To your right</p>	<p>d. To your left e. Overhead f. Don't remember</p>	
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8. IF you saw the object at NIGHT, 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. The object appeared:

(Circle One): a. As a light b. Shiny c. Dark d. Don't remember

10. If it appeared as a light, was it brighter than the brightest stars? yes

11. Did the object:

(Circle One for each question)

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

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

(Circle One): Yes No Don't Know. IF you answered YES, then tell what in front of: _____

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

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

- | | | | | | |
|-----------------|--------------------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| a. Eyeglasses | <input checked="" type="radio"/> Yes | <input type="radio"/> No | e. Binoculars | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| b. Sun glasses | <input type="radio"/> Yes | <input checked="" type="radio"/> No | f. Telescope | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| c. Windshield | <input type="radio"/> Yes | <input checked="" type="radio"/> No | g. Theodolite | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| d. Window glass | <input checked="" type="radio"/> Yes | <input type="radio"/> No | h. Other _____ | | |


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

a. Sound None Heard

b. Color BRIGHT BLUE CHANGING AT TIMES TO
DARK GREEN

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.

OBJECT APPEARED AS A STAR-LIKE LIGHT. WHEN IT MOVED, A TAIL WAS APPARENT BEHIND IT. MOVED DIAGONALLY, VERY SLOWLY. ESTIMATED MOTION OF FOOT UP & DOWN



WHEN MR. FOX CALLED AGAIN AT 3:05 TO SAY THAT OBJECT WAS NOTED TO MOVE SIDEWAYS AND BACK HE WILL ATTEMPT TO PHOTOGRAPH OBJECT

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? Only one

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

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. How large did the object appear to you as compared to an object with which you are familiar?

AS LARGE AS BRIGHTEST STAR IN SKY

22. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

23. Did the object disappear while you were watching it? If so, how? IT APPEARED TO FADE AND GET BRIGHTER, BUT DID NOT DISAPPEAR

24. In order that you can give as clear a picture as possible of what you saw, 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.

SIMILAR TO COMET WITH SHORT TAIL

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

- a. Inside a building *WHEN FIRST NOTED UAS*
- b. In a car
- c. Outdoors *OBSERVED UAS OUTDOOR*
- d. In an airplane (type) *ASST*
- 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. 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?

WAS LOOKING OUT OF WINDOW WHEN ATTRACTED BY TWINKLING OF LIGHT

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 | <input checked="" type="radio"/> d. Southeast | f. Southwest | h. Northwest |
| | | | i. Overhead |

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

- | | | | |
|--------------|---|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | <input checked="" type="radio"/> d. Southeast | f. Southwest | h. Northwest |
| | | | i. Overhead |

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

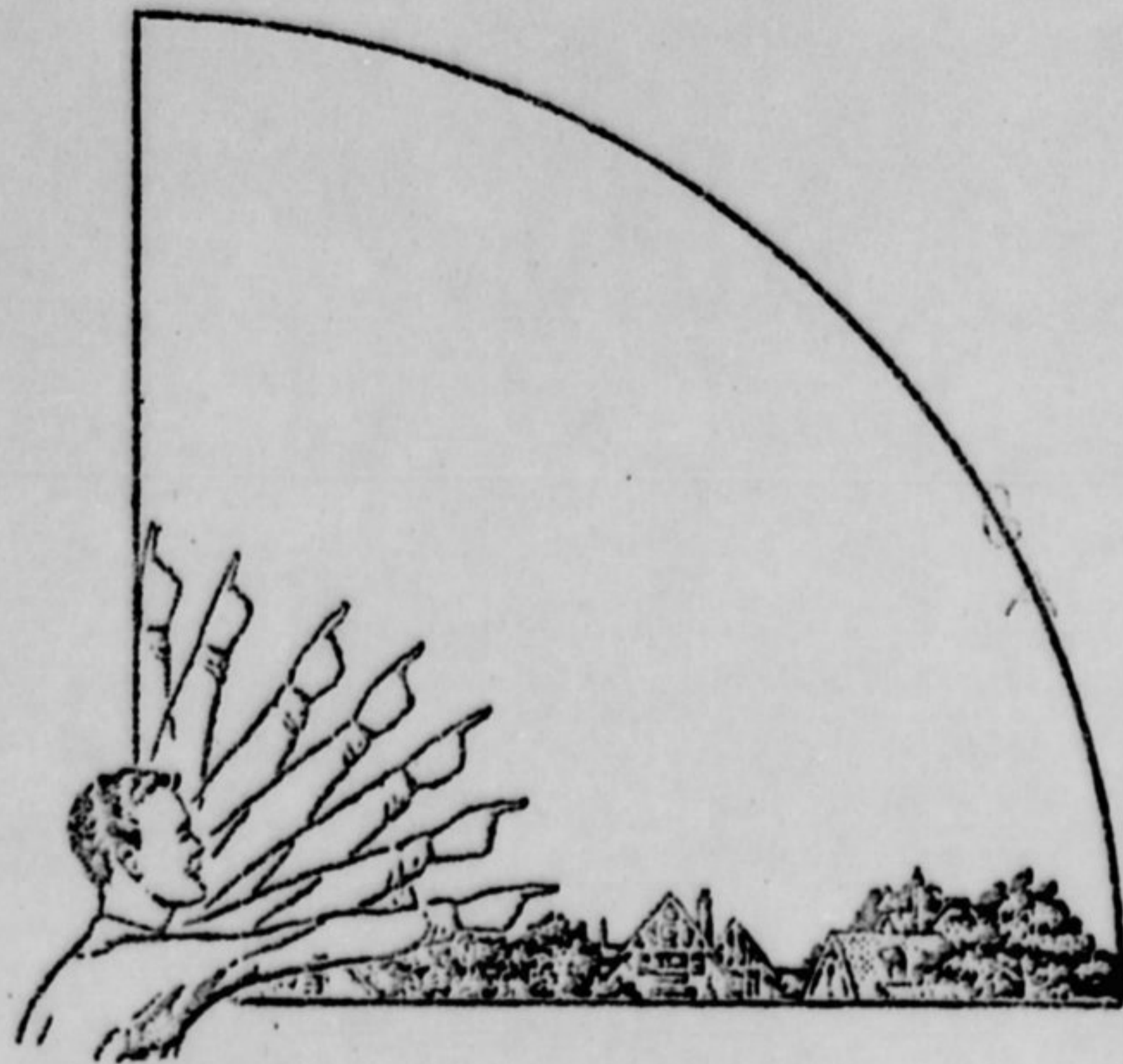
31.1 When it first appeared:

- a. From true North 92 degrees.
- b. From horizon 25-30 degrees.

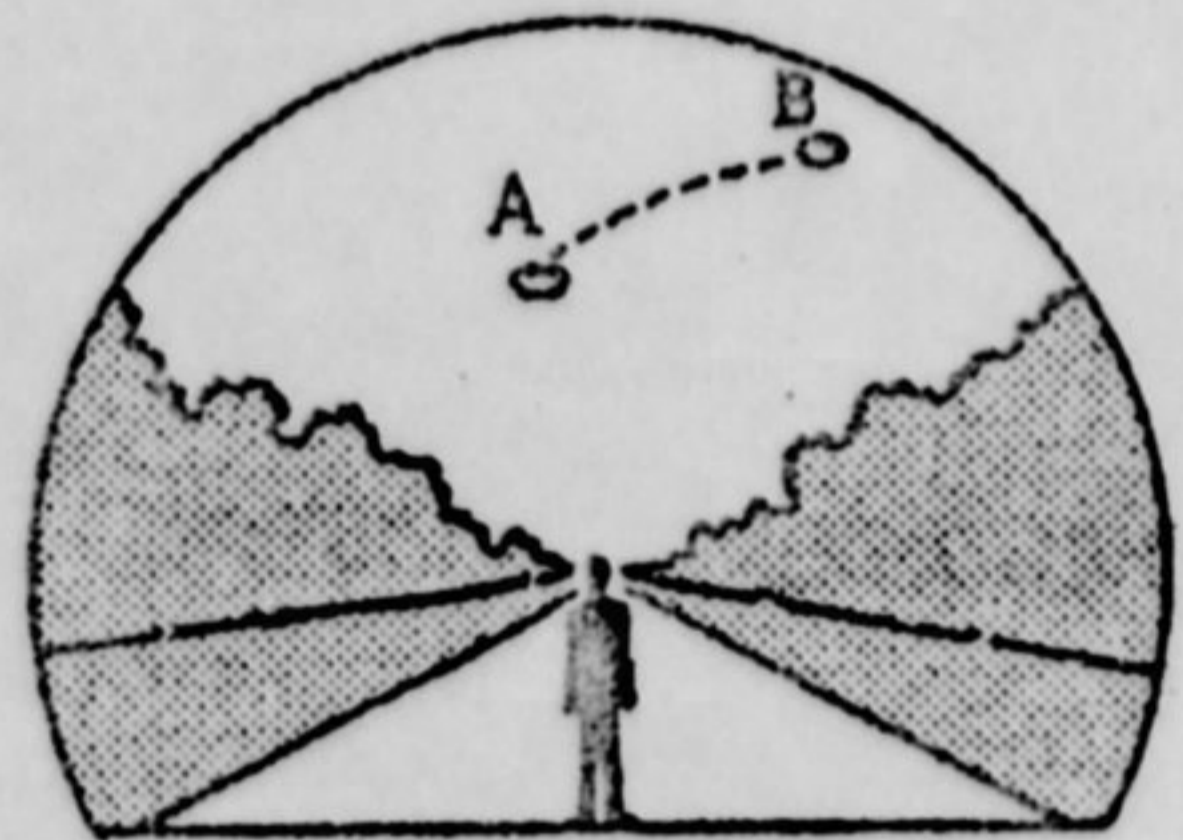
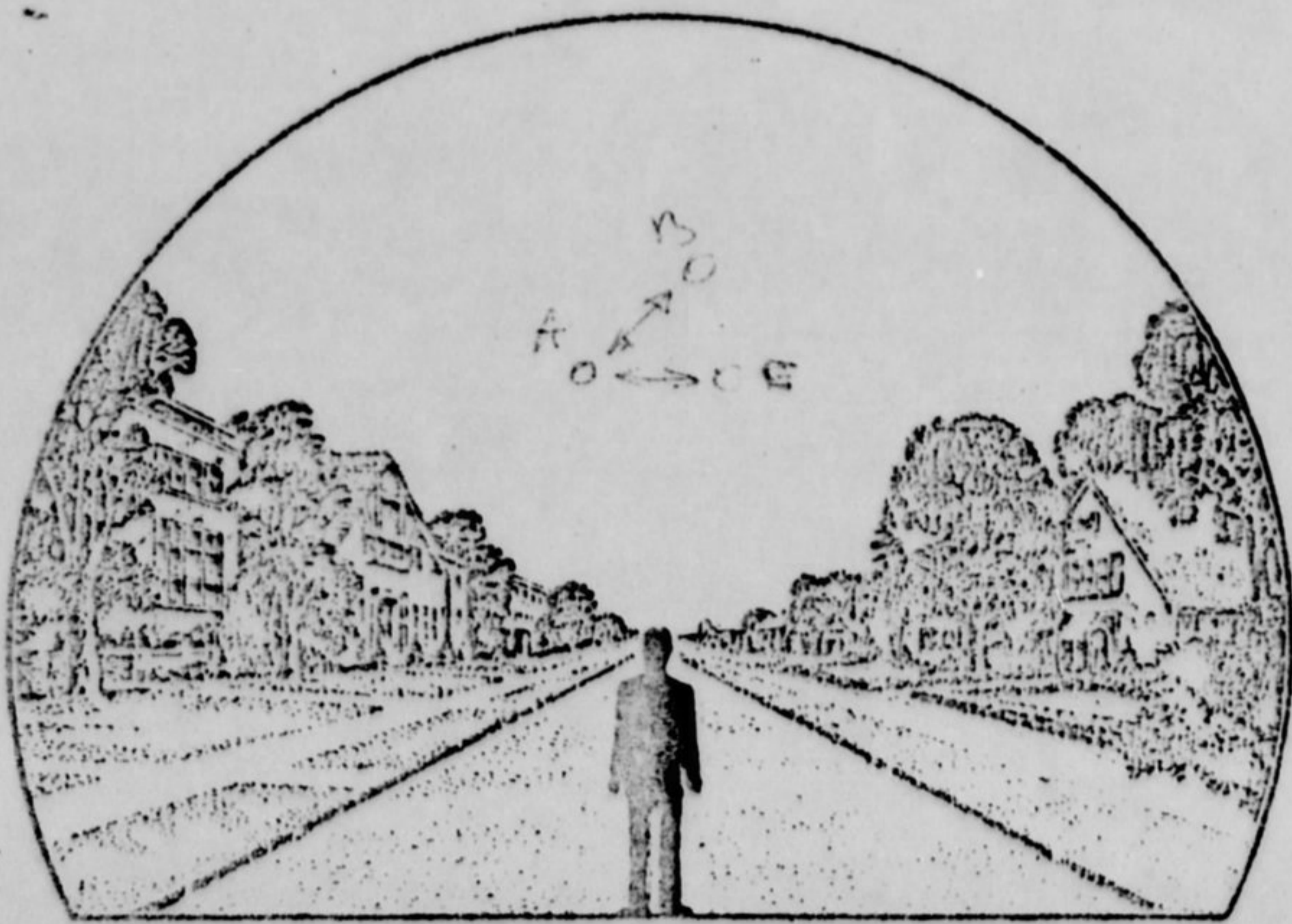
31.2 When it disappeared:

- a. From true North _____ degrees.
- b. From horizon _____ degrees.

32. In the following sketch, imagine that you are 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" on the *same* curved line to show how high the object was above the horizon (skyline) when you *last* saw it.



33. In the following larger 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. Refer to smaller sketch as an example of how to complete the larger sketch.



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

CLOUDS (Circle One)

- a. Clear sky
 b. Hazy
 c. Scattered clouds
 d. Thick or heavy clouds

WEATHER (Circle One)

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

35. When and to whom did you report that you had seen the object?

9 JAN 1961
 Day Month Year

REPORTED TO DO, ATIC

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:

SON - CHARLES FRY - SAME ADDRESS
 DAUGHTER, MRS. [REDACTED]

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?

REPORTED UFO LAST SUMMER, OBSERVED PDC
 SAME AREA, PREVIOUS UFO HAD SIMILAR COLOR
 BUT TRAVELLED VERY FAST & WAS VERY HIGH IN SKY.

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

DOES NOT KNOW HAS NEVER SEEN ANYTHING SIMILAR

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? 40000 Feet per second

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? At least 10 miles

41. Please give the following information about yourself:

NAME [REDACTED] Last Name [REDACTED] First Name [REDACTED] Middle Name

ADDRESS [REDACTED] Street WINDSBURG City [REDACTED] Zone [REDACTED] State Calif

TELEPHONE NUMBER [REDACTED]

Age 52 Sex M

Indicate any additional information about yourself, including any education, which might be pertinent.

42. Date you completed this questionnaire:

Day

Month

Year