

PROJECT 10073 RECORD CARD

1. DATE 2 Jul 61	2. LOCATION N Dayton, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon	
3. DATE-TIME GROUP Local 0310 GMT 020810Z	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 <input checked="" type="checkbox"/> Probably Astronomical <i>VENUS</i> <input type="checkbox"/> Possibly Astronomical	
7. LENGTH OF OBSERVATION 5-8 min	8. NUMBER OF OBJECTS 1	9. COURSE Stationary	<input type="checkbox"/> Other <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown	
10. BRIEF SUMMARY OF SIGHTING Bright white, star-like looked like bright light. Sort of fuzzy.		11. COMMENTS Witnesses watched objt for several min before reporting sighting and never saw it disappear. Venus was in position reported and it is very bright. Witnesses were looking at it through a thin overcast which would account for its fuzziness and apparent large size. It is therefore concluded that the objt re- ported was probably Venus.		

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? *In view*
2 July 1967
 Day Month Year

2. Time of day: 3:10 or 3:11 am
 Hour Minutes
 (Circle One): A.M. or P.M.

3. Time Zone: (Circle One): Eastern
 Central
 Mountain
 Pacific
 Other _____
 (Circle One): a. Daylight Saving
 b. Standard

4. Where were you when you saw the object?
NESTLE PLANT Huber Heights
 Nearest Postal Address City or Town State or Country
 Additional remarks: _____

5. How long was object in sight? _____ Hours 5-8 min before calling
 Minutes Seconds
 5.1 How was time in sight determined? Still in sight
 a. Certain c. Not very sure
 b. Fairly certain d. Just a guess

6. What was the condition of the sky?
 DAY NIGHT
 a. Bright a. Bright
 b. Cloudy b. Cloudy rather overcast

7. IF you saw the object during DAYLIGHT, 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, 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

what said it looked like bright light

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 checked="" type="radio"/> No | <input type="radio"/> Don't Know |
| e. Change brightness? | <input type="radio"/> Yes | <input checked="" 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 type="radio"/> Yes | <input checked="" 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?

Naked Eye

- | | | | | | |
|-----------------|-----|----|---------------|-----|----|
| 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 pew

b. Color Bright white

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.

Similar to a star

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
- see of fuzzy of Other*

19. IF there was MORE THAN ONE object, then how many were there? just 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.

Moving slowly East from North Road

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

Bug Star

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?

Does not cover fourth of object
 Caller performed experiment while I talked to her
 on phone

23. Did the object disappear while you were watching it? If so, how?

Still in view

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.

Bright Star

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 (type) _____
 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?

*Just going to bed and looked out
the window*

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)

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

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

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

- | | | | |
|------------------------------------|--|------------------------------------|------------------------------------|
| <input type="radio"/> a. North | <input checked="" type="radio"/> c. East | <input type="radio"/> e. South | <input type="radio"/> g. West |
| <input type="radio"/> b. Northeast | <input type="radio"/> d. Southeast | <input type="radio"/> f. Southwest | <input type="radio"/> h. Northwest |
| | | | <input type="radio"/> 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 45-50 degrees.
 b. From horizon 30-35 degrees.

31.2 When it disappeared:

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

*Still in site
3:25 AM*

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

overcast

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?

2 Day July Month 61 Year

*Letter reported to AFIC
 ID at approx 3:15 AM
 by pilot*

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:

[Redacted names and addresses]
Durham, N.C., OHIO

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?

No opinion

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

(Circle One) Yes No

Seems to be stationary at moment

IF you answered YES, then what speed would you estimate? _____

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? _____

41. Please give the following information about yourself:

NAME _____
Last Name First Name Middle Name

ADDRESS _____
Street City Zone State

TELEPHONE NUMBER _____

Age 40 ish Sex F

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

Nothing

42. Date you completed this questionnaire:

2 Day July Month 68 Year