

PROJECT 10073 RECORD CARD

1. DATE 2 May 1962	2. LOCATION Fairborn, Ohio	12. 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 type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other _____ <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
3. DATE-TIME GROUP Local 4:30 pm GMT 02/2130Z	4. TYPE OF OBSERVATION <input 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 type="checkbox"/> No	6. SOURCE Civilian	
7. LENGTH OF OBSERVATION Seconds	8. NUMBER OF OBJECTS	9. COURSE
10. BRIEF SUMMARY OF SIGHTING Brilliant blue-white streak with red tail. Report fm worker who advised that he thought it was a jet at first. Report phoned in to OOD:		11. COMMENTS Reported during numerous calls concerning meteor shower. This report not included with other because of time difference. Considered meteor sighting because of characteristic of jet like appearance and tail although it is also possible that objt was actually a jet a/c.

ATIC FORM 329 (REV 26 SEP 52)

Mr. ~~XXXXXXXXXX~~ &
Beavers, was in Fairborn
this date time 4:30.
He saw object left of Cement
Plant - about level eye in
sky, racing off to the right
Color, Brilliant Blue white
streak, with red tail
He advised he thought it
was a jet at first
Time 22.58

2 MAY 1962

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? Speed of a jet

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? 2 miles

41. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]
Last Name First Name Middle Name

ADDRESS [Redacted] [Redacted] [Redacted] Ohio
Street City Zone State

TELEPHONE NUMBER [Redacted]

Age _____ Sex Male

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

42. Date you completed this questionnaire:

_____ :Day _____ Month _____ Year

270 279 205
280 286 6AES

74127-Modo

910

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1. DATE 2 May 1962	2. LOCATION Fairborn, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local _____ GMT 03/0240Z	4. TYPE OF OBSERVATION <input 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 type="checkbox"/> No	6. SOURCE Civilian		<input checked="" type="checkbox"/> Was Astronomical Meteor <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION 1 min	8. NUMBER OF OBJECTS 1	9. COURSE NW	<input type="checkbox"/> Other _____ <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
10. BRIEF SUMMARY OF SIGHTING Long streak 4-5'. About 300' above ground. Observed in W heading NW. Witness in car and observation made from moving auto. Color orange. Gave off sparks and looked like jet. Very bright believed to be 2-3 mi. away.		11. COMMENTS Part of meteor shower on this day. Objt breaking into pieces or giving off sparks characteristic of bolide. Probable overestimation of duration. Meteor shower in area and reports on TV and radio. Possible part of aquarids shower although this is typically a morning shower.	

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>2</u> <u>MAY</u> <u>1962</u> <small>Day Month Year</small> </p>	<p>2. Time of day: <u>2040</u> _____ <small>Hour Minutes</small></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;"> <ul style="list-style-type: none"> a. Eastern b. Central c. Mountain d. Pacific e. Other _____ </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> (Circle One): a. Daylight Saving b. Standard </td> </tr> </table>		<ul style="list-style-type: none"> a. Eastern b. Central c. Mountain d. Pacific e. Other _____ 	<ul style="list-style-type: none"> (Circle One): a. Daylight Saving b. Standard
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<p>4. Where were you when you saw the object? <u>Driving west on main st in Fairborn</u></p> <p style="text-align: center;"> <small>Nearest Postal Address City or Town State or Country</small> </p> <p>Additional remarks: _____</p>			
<p>5. How long was object in sight? _____ <u>1</u> _____ <small>Hours Minutes Seconds</small></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;"> <ul style="list-style-type: none"> a. Certain b. Fairly certain </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> c. Not very sure d. Just a guess </td> </tr> </table>		<ul style="list-style-type: none"> a. Certain b. Fairly certain 	<ul style="list-style-type: none"> c. Not very sure d. Just a guess
<ul style="list-style-type: none"> a. Certain b. Fairly certain 	<ul style="list-style-type: none"> c. Not very sure d. Just a guess 		
<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> <ul style="list-style-type: none"> a. Bright b. Cloudy </td> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">NIGHT</p> <ul style="list-style-type: none"> <input checked="" type="radio"/> a. Bright b. Cloudy </td> </tr> </table>		<p style="text-align: center;">DAY</p> <ul style="list-style-type: none"> a. Bright b. Cloudy 	<p style="text-align: center;">NIGHT</p> <ul style="list-style-type: none"> <input checked="" type="radio"/> a. Bright b. Cloudy
<p style="text-align: center;">DAY</p> <ul style="list-style-type: none"> a. Bright b. Cloudy 	<p style="text-align: center;">NIGHT</p> <ul style="list-style-type: none"> <input checked="" type="radio"/> a. Bright b. Cloudy 		
<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;"> <ul style="list-style-type: none"> a. In front of you b. In back of you c. To your right </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> d. To your left e. Overhead f. Don't remember </td> </tr> </table>		<ul style="list-style-type: none"> a. In front of you b. In back of you c. To your right 	<ul style="list-style-type: none"> d. To your left e. Overhead f. Don't remember
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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:

Sparks coming off it — looked like a jet

(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?

Very bright

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? <i>Sparks</i> | 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? <i>very bright</i> | Yes | <input checked="" type="radio"/> No | Don't Know |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't Know |
| g. Flash or flicker? | Yes | <input checked="" type="radio"/> No | Don't Know |
| h. Disappear and reappear? | Yes | <input checked="" type="radio"/> No | 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 | 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 ho

b. Color Orange

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? _____

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?

long; streak about 4 or 5 feet

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?

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.

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?

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? 25 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
 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 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 _____ degrees.
 b. From horizon _____ degrees.

31.2 When it disappeared:

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

*about 300' above
the ground -*

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?

_____ 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?